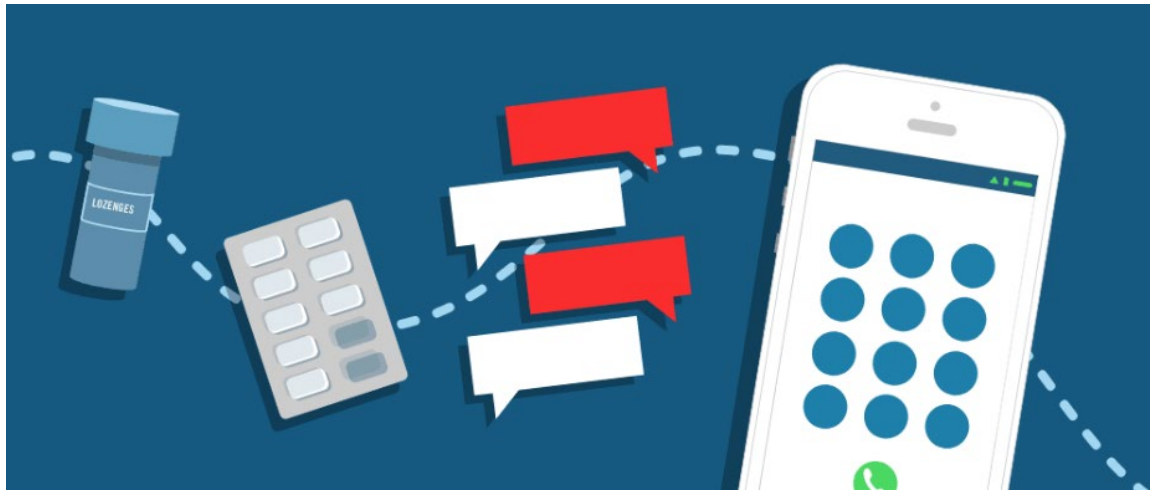
Oklahoma Tobacco Helpline

FY26 Evaluation Report



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Oklahoma Tobacco Helpline
1 800 QUIT NOW
A Program of TSET

OU Health | Department of Biostatistics and Epidemiology
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Final report submitted to TSET 9/28/26 using FY26 registration data captured on 7/6/26.

FY26 Key Findings

Enrollment

23,205 Oklahomans registered for services from the Oklahoma Tobacco Helpline during FY26. This is **16%** decline in registrations compared to FY25 (n=27,518).

Satisfaction

Almost all Helpline participants (**97.1%**) are very, mostly or somewhat satisfied with the services they received.

Quit Rates

At the 7-month follow-up evaluation, **51.0%** of Helpline participants reported not using tobacco for 30 or more days.

FY26 Key Findings

Statewide Coverage

Tobacco users in **76** counties registered for Helpline services during FY26.

Referrals

14,080 referrals to the Helpline were received from health care providers and community centers. These referrals led to **1008** Helpline enrollments.

Reach

3.7% 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.

Beginning in March 2026, use of nicotine pouches was added to the registration questions.

*In this report, "tobacco user" includes all tobacco/nicotine users, including e-cigarette and pouch 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 FY26 during the months of October 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.
- An incentive-based re-engagement initiative was launched May - June 2026. A one-time SMS re-engagement text was sent to consenting individuals who enrolled in the Helpline but did not complete their NRT survey and subsequently did not complete any coaching sessions. An incentive was provided if the participant completed the NRT survey and/or a first coaching session.
- Data for this annual report may be influenced by these event. Each of these events are evaluated and described in other reports.

