

Oklahoma Tobacco Helpline

FY25 Evaluation Report

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A Program of TSET

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Final report submitted to TSET 9/29/25 using FY25 registration data captured on 8/11/25.

FY25 Key Findings

Enrollment

27,518 Oklahomans registered for services from the Oklahoma Tobacco Helpline during FY25. This is similar to FY24 (n=27,274).

Satisfaction

Almost all Helpline participants (**96.4%**) are very, mostly or somewhat satisfied with the services they received.

Quit Rates

At the 7-month follow-up evaluation, **45.4%** of Helpline participants reported not using tobacco for 30 or more days.

FY25 Key Findings

Statewide Coverage

Tobacco users in **all 77** counties registered for Helpline services during FY25.

Referrals

13,002 referrals to the Helpline were received from health care providers and community centers. These referrals led to **1208** Helpline enrollments.

Reach

3.8% of all cigarette smokers in the state received evidence-based cessation services from the Helpline.

Introduction

The Oklahoma Tobacco Helpline provides coaching, free NRT and multiple opportunities for digital engagement to support a tobacco* user's quit experience. Live chat, live texting, coach-led group video sessions, online courses, and milestone-driven action cards are available to supplement traditional phone coaching. Tobacco users choose which methods they would like to use, and insurance status determines eligibility for either Standard Care Coach or Coach+ services. Coach+ is available to most tobacco users and includes 5 coaching sessions and up to 8 weeks of mono or combo NRT. Those with private insurance are eligible for Standard Care Coach, which includes 5 sessions and 2 weeks of mono NRT. A coaching session may be a one-on-one interaction with a coach via phone, text or chat, or a coach-led group video session.

*In this report, "tobacco user" includes non-tobacco nicotine users, such as e-cigarette users, unless otherwise noted.

Introduction

Upon enrollment, tobacco users may be further stratified to receive an enhanced program, such as the pregnancy or behavioral health program.

- The pregnancy protocol allows for 7 coaching sessions and up to 8 weeks of NRT. Tobacco users who report pregnancy, planning pregnancy, breastfeeding or giving birth in the last year are eligible.
- Helpline registrants who report at least one mental health or substance use disorder and believe their condition will interfere with their ability to quit tobacco, are enrolled in the Behavioral Health Program (BHP) and are eligible for 7 coaching sessions and up to 12 weeks of combination NRT.

Tobacco users who report the use of menthol products also receive coaching tailored for menthol use. This new enhancement (launched April 2024) emphasizes how menthol products are more addictive and harder quit. Beginning May 8, 2025, all menthol users were eligible for 8 weeks of combination NRT.

Introduction

Key events influence registration and utilization patterns.

- In April 2024, a large proportion of SoonerCare (Medicaid) members were transitioned to one of three managed care entities (MCEs). In this report, these Medicaid participants are reported as privately insured.
- Two “Limited Time Offers” (LTOs) occurred in FY25 during the months of September and February. During these months, all Helpline registrants could receive up to 8 weeks of combination NRT.
- Starting in March 2025, financial incentives were offered to tobacco users referred to the Helpline by a provider via fax or online.
- Data for this annual report are likely influenced by these event. Each of these events are evaluated and described in other reports.

Evaluation Methods

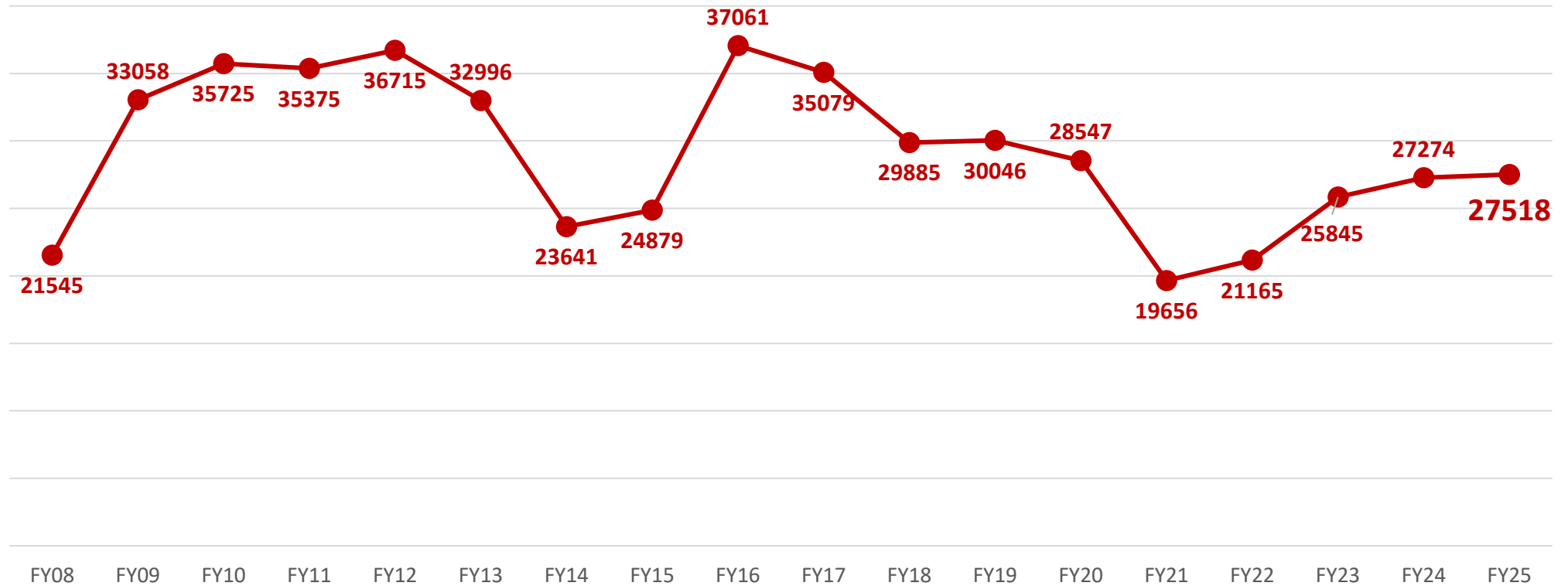
The Department of Biostatistics and Epidemiology within the University of Oklahoma Health Sciences is the independent evaluator for the Oklahoma Tobacco Helpline. The evaluation team uses registration data from the Helpline service provider (RVO) to report registration and service utilization patterns. Participant satisfaction with Helpline services and participant success in quitting tobacco are evaluated through a 7-month follow-up survey of a random sample of registrants. Professional Data Analysts (PDA) is contracted to conduct the follow-up survey.

Registration, utilization and quit outcomes data for FY25 are summarized in this report, using methods consistent with those recommended by the North American Quitline Consortium (NAQC).

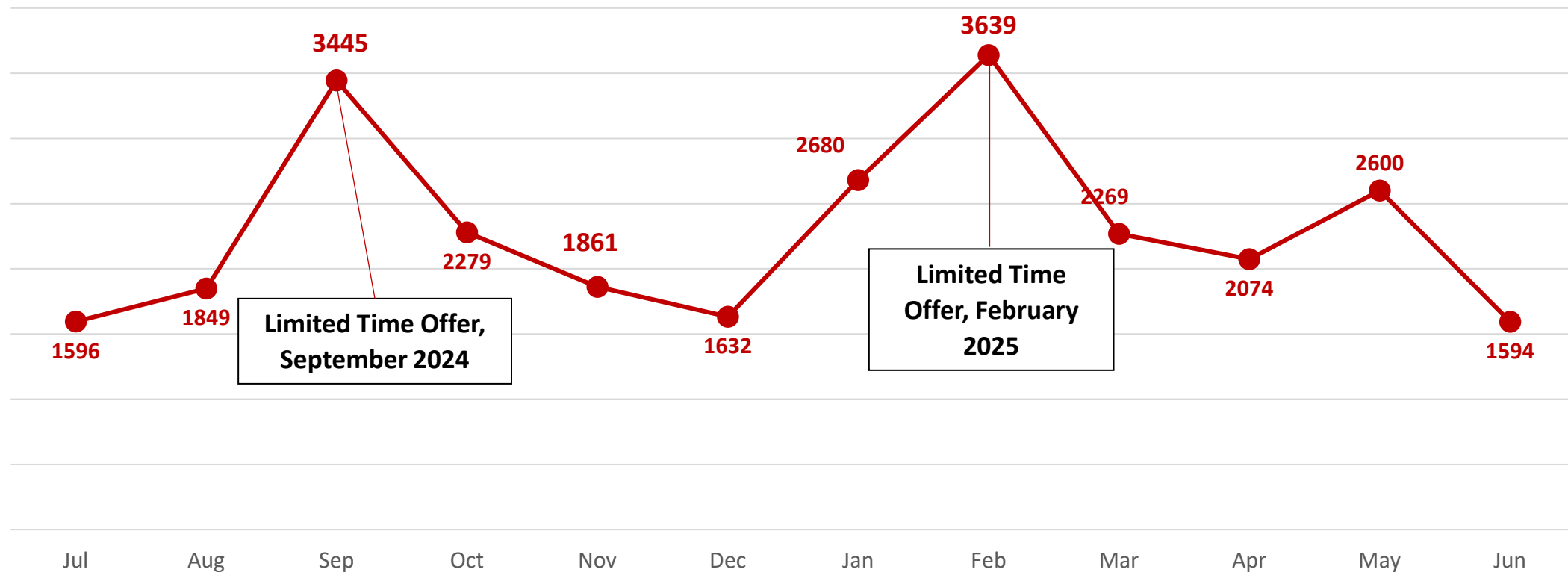
Registration and Utilization Patterns

- During FY25, from July 1, 2024 through June 30, 2025, a total of 27,518 Oklahomans registered for services by calling the 1-800-QUITNOW telephone number, registering online or by a referral from a healthcare provider. This is less than 1% higher than what was observed in FY24 (n=27,274 tobacco users). The FY25 number reported includes all registrants, including 214 Oklahomans who identified as non-tobacco users, and 2212 who did not answer the tobacco use question. HealthChoice members enrolling in services are not included in this report (n=187).
- Helpline registrations have varied over time and vary by month within the FY. In an effort to increase the utilization of Helpline services, two “Limited Time Offers” (LTO) were launched, expanding eligibility for 8 weeks of free NRT to all registrants. These promotions took place during the months of September 2024 and February 2025. There was a significant increase in registrations during the September and February LTOs.

Registration Patterns by FY

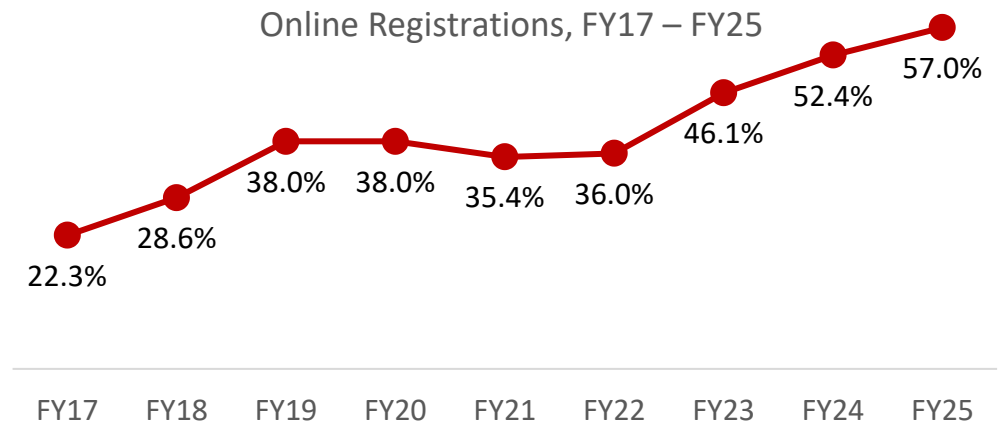


Registration Patterns by Month, FY25



Mode of Enrollment

Mode of Enrollment	FY25	
	N	%
Phone	10,657	38.7%
Online	15,680	57.0%
Referral	1181	4.3%



Tobacco users can register for Helpline services by calling 1-800-QUITNOW or visiting the Helpline webpage at www.okhelpline.com. Tobacco users could also text QUITNOW to 333888 and be connected to the Helpline for online registration. In FY25, 57.0% of tobacco users registering for services did so online and 38.7% registered by phone. Online registrations have gradually increased since FY17, and the dramatic increase was likely due to the text-to-quit option and the redesigned website and registration process, which requires much less information at the time of registration.

