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**Title**

*E-Referrals to the MD Quitline During COVID-19: A Retrospective Descriptive Analysis at the University of MD Medical System*

**Priority 1 (Research Category)**

Smoking Cessation

**Presenters**

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**Abstract**

Context: Tobacco use remains a significant public health burden, especially in the face of the COVID-19 pandemic. Prior to the pandemic, the Maryland Tobacco Quitline (MDQL), an evidence-based cessation service, collaborated with the University of Maryland (UM) Department of Family Medicine to create a clinical decision support (CDS) tool. The tobacco cessation CDS created in the Epic electronic health record (EHR) allows providers to electronically refer (e-refer) patients to the MDQL. However, as the pandemic unfolded, an unexpected reduction was seen across the medical system in tobacco cessation e-referrals. Objective: This study explores trends in the number of e-referrals made via the CDS during the COVID-19 pandemic at UM Medical System (UMMS) practices. Study Design: A retrospective descriptive analysis. Setting or Dataset: MDQL data reports for primary care and specialty ambulatory practices in the University of Maryland Medical System. Population studied: Participants (N = 726) included outpatients e-referred for tobacco cessation to the MDQL through the Epic EHR. Outcome Measures: Tobacco cessation e-referrals generated by primary care and specialty providers, number of patients who accepted follow-up services from the MDQL, and number of patients who accepted nicotine replacement therapy (NRT). Results: Based on quarterly patient-level MDQL reports, 726 e-referrals were submitted by the UMMS from January 1, 2020 to December 31, 2020. Among them, 116 e-referrals (16%) were system-rejected due to duplicate referral or incomplete referral data, and 610 e-referrals (84%) were successfully transmitted. Among 610 transmitted referrals, 16.4% of patients accepted follow-up services. Among 100 patients who accepted MDQL services, 8 patients (8%) requested NRT and established a quit date, and 64 patients (64%) requested only NRT. The number of referrals reduced dramatically after the onset of the COVID-19 pandemic. Between 1st and 4th quarter 2020 there was a 54.3% reduction in e-referrals. Compared to 2019, there was a 32.1% reduction in e-referrals as of year-end 2020. Conclusions: Tobacco cessation e-referrals decreased throughout 2020, and overall compared to 2019, while healthcare providers shifted their focus from preventive medicine and primary care to COVID-19 related efforts. It will be important to urge providers to return to

preventive medicine, screen all patients for tobacco use at every visit, and connect patients to cessation resources.