Evaluation Methods

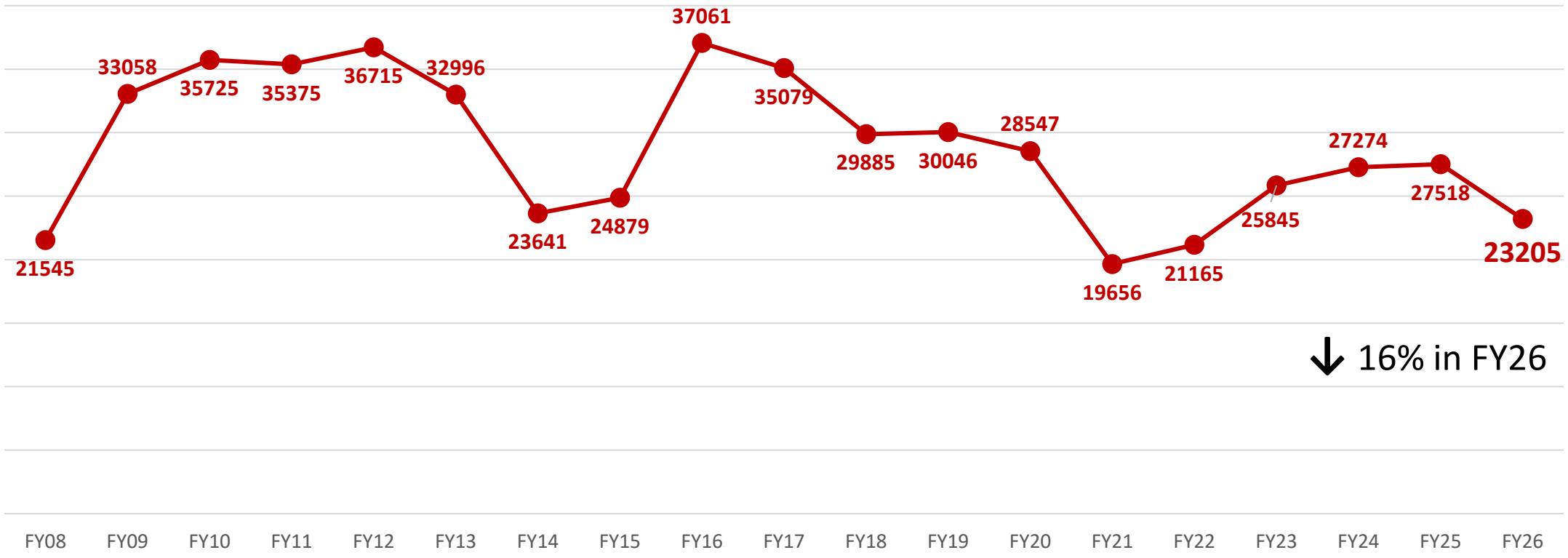
The Department of Biostatistics and Epidemiology within the University of Oklahoma Hudson College of Public Health is the independent evaluator for the Oklahoma Tobacco Helpline. The evaluation team uses registration data from the Helpline service provider (RVO) to report registration and service utilization 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 FY26 are summarized in this report, using methods consistent with those recommended by the North American Quitline Consortium (NAQC).