Utilization of Helpline Services

Among Helpline registrants, 37.9% enrolled in Standard Care Coach+, and 21.0% in Standard Care Coach. More than a third (37.6%) enrolled in the Behavioral Health Program (BHP). The number of women who were pregnant, post-partum, breastfeeding and planning pregnancy registering for services was similar to last year with 953 (3.5%, compared to 938 in FY24).

Helpline Program	FY25	
	N	%
Standard Care Coach	5781	21.0%
Standard Care Coach+	10,426	37.9%
Pregnancy/Post-partum	953	3.5%
Behavioral Health Program	10,358	37.6%
Total	27,518	100%

Referrals to the Oklahoma Tobacco Helpline

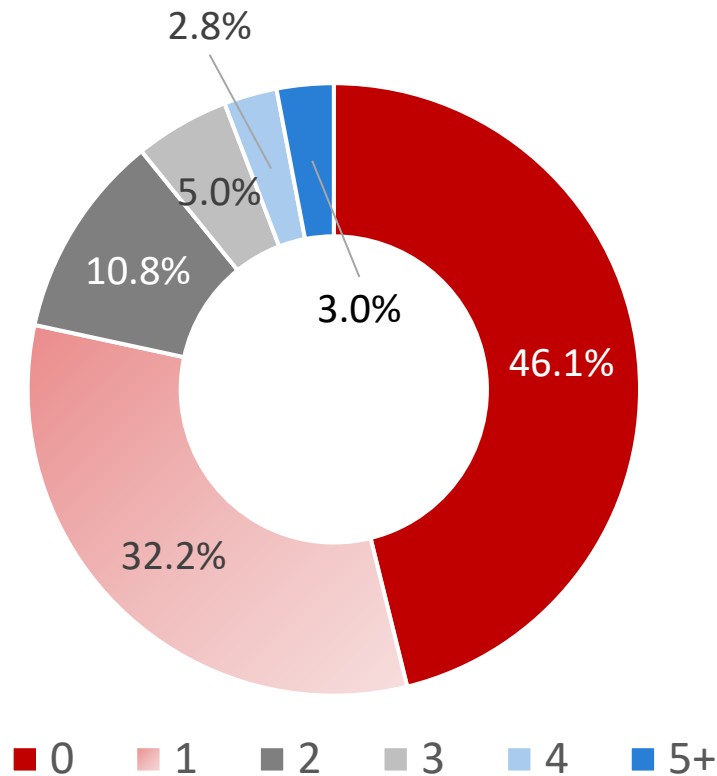
Referrals offer the opportunity for health care providers and other agencies to proactively request that the Helpline contact their patients or clients who want help quitting tobacco. Fax referrals continue to be an option for many providers, especially in rural areas. Electronic referrals are incorporated into electronic health records, while online referrals occur via a web portal. Overall number of referrals in FY25 (n=13,002) was slightly higher than FY24 (n=12,097), but the number of tobacco users actually registering for services as a result of a referral was lower (n=1208) in FY25 compared to FY24 (n=1473). The proportion accepting a referral and enrolling in Helpline services was meaningfully different when comparing fax referrals (19.8%) to electronic (7.2%) and online (10.6%) referrals. The high proportion (69.9%) classified as “Unreachable” refers to those referrals where contact was never made with the participants. They either had non-working phone numbers or did not answer or return calls from the Helpline. The table provides detailed data related to the three different referral options with outcome data overall and by referral type.

In March 2025 financial incentives were offered to fax and online referrals in an effort to increase enrollment for Helpline services. Early evaluation results indicate a doubling of the enrollment rate among referrals offered the incentive.

Electronic, Fax and Online Referrals to the Oklahoma Tobacco Helpline

	Type of Referral						All Referrals Combined	
	Electronic Referral		Fax Referral		Online Referral			
Referral Status	N	%	N	%	N	%	N	%
Accepted & enrolled in services	497	7.2%	146	19.8%	565	10.6%	1208	9.3%
Declined services when contacted	510	7.3%	34	4.6%	187	3.5%	731	5.6%
Unreachable	4,644	66.9%	424	57.6%	4023	75.6%	9091	69.9%
Duplicate referral	935	13.5%	23	3.1%	90	1.7%	1048	8.1%
Already enrolled at time of referral	13	0.2%	12	1.6%	22	0.4%	47	0.4%
Do not contact	302	4.3%	38	5.2%	172	3.2%	512	3.9%
Pending referral	15	0.2%	54	7.3%	241	4.5%	310	2.4%
Rejected referral	30	0.4%	5	0.7%	20	0.4%	55	0.4%
Total	6,946		736		5,320		13,002	

Number of Coaching Sessions Completed



Among Helpline registrants, 46.1% did not complete a coaching session, which would include phone, chat, text or online group sessions.



Among those completing one or more coaching sessions, 98.4% used only one modality and nearly all were telephone (99.0%).

Number of Coaching Sessions Completed by Program

Helpline Program	Mean	Median	Min	Max
Standard Care Coach	0.38	0	0	20
Standard Care Coach+	1.16	1	0	18
Behavioral Health	1.23	1	0	28
Pregnancy/Post-Partum	0.51	0	0	8
All Programs	1.00	1	0	28

- Across all Helpline programs the average number of coaching sessions completed was 1.0.
- Participants in the BHP completed more coaching sessions, 1.23 on average.
- Despite being eligible for up to 7 coaching sessions, women who were pregnant or post-partum completed less than one session on average (0.51).
- Standard Care Coach+ participants completed an average of 1.16 coaching sessions.
- The number of calls completed is summed across individual enrollments in cases where a registrant enrolled more than one time.

Participants Completing Coaching Sessions by Coaching Modality

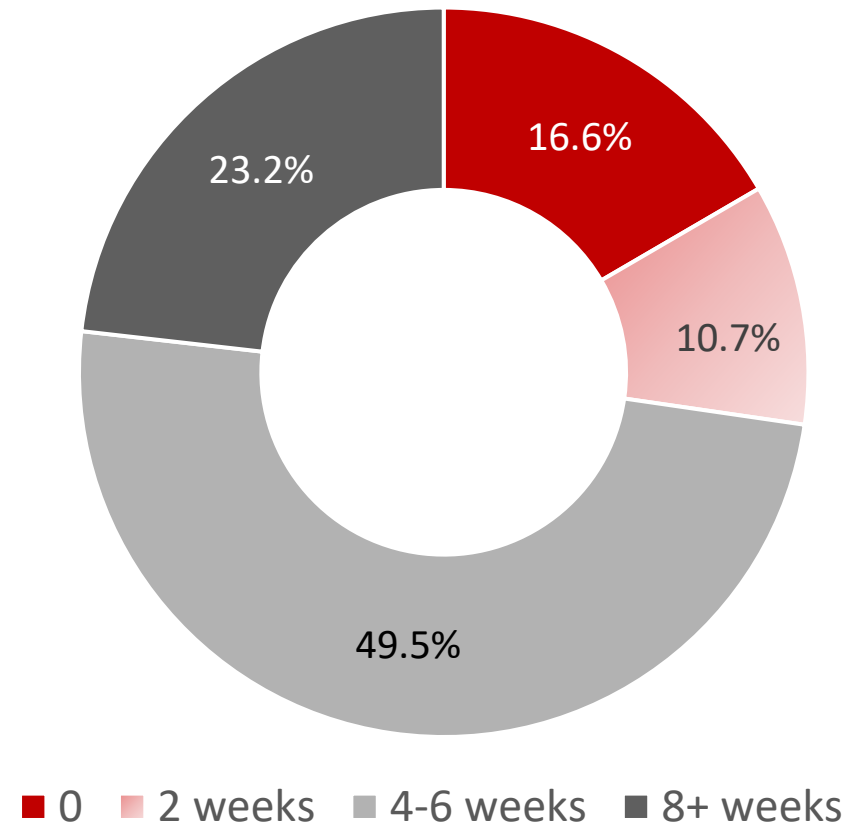
Coaching Modality	N	%*
Phone	14,654	99.0%
Online Chat	220	1.5%
Interactive Text	49	0.3%
Online Group Session	127	0.9%

*% sums to >100% because participants can use >1 coaching modality

The use of online chat, live texting and online group sessions for coaching was infrequent (<3%). Overall, only 1.5% of those completing a session used more than one modality (data not shown).

Weeks of NRT received from the Helpline

- Almost 17% of participants received no NRT from the Helpline, which could be attributed to contraindications for its use, or participant preference to not use NRT.
- 10.7% received a two-week shipment of NRT.
- About half received 4-6 weeks of NRT from the Helpline, and 23.2% received 8 weeks or more.



Type of NRT Received from the Helpline

Type of NRT	N	%
Gum	2080	7.6%
Lozenge	1868	6.8%
Patch	5411	19.7%
Gum and Lozenge	55	0.2%
Patch and Gum	6704	24.4%
Patch and Lozenge	6538	23.8%
Patch, Gum and Lozenge	305	1.1%
No NRT	4557	16.6%

- The largest proportion of tobacco users received the patch and gum (24.4%) or patch and lozenge (23.8%).
- 19.7% received patch alone.
- Almost half received some form of combo NRT.

Summary of Helpline Service Utilization

Helpline Service	N	%
NRT only (no coaching)	8977	32.6%
NRT + Coaching	13,984	50.8%
Coaching (no NRT)	843	3.1%
No NRT, no coaching	3714	13.5%