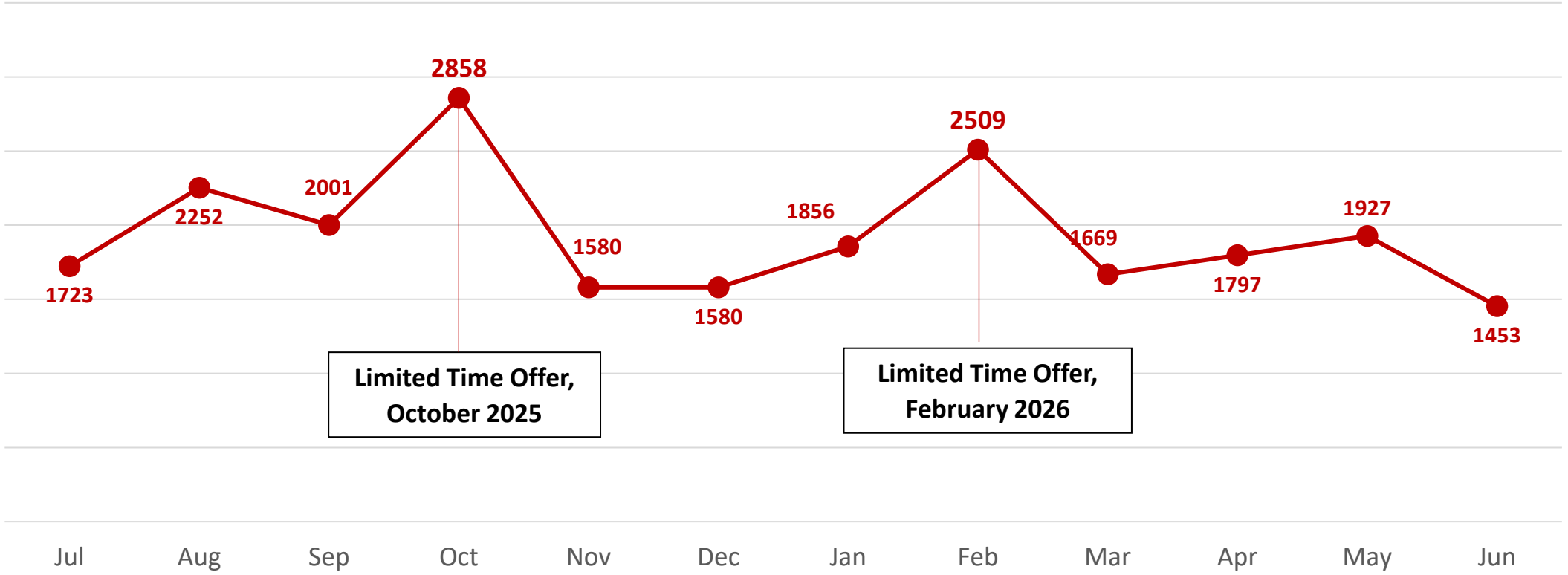
Registration and Utilization Patterns

- During FY26, from July 1, 2025 through June 30, 2026, a total of 23,205 Oklahomans registered for services by calling the 1-800-QUITNOW telephone number, registering online or by a referral from a healthcare provider. This is a 16% decline from what was observed in FY25 (n=27,518 tobacco users).
- 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 October 2025 and February 2026. There was a significant increase in registrations during these LTO months.

Registration Patterns by FY

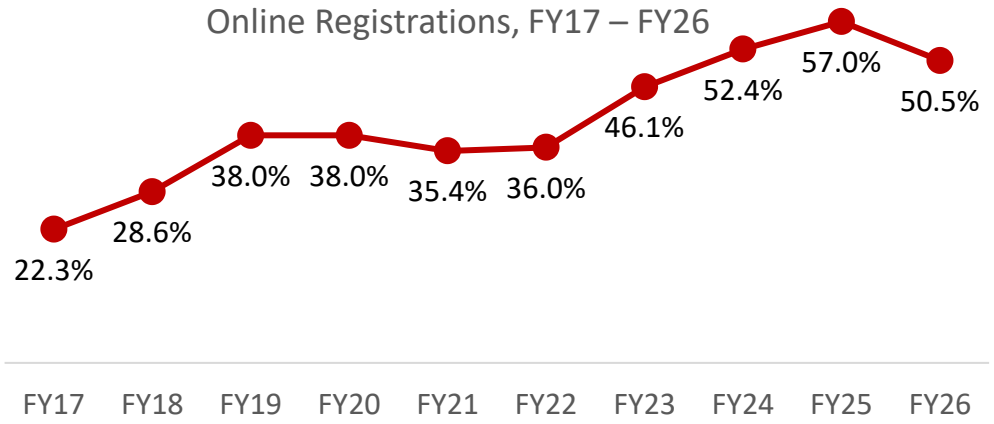


Registration Patterns by Month, FY26



Mode of Enrollment

Mode of Enrollment	FY26	
	N	%
Phone	10,500	45.2%
Online	11,720	50.5%
Referral	985	4.2%



Tobacco users can register for Helpline services by calling 1-800-QUITNOW or visiting the Helpline webpage at www.okhelpline.com. Tobacco users can also text READY to 21586 and be connected to the Helpline for online registration. In FY26, 50.5% of tobacco users registering for services did so online and 45.2% registered by phone. After increasing gradually since FY17, online registrations decreased by more than 11% in FY26.

Utilization of Helpline Services

Among Helpline registrants, 37.3% enrolled in Standard Care Coach+, and 19.6% in Standard Care Coach. Almost 4 out of 10 (39.9%) enrolled in the Behavioral Health Program (BHP). The number of women who were pregnant, post-partum, breastfeeding and planning pregnancy registering for services was lower than last year with 753 (3.2%, compared to 953 in FY25).

Helpline Program	FY26	
	N	%
Standard Care Coach	4544	19.6%
Standard Care Coach+	8651	37.3%
Pregnancy/Post-partum	753	3.2%
Behavioral Health Program	9256	39.9%
Total*	23,204	100%

*does not include one youth enrollment

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 FY26 (n=14,080) was higher than FY25 (n=13,002), but the number of tobacco users actually registering for services as a result of a referral was lower (n=1008) in FY26 compared to FY25 (n=1208). The proportion accepting a referral and enrolling in Helpline services was meaningfully different when comparing fax referrals (15.2%) to electronic (5.5%) and online (8.5%) referrals. The high proportion (75.3%) 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.

Although financial incentives were offered in FY26 to fax and online referrals in an effort to increase enrollment for Helpline services, the overall impact on enrollment rates was negligible in FY26.

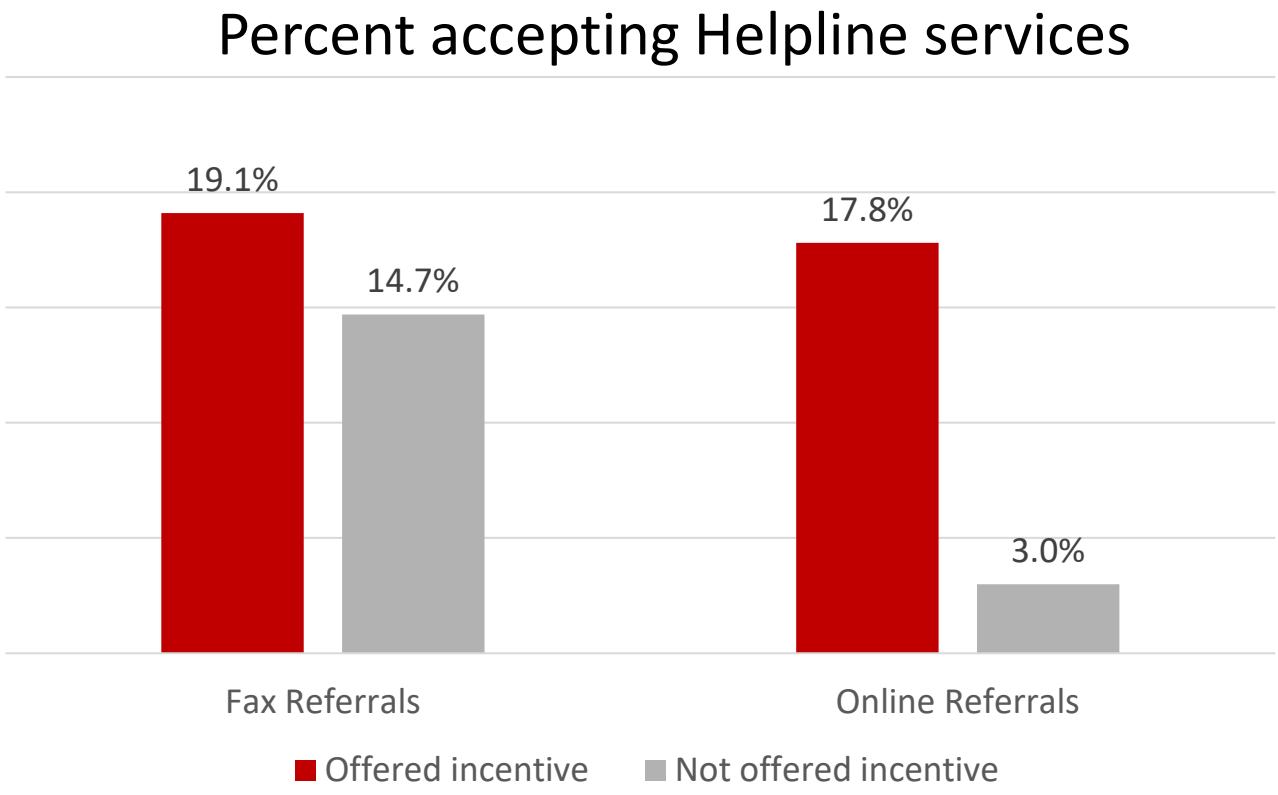
Electronic, Fax and Online Referrals to the Oklahoma Tobacco Helpline