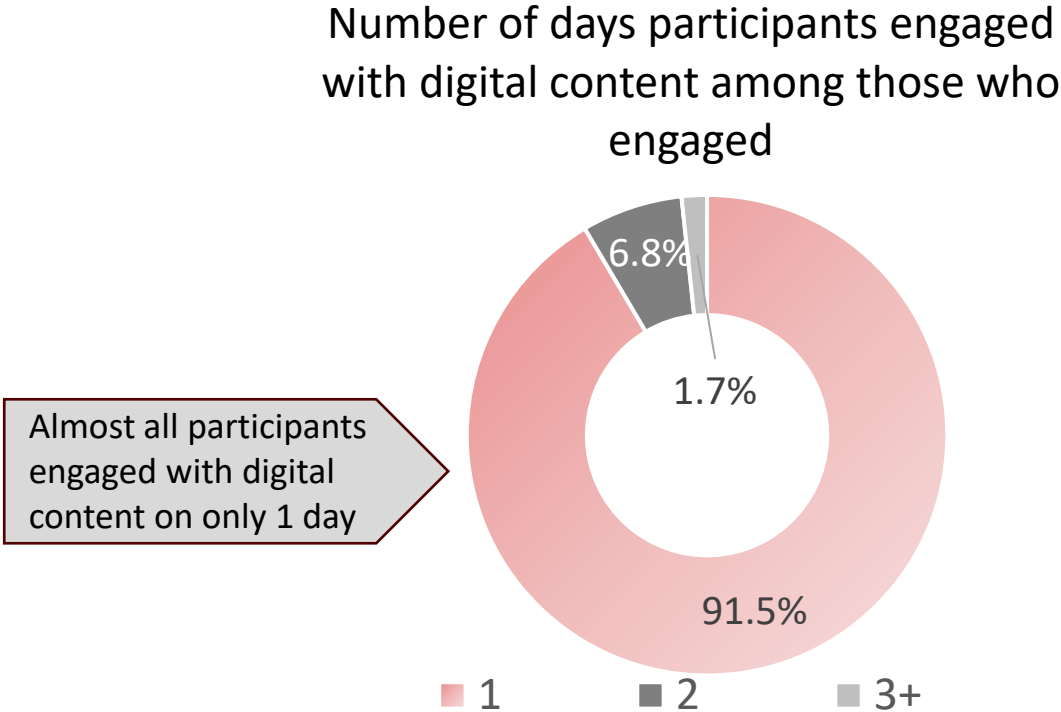
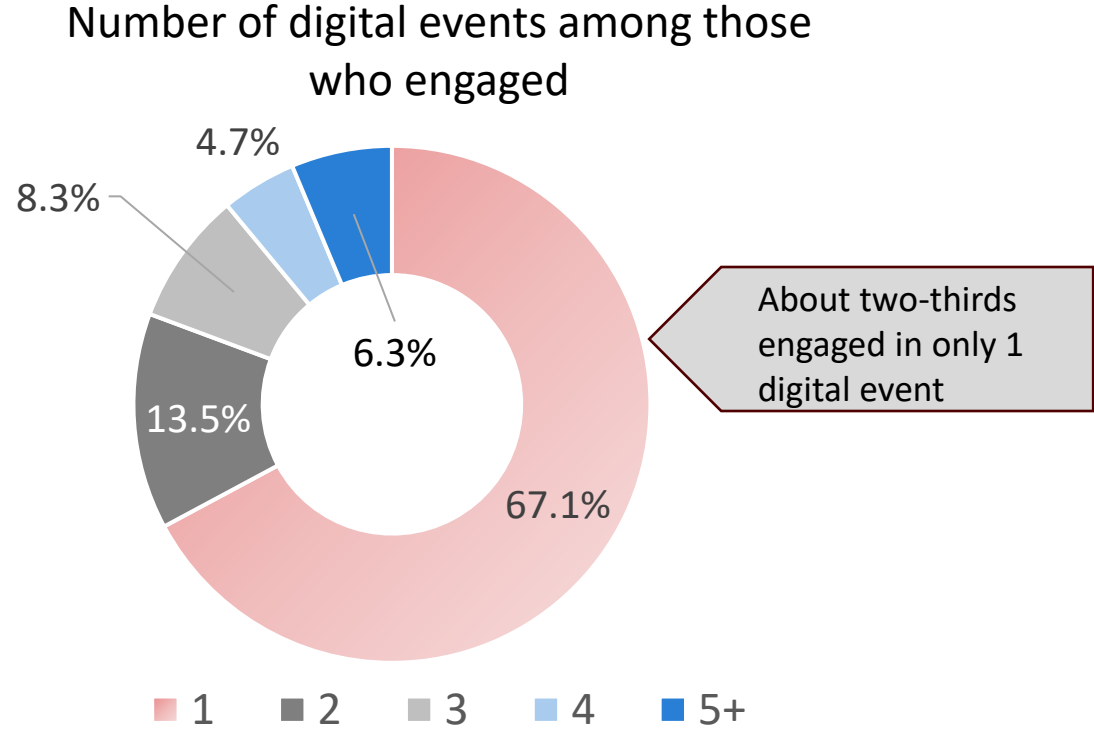
- Participants can receive a combination of evidence-based services (coaching and NRT). In FY25 about half (50.8%) received both coaching and NRT, giving them the best possible support to quit.
- An alarming 13.5% did not receive any evidence-based treatment (NRT or coaching).
- The proportion receiving no services was much higher among online registrants (19.6%) compared to phone enrollments (5.2%).

Digital Engagement

- With the transition to Rally in FY24, Helpline registrants have the ability to engage in a wide variety of digital tools designed to assist with their quit attempt.
- Registrants can have both coaching and digital interactions. Coaching interactions include phone calls, text messages, chats, and group sessions. Digital interactions occur through the participant's dashboard and requires them to log-in to their Rally account.
- Digital interactions include completing a quiz or survey, including the NRT survey required of persons who enroll online; watching a video or reading an article; engaging with a tobacco use/quitting tracker; and clicking on an action card.

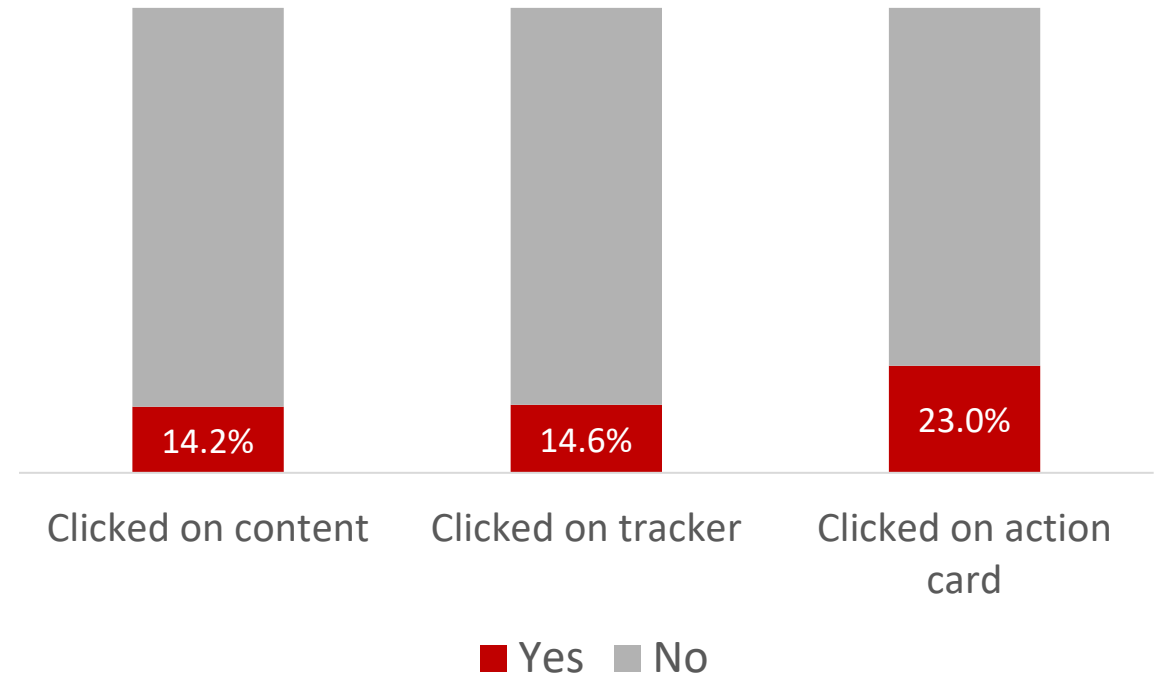
Digital Engagement

More than half of Helpline registrants engaged with one or more digital activity that did not involve a coach (51.3%, n=14,114).



Digital Engagement: Clicks

- Among Helpline registrants who engaged with one or more digital activity that did not involve a coach (n=14,114), less than a quarter used the tracker, action cards, or other content such as videos and articles available to them on their dashboard.
- 96% completed a survey which counts as digital engagement (data not shown).



Treatment Reach of the Oklahoma Tobacco Helpline

Helpline Treatment Reach
among smokers =
3.8%*

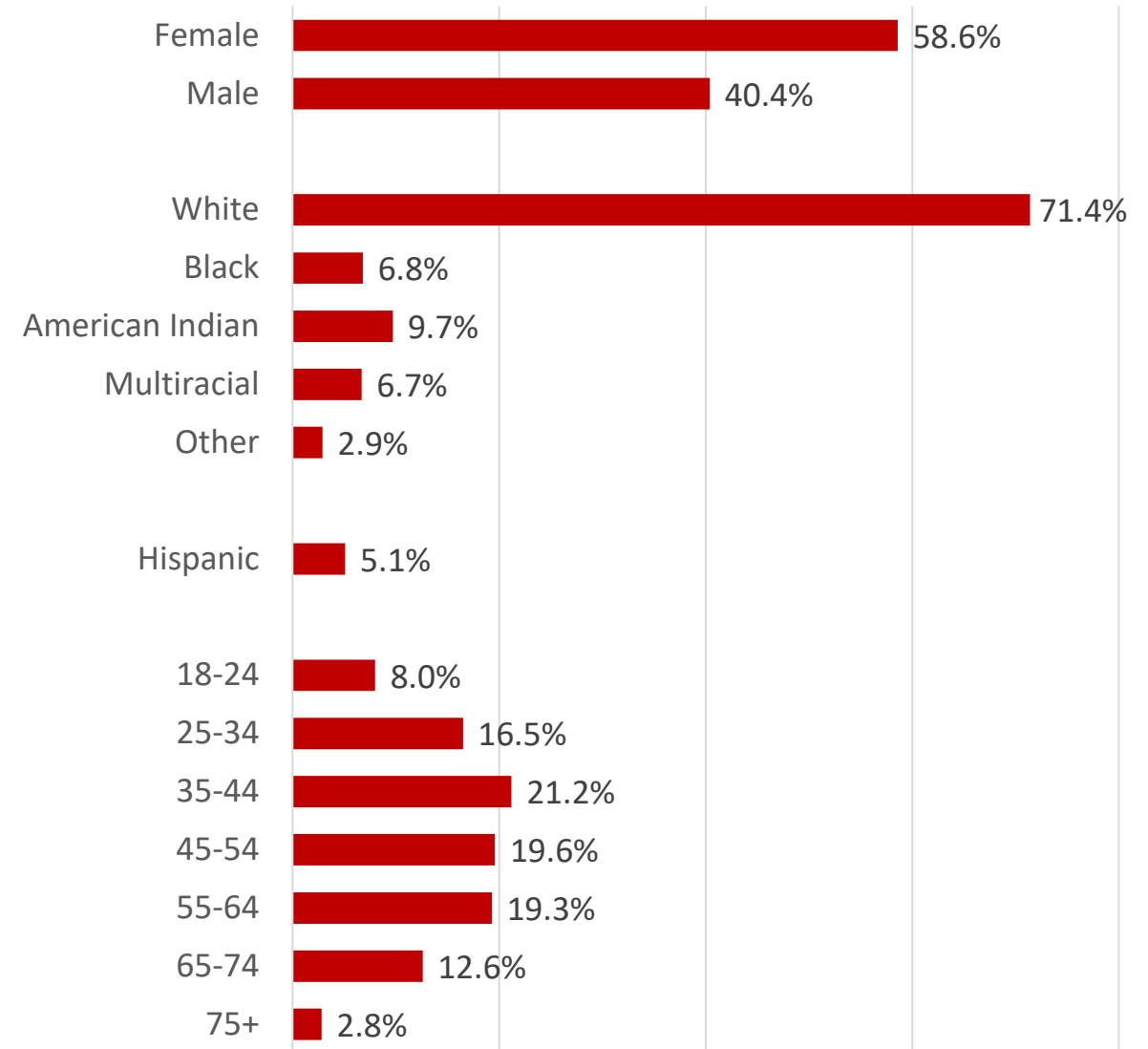
Treatment reach was calculated among persons who smoke cigarettes in Oklahoma. It is the proportion of cigarette users across the state that received evidence-based services from the Oklahoma Tobacco Helpline. Only Helpline registrants who reported using cigarettes at registration and completed a coaching session or who received NRT from the Helpline are counted as having received treatment.

In FY25, 17,740 cigarette smokers completed a coaching session and/or received NRT from the Helpline. Using 2023 BRFSS (most recent data available), there are 463,816 cigarette users in the state, for a calculated reach of 3.8%.

*FY24 treatment reach among cigarette users was 4.0%. The FY25 reach estimate is likely inflated due to outdated BRFSS data. We will recalculate FY25 reach when 2024 BRFSS data become available.