	Type of Referral						All Referrals Combined	
	Electronic Referral		Fax Referral		Online Referral			
Referral Status	**N**	**%**	**N**	**%**	**N**	**%**	**N**	**%**
Accepted & enrolled in services	442	5.5%	116	15.2%	450	8.5%	**1008**	**7.2%**
Declined services when contacted	271	3.4%	21	2.8%	77	1.5%	**369**	**2.6%**
Unreachable	5687	70.9%	527	69.2%	4382	82.7%	**10596**	**75.3%**
Duplicate referral	1324	16.5%	63	8.3%	261	4.9%	**1648**	**11.7%**
Already enrolled at time of referral	.	.	5	0.7%	12	0.2%	**17**	**0.1%**
Do not contact	200	2.5%	18	2.4%	77	1.5%	**295**	**2.1%**
Pending referral	64	0.8%	11	1.4%	37	0.7%	**112**	**0.8%**
Rejected referral	31	0.4%	1	0.1%	3	0.1%	**35**	**0.2%**
Total	*8,019*		*762*		*5,299*		***14,080***	

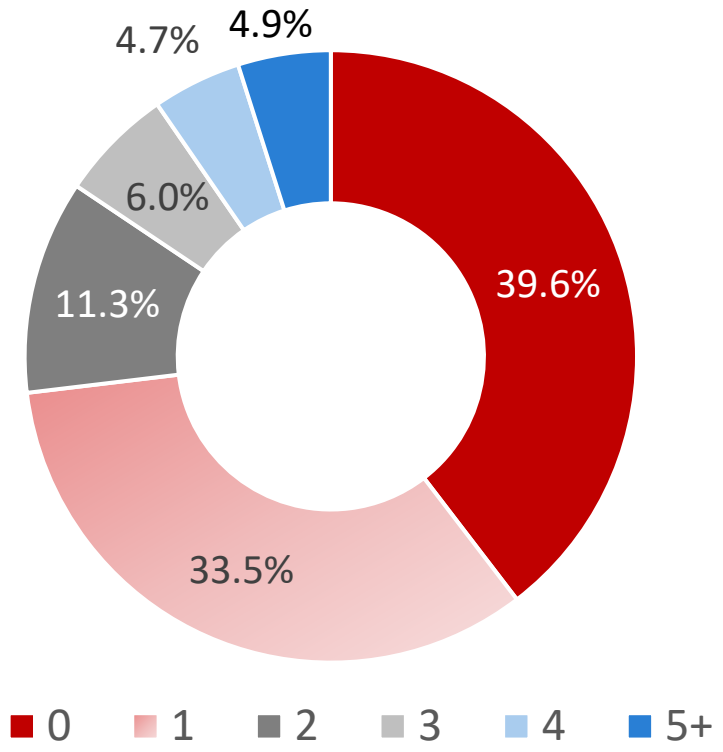
Impact of Financial Incentives for Fax and Online Referrals

Following receipt of a fax or online referral, eligible tobacco users are sent a text message encouraging them to enroll in Helpline services. They are informed that by registering for Helpline services, they will receive a $30 gift card to Amazon. Participants receive 3 outbound text messages about the incentive over a 7-day period in addition to standard referral outreach attempts made by phone by the Helpline.

- 19.1% (n=18) of fax referrals offered an incentive accepted Helpline services compared to 14.7% of fax referrals not offered the incentive.
- The impact was greater among online referrals to the Helpline, with 17.8% (n=350) enrolling in services when offered an incentive compared to 3.0% in the absence of an incentive offer.



Helpline Engagement:
Number of Coaching Sessions Completed



Among Helpline registrants, 39.6% did not complete a coaching session, which would include phone, chat, text or online group sessions.

Among those completing one or more coaching sessions, 99.1% used only one modality and nearly all were telephone (98.9%).

Number of Coaching Sessions Completed by Program

Helpline Program	Mean	Median	Min	Max
Standard Care Coach	0.46	0	0	20
Standard Care Coach+	1.39	1	0	19
Behavioral Health	1.59	1	0	36
Pregnancy/Post-Partum	0.65	0	0	10
All Programs	1.26	1	0	36

- Across all Helpline programs the average number of coaching sessions completed was 1.26.
- Participants in the BHP completed more coaching sessions, 1.59 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 (0.65).
- Standard Care Coach+ participants completed an average of 1.39 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

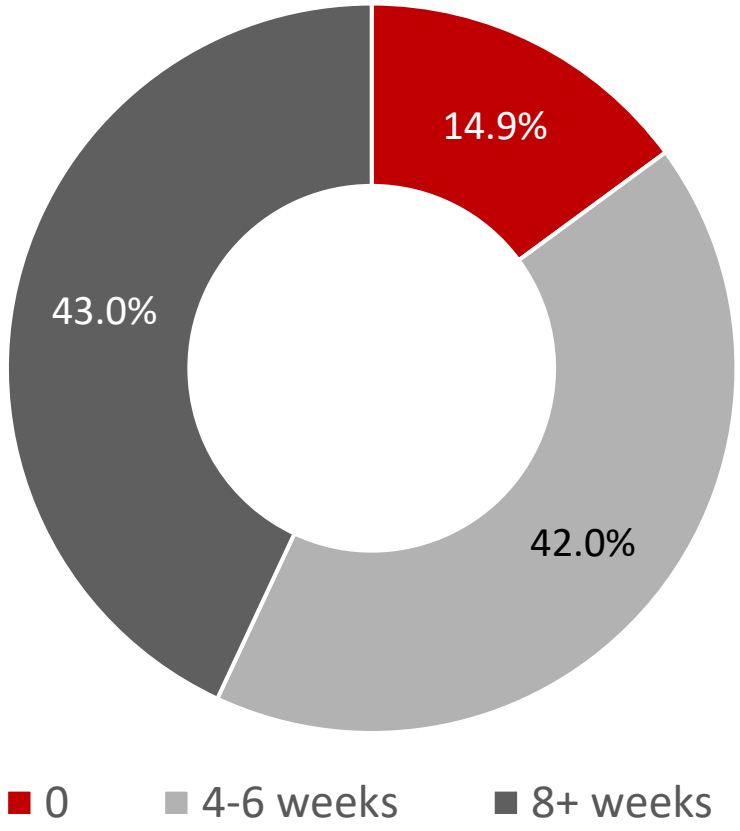
Coaching Modality	N	%*
Phone	13,855	98.9%
Online Chat	247	1.8%
Interactive Text	34	0.2%
Online Group Session	8	0.1%

*% 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 0.9% of those completing a session used more than one modality (data not shown).

Weeks of NRT received from the Helpline

- Almost 15% of participants received no NRT from the Helpline, which could be attributed to contraindications for its use, or participant preference to not use NRT.
- 42.0% received 4-6 weeks of NRT from the Helpline.
- 43.0% received 8 weeks or more of NRT.



Type of NRT Received from the Helpline

Type of NRT	N	%
Gum	1667	7.2%
Lozenge	1469	6.3%
Patch	3760	16.2%
Gum and Lozenge	91	0.4%
Patch and Gum	6367	27.4%
Patch and Lozenge	5931	25.6%
Patch, Gum and Lozenge	452	1.9%
No NRT	3468	14.9%

- The largest proportion of tobacco users received the patch and gum (27.4%) or patch and lozenge (25.6%).
- 16.2% received patch alone.
- More than half (55.3%) received some form of combo NRT.