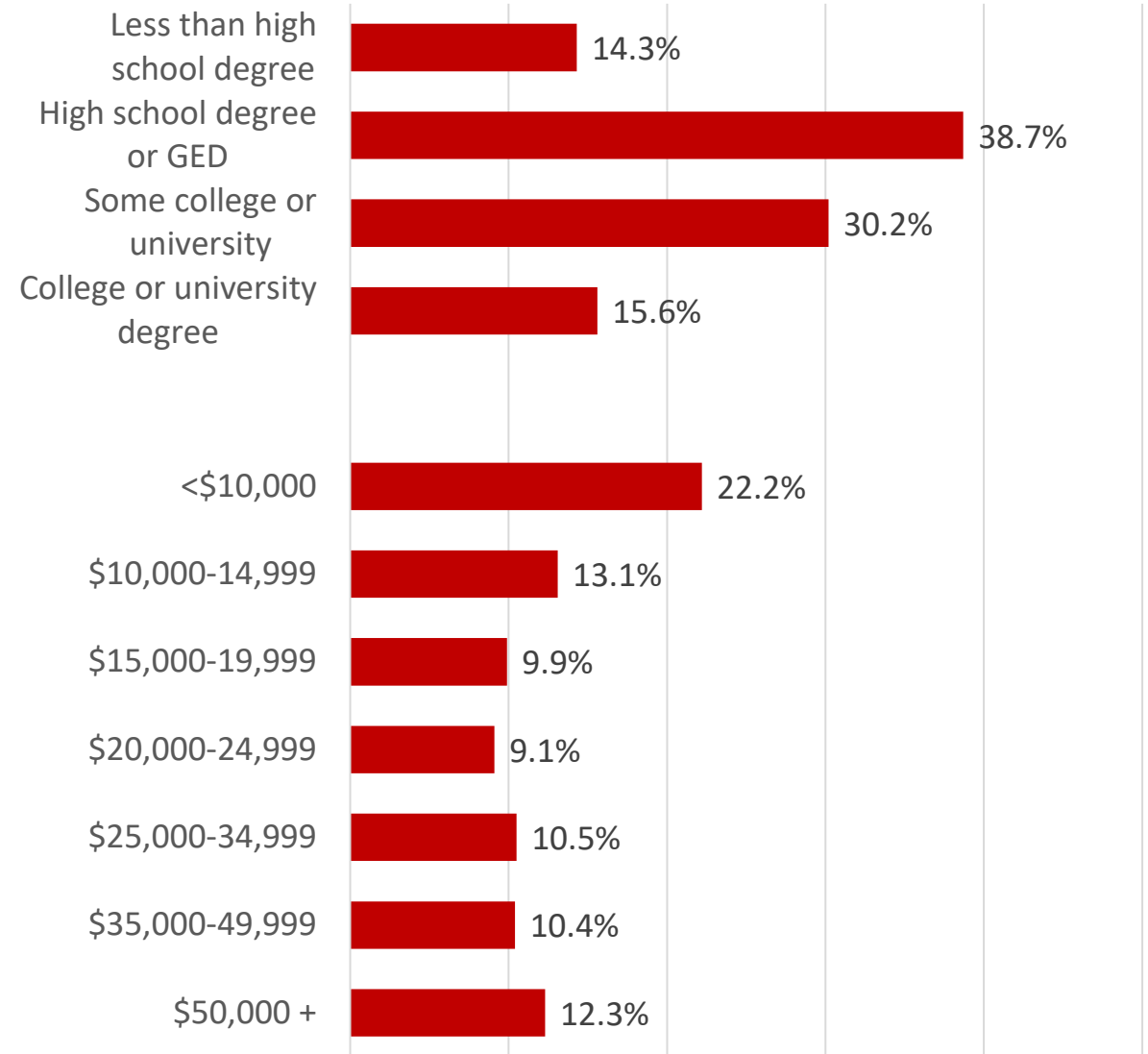
Sex, race/ethnicity and age of Helpline registrants, FY25

- A majority of registrants to the Oklahoma Tobacco Helpline were female (58.6%).
- Helpline registrants were also mostly white (71.4%) and non-Hispanic (94.9%).
- A majority of Helpline registrants was 45 years or older (54.3%).
- Race, ethnicity and age were similar to what has been observed in past years.



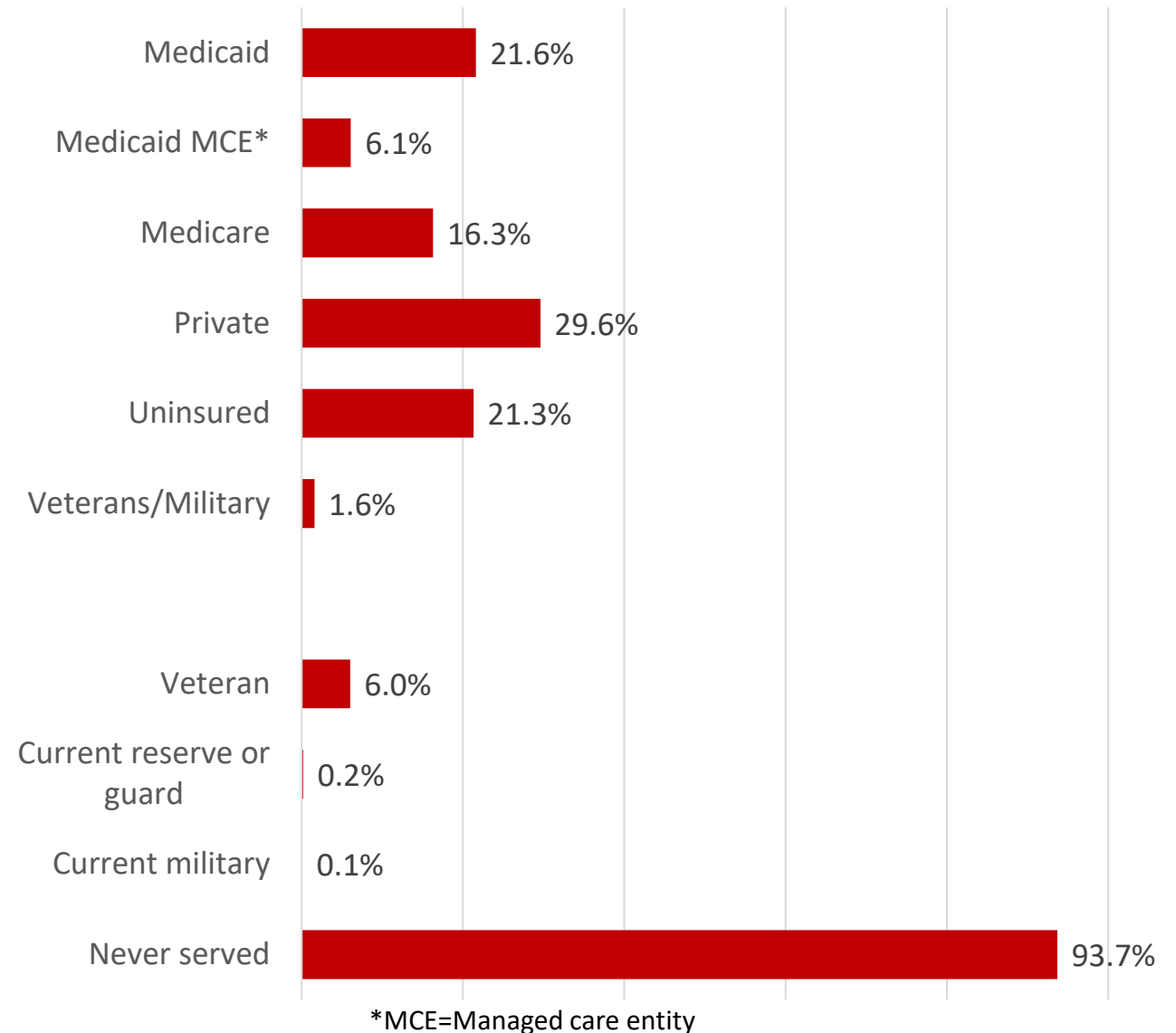
Education and income of Helpline registrants, FY25

- About 1 in 5 Helpline registrants reported less than a high school education.
- A majority of Helpline registrants reported incomes less than \$25,000 (54.3%).



Insurance status and military service among Helpline registrants, FY25

- Privately insured tobacco users accounted for the largest proportion of Helpline registrants (29.6%).
- About 1 in 5 reported traditional Medicaid coverage (21.6%) and another 6.1% reported coverage by one of three Medicaid MCEs.
- Veteran status was reported by 6.0% of registrants.



Helpline Registrants Reporting Mental Health & Substance Abuse Disorders

	N, %
Number (%) ever reporting 1+ MHSAD	14,798 (53.8%)
Number (%) eligible for the BHP: Among those ever reporting MHSAD, those reporting this will make it harder to quit (Yes (52.6%) and Don't know (21.0%) responses combined)	10,895 (73.6%)
Among those eligible, number (%) enrolling in BHP in FY25	10,358 (95.1%)

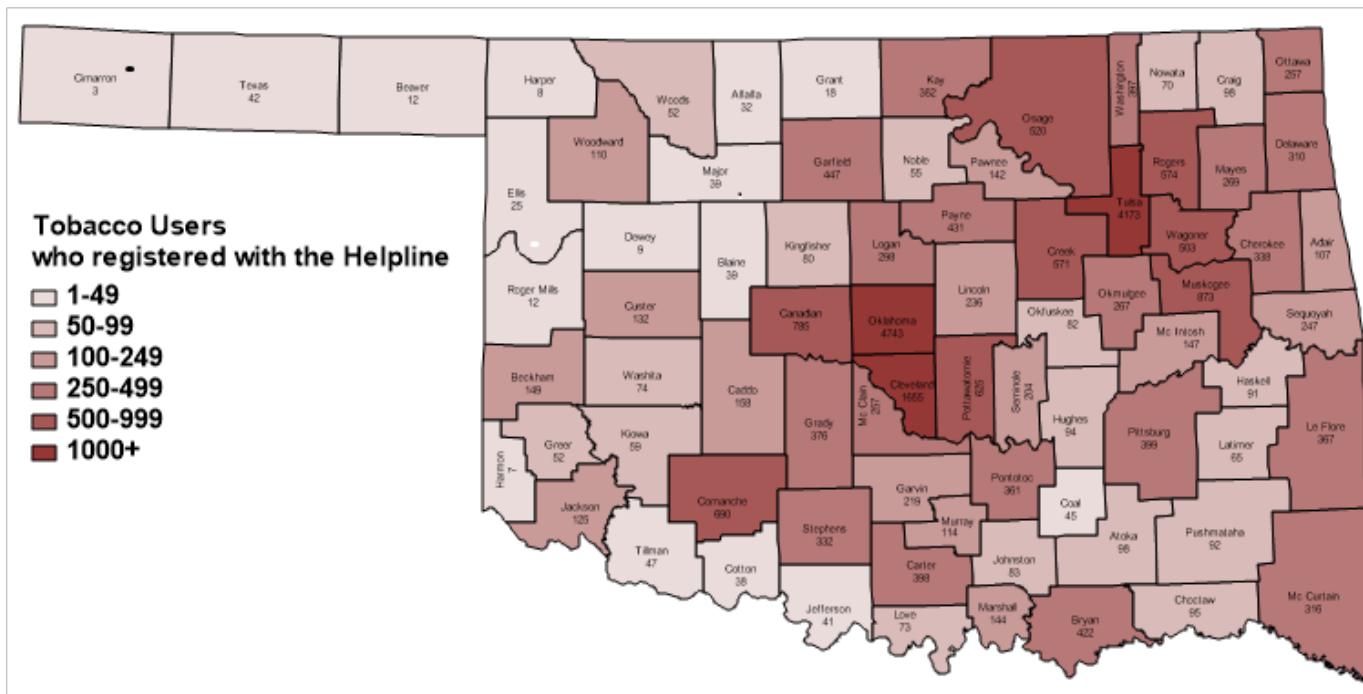
- In FY25, more than half (53.8%) of those registering for services reported having at least one mental health or substance abuse disorder.
- Of the Helpline registrants who reported at least one MHSA disorder, 52.6% believed their condition would interfere with their ability to quit tobacco, while 21.0% did not know if their condition would interfere with the ability to quit tobacco.
- These tobacco users were enrolled in the Behavioral Health Program (BHP) and were eligible for 7 coaching sessions and up to 12 weeks of combination NRT.
- In FY25, more than 10,000 tobacco users participated in the BHP.