Summary of Helpline Service Utilization

Helpline Service	N	%
NRT only (no coaching)	6488	28.0%
NRT + Coaching	13249	57.1%
Coaching (no NRT)	761	3.3%
No NRT, no coaching	2707	11.7%

- Participants can receive a combination of evidence-based services (coaching and NRT). In FY26 57.1% received both coaching and NRT, giving them the best possible support to quit.
- An alarming 11.7% did not receive any evidence-based treatment (NRT or coaching).
- The proportion receiving no services was much higher among online registrants (19.5%) compared to phone enrollments (3.4%).

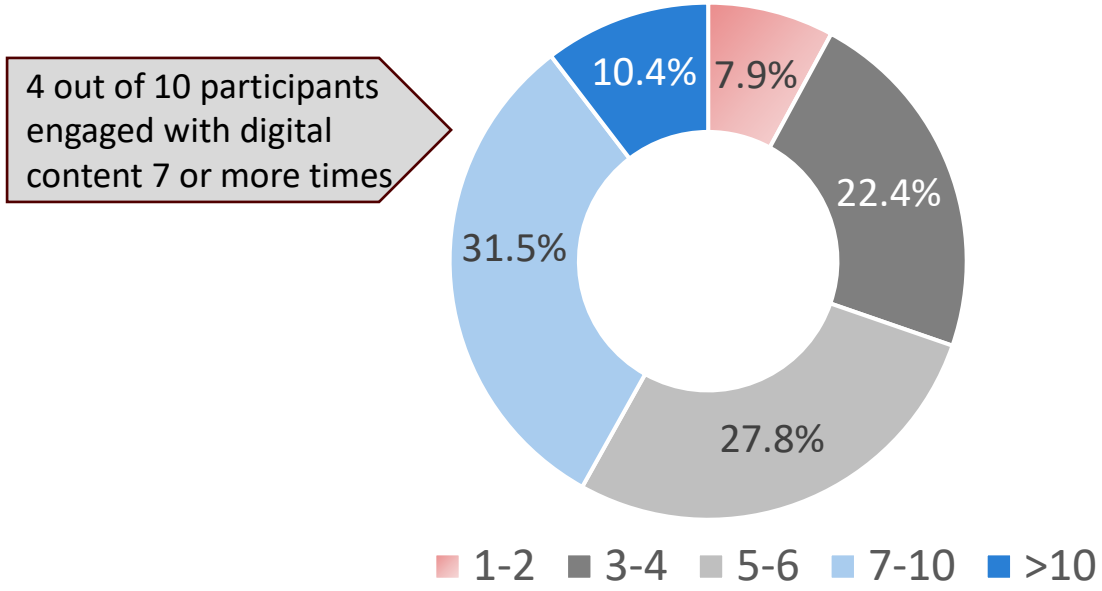
Digital Engagement

- 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.