Helpline Utilization by Pregnant Women

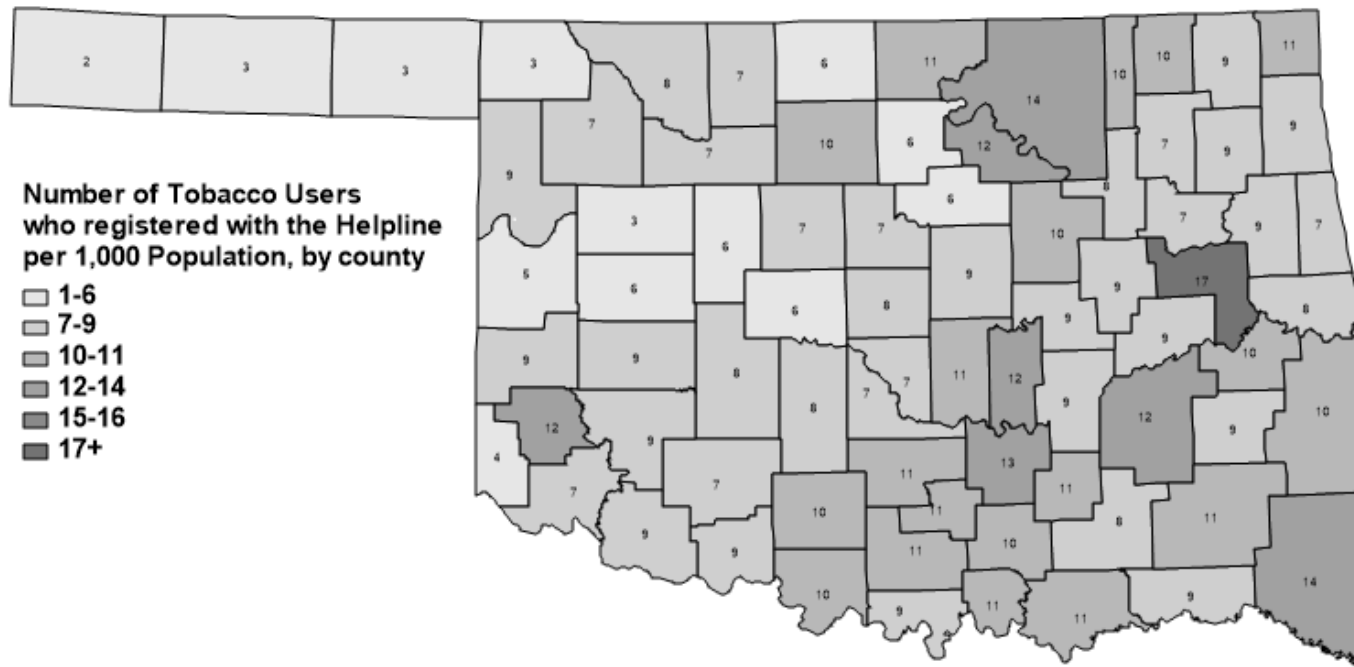
	N*
Currently pregnant	305
Planning pregnancy	222
Currently breastfeeding	71
Gave birth within last 6 months	187
Gave birth within past year	243

*categories not mutually exclusive

- During FY25, 305 Helpline registrants were pregnant, and 222 were planning pregnancy. Another 71 reported breastfeeding and 243 reported giving birth in the last year.
- These Oklahomans were eligible for an enhanced program that included 7 coaching sessions and up to 8 weeks of NRT.
- Most enrolling in the enhanced pregnancy program registered online (77.5%, n=739). However, 38% of those registering online received no evidence-based services (no coaching and no NRT).

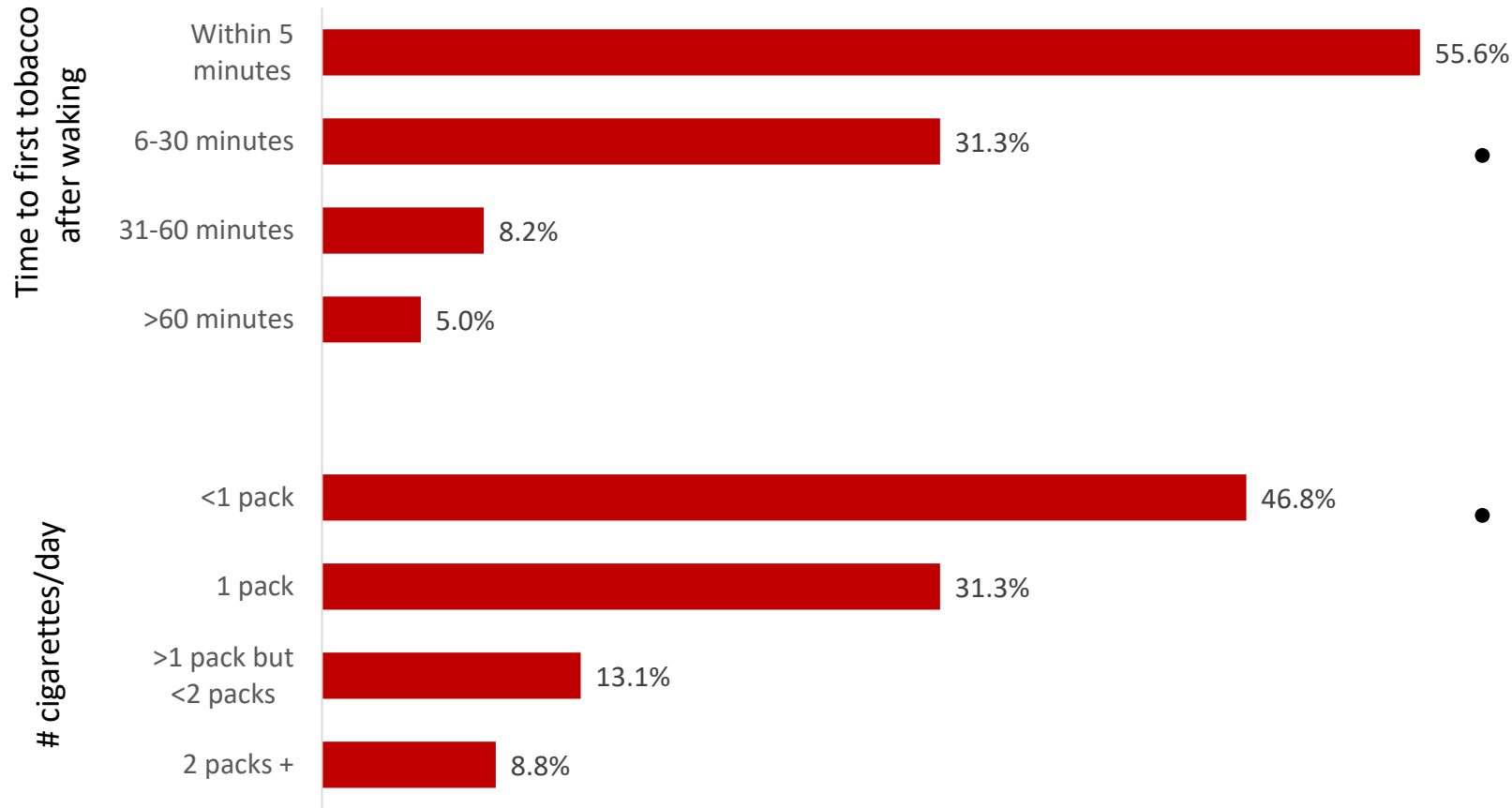


Oklahomans from all 77 Oklahoma counties contacted the Helpline for services in FY25. Among those registering for services, 17.2% came from Oklahoma County (n=4743) and another 15.2% came from Tulsa County (n=4173). Cleveland County accounted for 6.0% of registrations (n=1655).



This map displays the number of registrations per 1,000 county population over the age of 18. When the number of Helpline registrants per adult population is considered, some of the less densely populated counties had the greatest number of tobacco users registering for services per 1000 adults. For example, Muskogee County had the highest rates of registration, with 17 registrants per 1000 adult population.

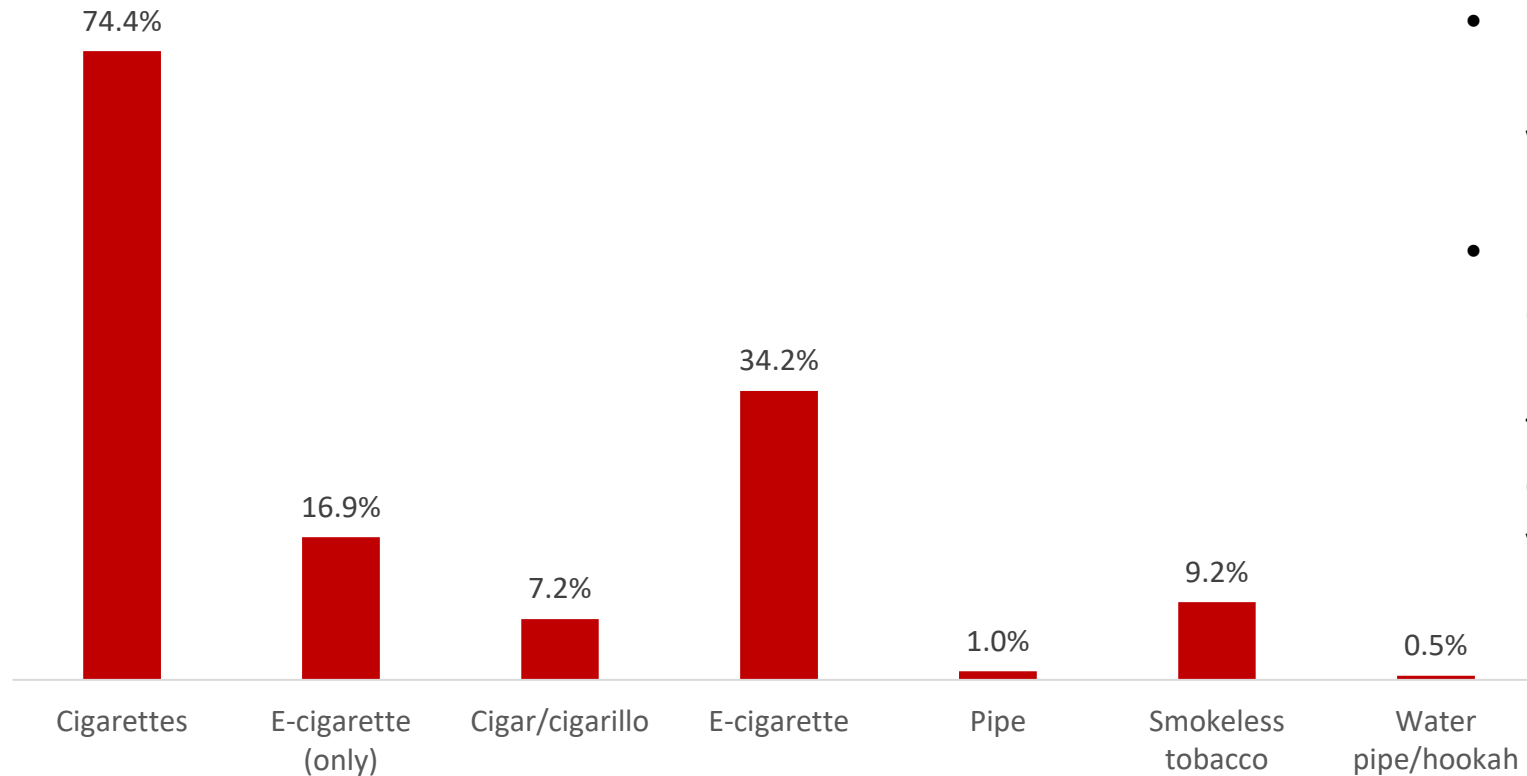
Tobacco use patterns among Helpline registrants



- More than half of Helpline registrants stated that the time after waking to first tobacco use was five minutes or less (55.6%).
- 46.8% reported smoking <1 pack of cigarettes a day.

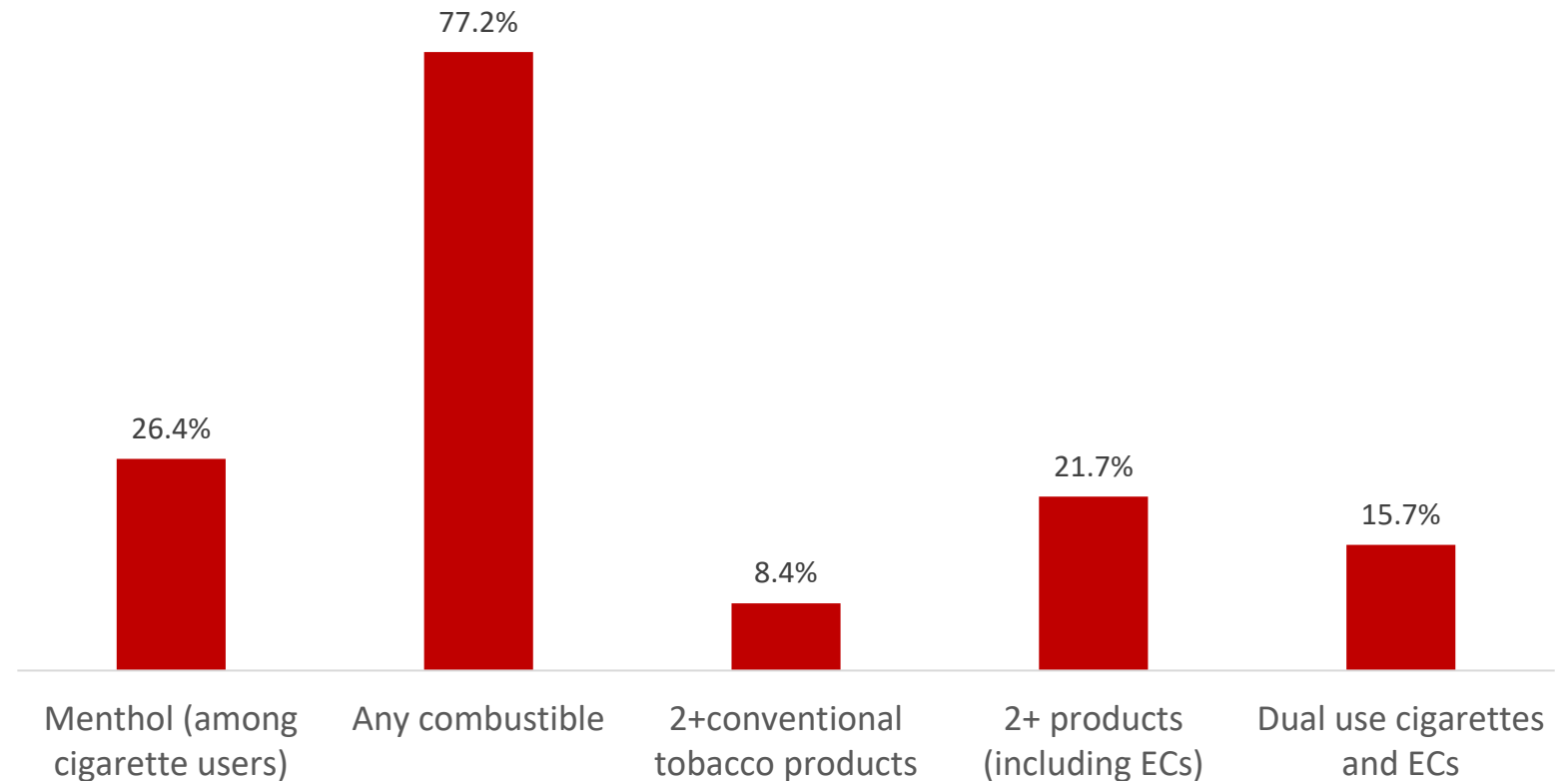
Types of tobacco/nicotine products used by Helpline registrants

- Cigarettes were the predominant form of tobacco used by Helpline registrants (74.4%).
- More than one-third of registrants reported using an e-cigarette or other vaping device in the last 30 days (34.2%).
- 16.9% of all registrants were exclusive e-cigarette users when they registered with the Helpline. More than half (56.3%) of exclusive e-cigarette users were younger than 35 years of age (data not shown).

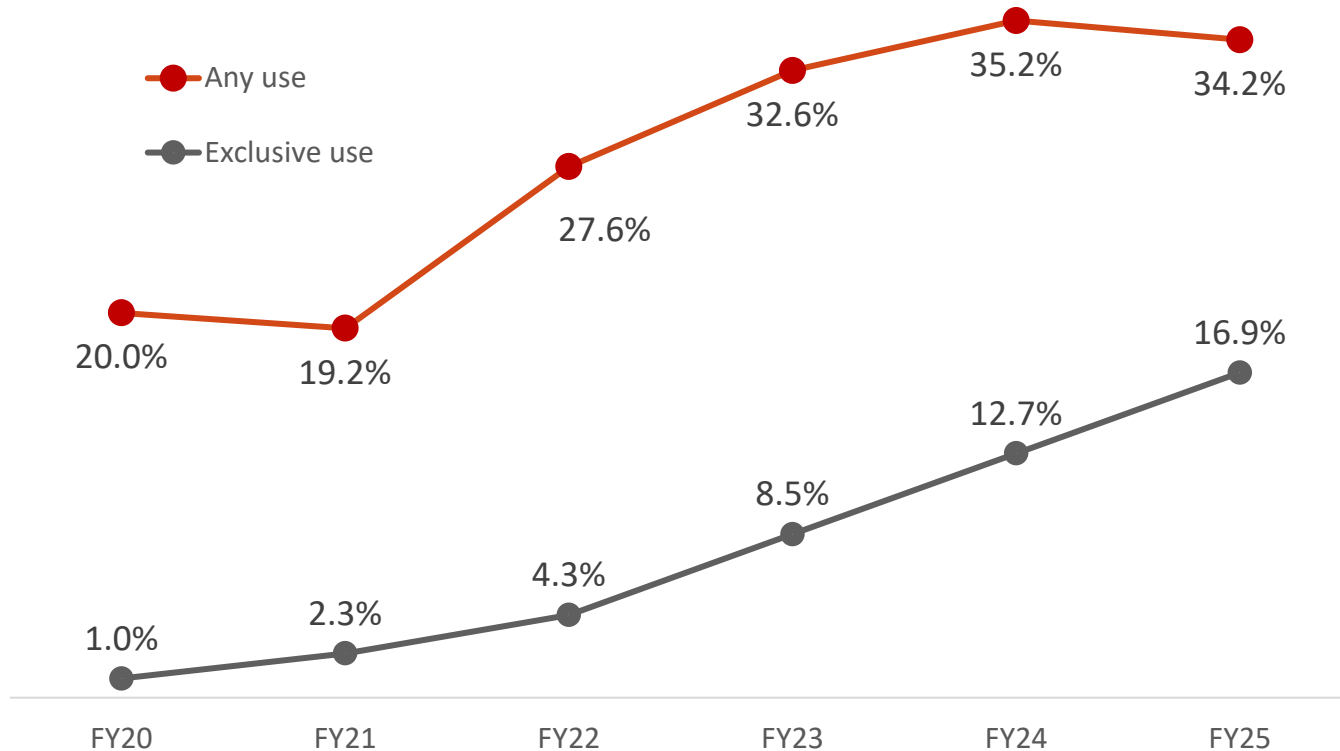


Combinations of tobacco/nicotine products used by Medicaid registrants

- Among cigarette users, 26.4% reported smoking menthols.
- 21.7% were using more than one product, including e-cigarettes.
- 15.7% were dual using cigarettes and e-cigarettes at the time of registration.



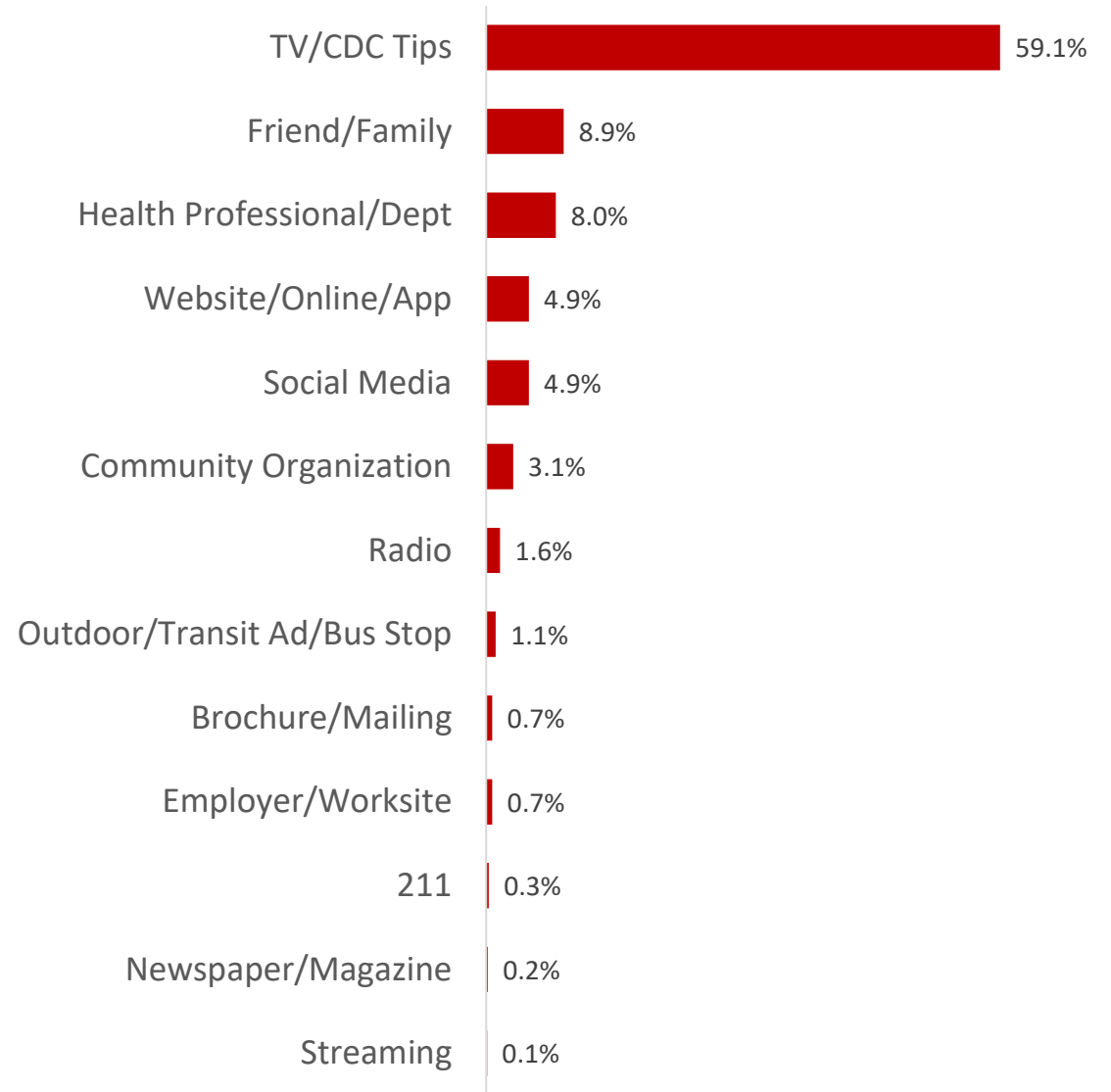
E-cigarette use in past 30 days among Helpline registrants, FY20-FY25



- The percentage of Helpline registrants using e-cigarettes *exclusively* in FY25 was the **highest to date (16.9%)**.
- More than one-third of registrants (34.2%) reported using e-cigarettes, alone or in combination with other products when they first contacted the Helpline.

How registrants heard about the Helpline

- When tobacco users register for services with the Helpline, they are asked how they heard about the service. This provides one indicator of the promotion of the Helpline within the community.
- During FY25, more than half of registrants reported hearing about the Helpline from TV/CDC Tips ads (59.1%).
- Friends/family and Health professional/health department were the next most frequent responses (8.9% and 8.0%, respectively).

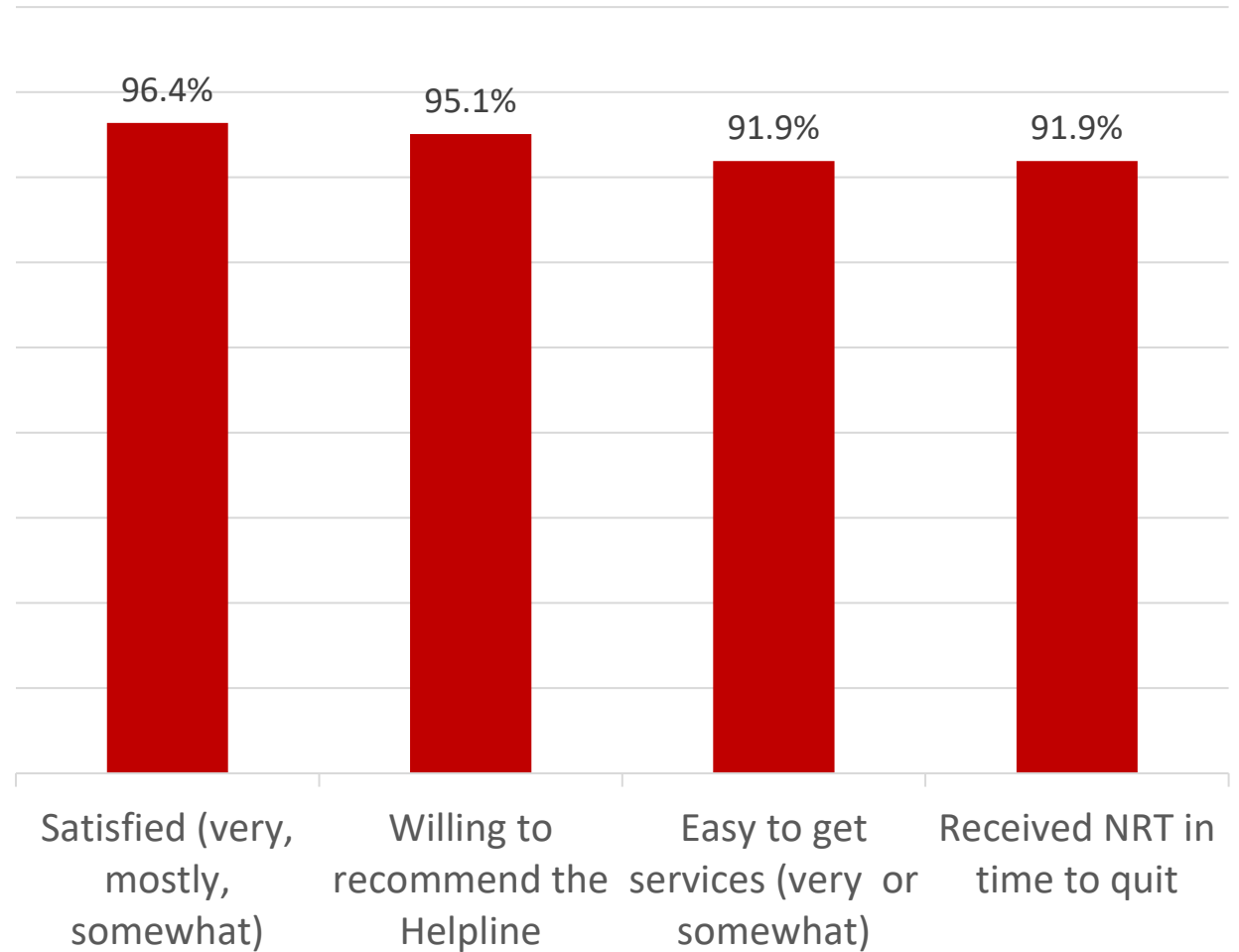


7-month follow-up evaluation

- The North American Quitline Consortium (NAQC) recommends a standardized approach for assessing program outcomes for quitline services across the US and Canada. Thirty-day point prevalence abstinence is the preferred measure of “success.”
- The follow-up of Helpline participants in this FY25 report includes 1,272 randomly selected tobacco users registering for services between December 1, 2023 and November 30, 2024. The 7-month follow-up survey was conducted from July 6, 2024 through July 3, 2025.
- To be eligible for the 7-month follow-up survey, registrants were required to have received at least one coaching session and/or sent NRT from the Helpline, consented to follow-up, and not have been sampled for evaluation previously.
- Eligible Helpline participants were sent a pre-notification letter in the mail describing the telephone survey. Participants who completed the survey were mailed \$10 for reimbursement of time and effort. The response rate for the 7-month evaluation survey among registrants was 39.3%.
- **A total of 1,272 participants completed the 7-month follow-up survey.**

Are Helpline registrants happy with the services they receive?

- Among Helpline registrants, **96.4%** reported being “very,” “mostly,” or “somewhat” satisfied with Helpline services. This is similar to satisfaction rates reported in previous years.
- A similar proportion (95.1%) reports willingness to recommend the Helpline to a friend.
- Nearly 92% reported that it was “very” or “somewhat” easy to get the Helpline services they wanted.
- Nearly 92% also reported that they received their NRT from the Helpline in time to quit.



Are Helpline registrants getting the services they want?

With the transition to Rally in FY24, and new services offered to registrants, questions were added to the follow-up survey to assess what participants wanted or expected from the Helpline. Participants were asked, “At the time that you enrolled, which of the following services were you interested in receiving?” These responses were compared to what participants actually received after they enrolled.

Overwhelmingly, Helpline registrants wanted and received NRT. While more than a third of registrants wanted coaching via live text, a small fraction of those actually received coaching via this modality (0.9%)

Helpline Service	% Interested in receiving service when registering	Among those wanting service, % receiving service after enrollment
NRT	97.2%	97.6%
Coaching via Phone	38.6%	89.2%
Coaching via Live Text	36.7%	0.9%
Coaching via Web Chat	3.7%	6.4%
Coaching via Virtual Group	6.8%	14.0%
Automated Text Messages	42.4%	79.3%
Emails with Tips	30.8%	76.0%
Online Resources/Trackers	15.8%	59.2%

Quit Rates reported at the 7-month Follow-Up

Quit rates are defined as 30-day abstinence from tobacco among survey respondents at the time of the 7-month follow-up. For each calculated quit rate, a 95% confidence interval (CI) is calculated and reported. This CI provides a range of values within which we are 95% confident that the “true” quit rate lies. Because our calculated quit rates are based on a sample of the population, some uncertainty will exist about the accuracy of the estimate. The CI is interpreted as the “plausible” range of values for the true quit rate.

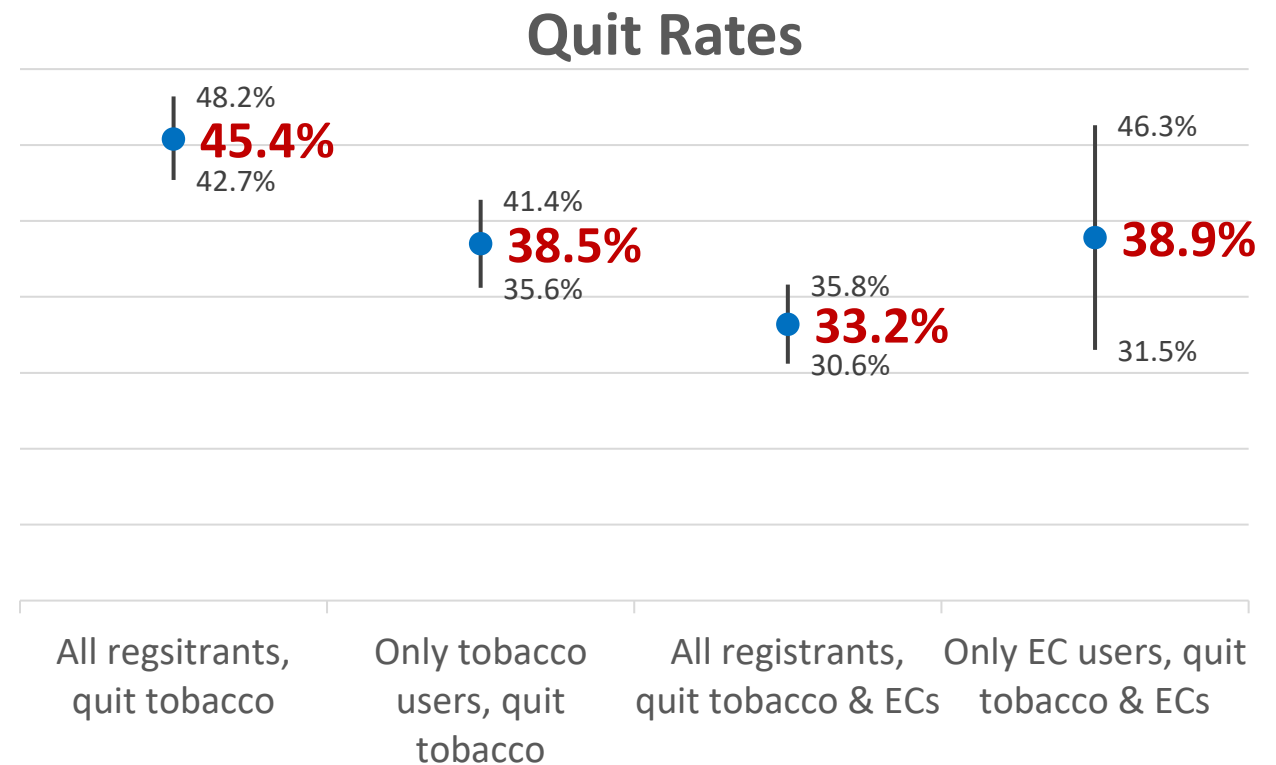
In FY25, 16.9% of participants were not actually using tobacco products at registration but were looking for help to quit electronic cigarettes (ECs). If we include them in the tobacco product quit rate, we will over-estimate the impact of the Helpline. Thus, we also calculated the overall quit rate from tobacco excluding those who were exclusive EC users at registration.

NAQC also recommends the calculation of another quit rate that includes abstinence from both tobacco and ECs.

30-day abstinence from tobacco and ECs (% and 95% CI)

At the 7-month follow-up survey, 45.4% (95% CI 42.7-48.2) of all participants reported not using tobacco for 30-days or longer. When exclusive e-cigarette users at registration are removed, the quit rate for tobacco users at the 7-month follow-up is lower, 38.5%.

When abstinence is defined as not using both conventional tobacco and ECs in the last 30 days, the overall quit rate is 33.2% (95% CI 30.6-35.8). Among exclusive e-cigarette users wanting help quitting e-cigarettes, 38.9% reported 30-day point prevalence abstinence from both conventional tobacco and ECs at the 7-month follow-up.

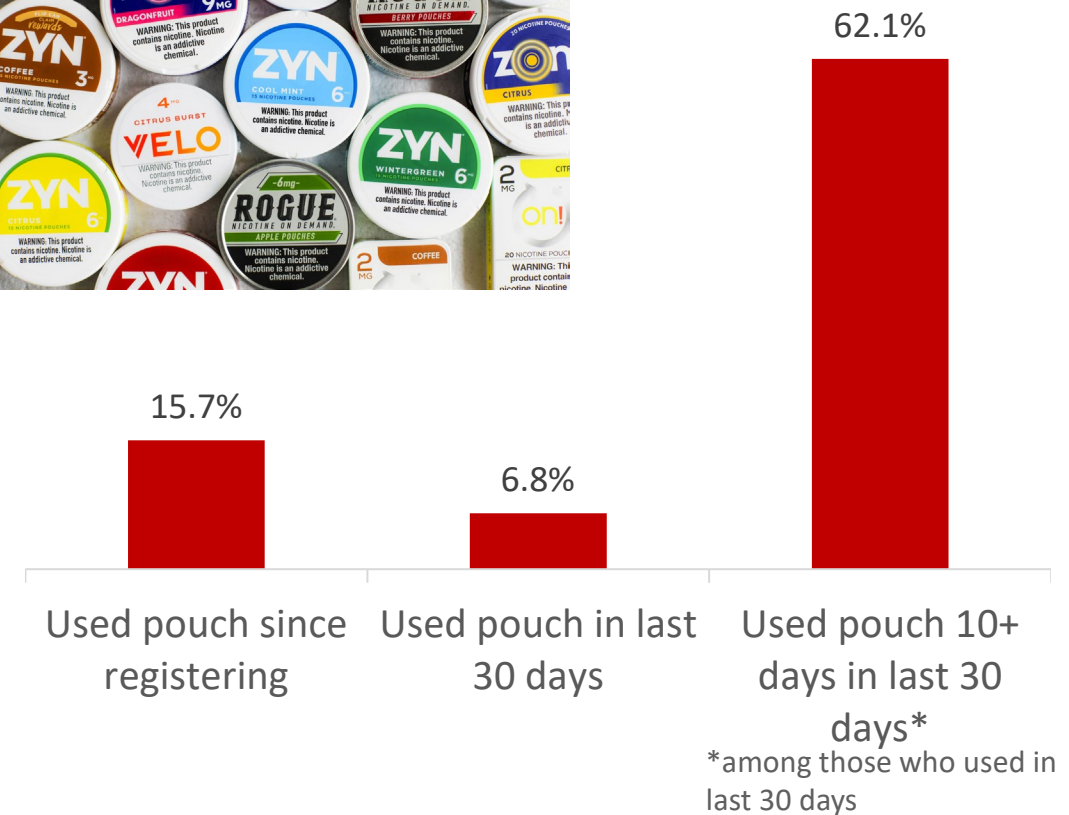


Use of nicotine pouches after registering with the Helpline

The FDA has allowed some nicotine pouches to be marketed as potentially less harmful alternatives for adult smokers, but they are not FDA-approved for smoking cessation.

While surveillance data on the use of pouches is limited, they are emerging as a preferred substitute for ECs and other tobacco products.

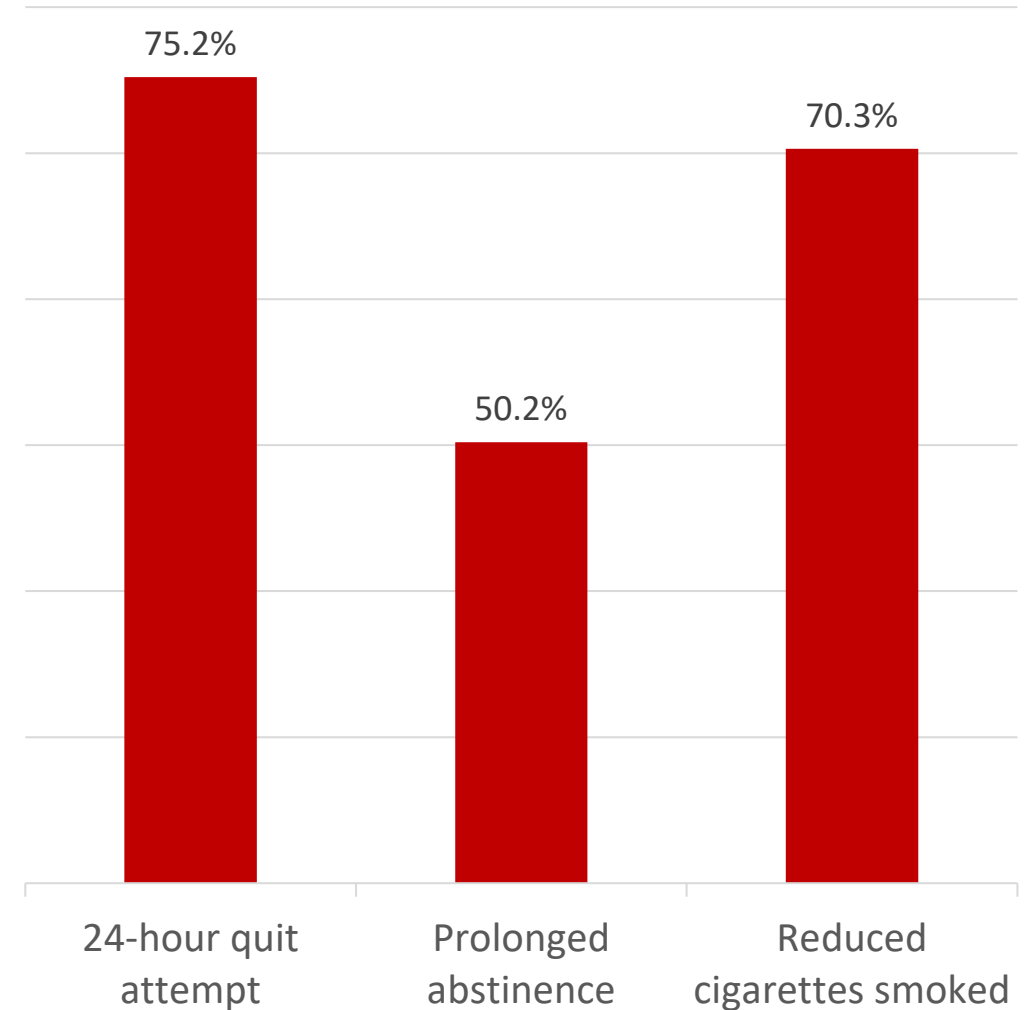
ouch use is not currently asked at Helpline registration, but we asked about nicotine pouches at the 7-month follow-up. We found that 15.7% of Helpline participants had used a nicotine pouch since registering with the Helpline. Among those who used a nicotine pouch within the last 30 days (6.8%), 62.1% of them used the product 10 or more days during the last month.



Intermediate quit measures

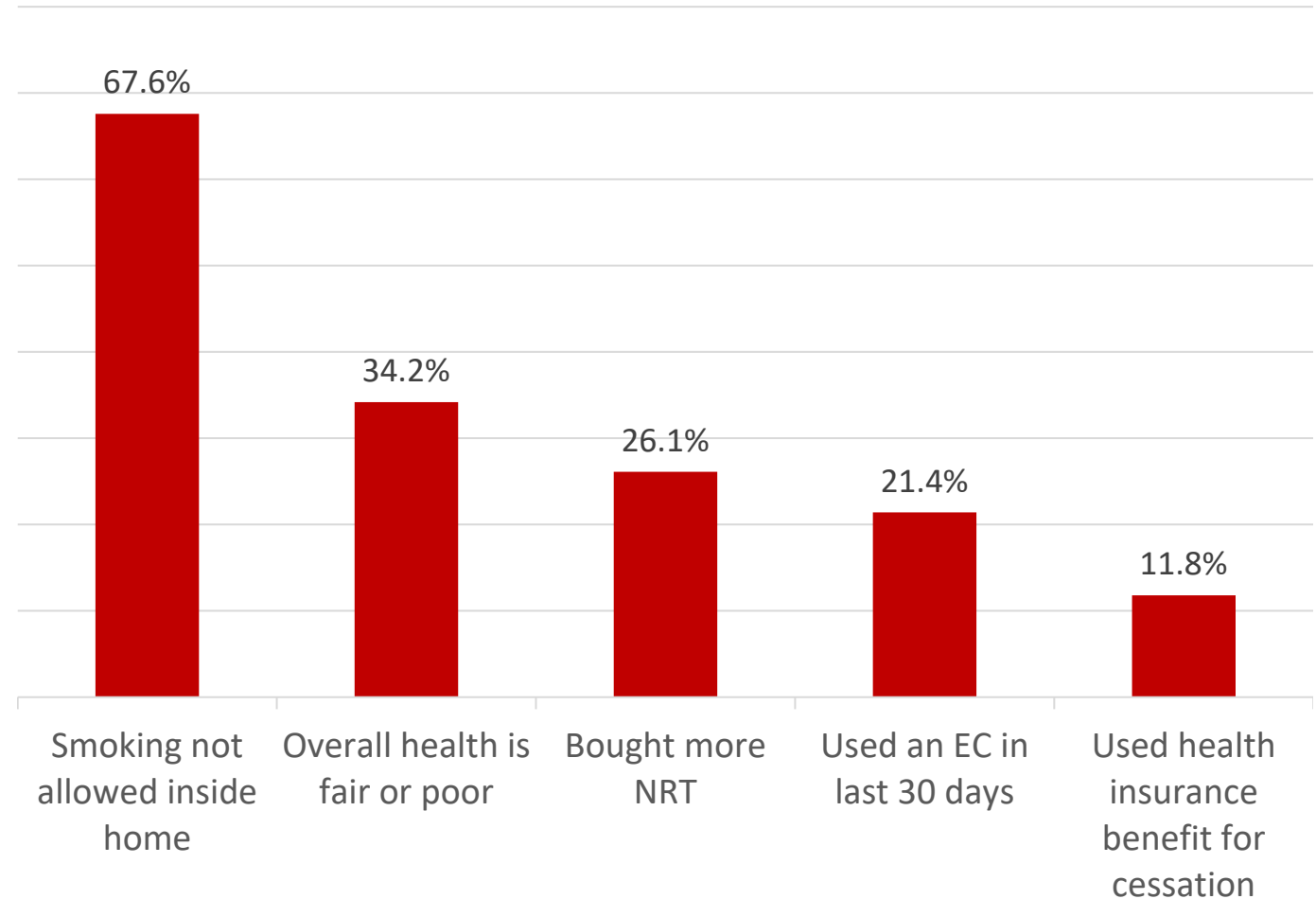
In addition to 30-day abstinence at follow-up, intermediate quit measures are also assessed.

- 75.2% had at least one quit attempt lasting at least 24-hours any time between enrollment and follow-up (24-hour quit attempt).
- 50.2% reported quitting for 30 or more days any time between Helpline enrollment and follow-up, regardless of quit status at follow-up (Prolonged abstinence).
- Among those who continued to smoke, 70.3% reported fewer cigarettes smoked per day at follow-up compared to baseline.



Other results from follow-up survey

- 67.6% of participants reported smoking is not allowed anywhere inside the home.
- 34.2% of Helpline participants reported their overall health was fair or poor.
- 26.1% bought more NRT.
- 21.4 reported using an e-cigarette within the last 30 days and 63.6% reported using them to quit regular cigarettes (data not shown).
- 11.8% of those with health insurance used their benefit for additional smoking cessation services.



Discussion

This evaluation report demonstrates continued high utilization of the Helpline in FY25 (n=27,518), with online registrations continuing to increase (57% of all registrations). Overall registrations were also impacted favorably by the “Limited Time Offer” expanded benefit offered two times during the year. As a result, the treatment reach for the Helpline among cigarette smokers was 3.8% in FY25.

In FY25, the Helpline provided Oklahomans the opportunity to receive coaching in many ways, and it offered more NRT. However, nearly all registrants receiving coaching are doing so by phone only. The extremely low uptake of live text coaching, even among those who say they wanted to engage with a coach in that way, continues to warrant further investigation as to what barriers are keeping tobacco users from engaging with a coach through live text. It is also worth noting that more than 1 out of 5 (19.6%) tobacco users who register online do not receive any coaching or any NRT. Among phone enrollees, the percentage is 5.2%. While some attrition is expected between enrollment and receipt of services, more than 3700 Oklahomans are missing out on evidence-based services for which they initially registered. Identifying the reasons for this high drop-off and potential solutions is warranted.

Discussion

The type of tobacco/nicotine products used by Oklahomans continues to evolve. Among cigarette users, about 1 out of 4 (26.4%) are using menthol cigarettes. During FY25, about 22% of registrants used more than one tobacco/nicotine product in the last 30 days, with a large proportion using e-cigarettes or vaping products. Overall, e-cigarette use in the last 30 days was reported by 34.2% of all registrants. Exclusive e-cigarette users are now registering with the Helpline for help quitting e-cigarettes, representing 16.9% of all registrants. While the use of nicotine pouches was not asked at registration, at the 7-month follow-up, 15.7% of Helpline registrants reported using a nicotine product since registering with the helpline. This question will be added to the registration flow in FY26.

These data provide further evidence of an emerging demand for Helpline services among non-cigarette and e-cigarette users who are nicotine dependent and want to quit.

Discussion

The satisfaction and quit rates included in this report are collected 7 months after registration for services. Both measures of effectiveness continue to be high. Overall, 96.4% of participants were somewhat, mostly or very satisfied, and 95.1% would recommend the Helpline to a friend or family member. FY25 quit rates were high; 45.4% of respondents to the follow-up survey reported not using tobacco within the past 30 days. This exceeds the NAQC benchmark of 30% abstinence for 30-day abstinence at the 7-month follow-up, and is likely due, in part, to higher levels of NRT received as a result of the expanded benefits for persons with behavioral health conditions and the limited time offers.