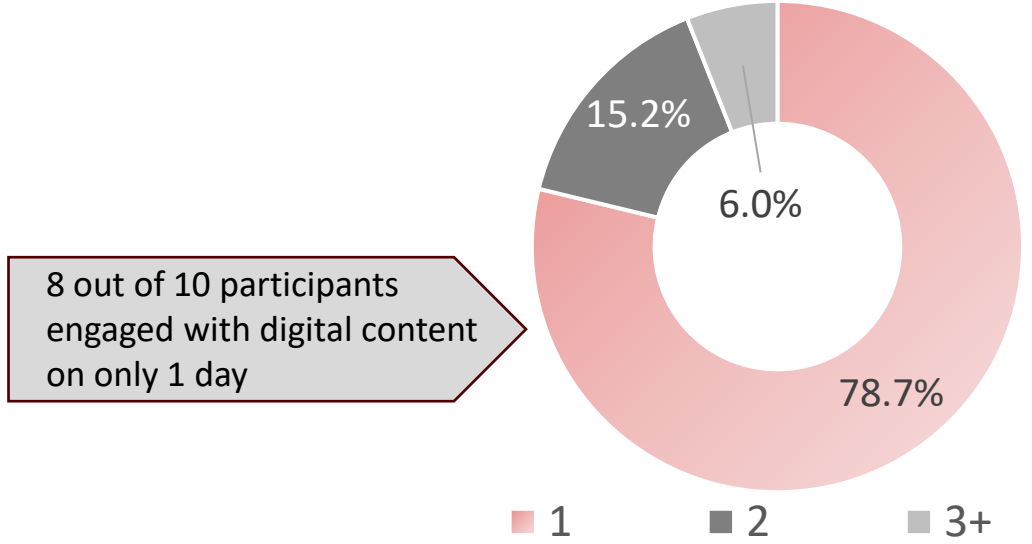
Digital Engagement

More than half of Helpline registrants engaged with one or more digital activity that did not involve a coach (53.2%, n=12,337). Levels of digital engagement were higher in FY26 than FY25.

Number of digital events among those who engaged

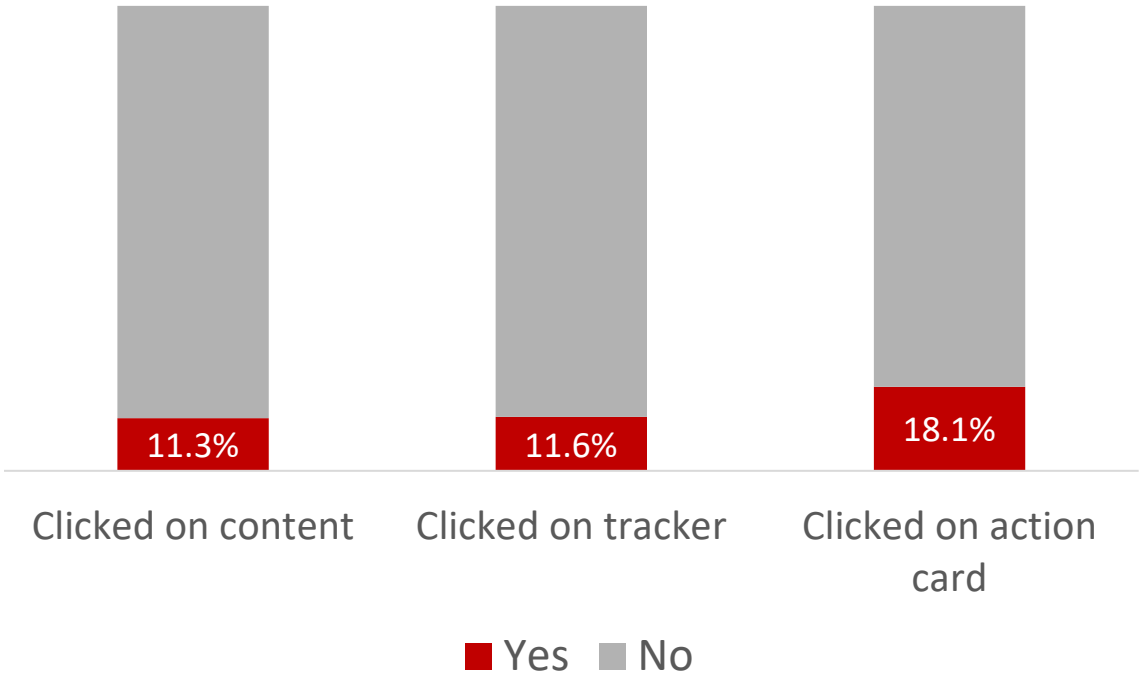


Number of days participants engaged with digital content among those who engaged



Digital Engagement: Clicks

- Among Helpline registrants who engaged with one or more digital activity that did not involve a coach (n=12,337), only 11.3% clicked on content and a similar proportion (11.6%) used the tracker.
- 18.1% clicked on an action card.
- 81.9% completed a survey which counts as digital engagement (data not shown).



Treatment Reach of the Oklahoma Tobacco Helpline

Treatment Reach among smokers =

3.7%

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.

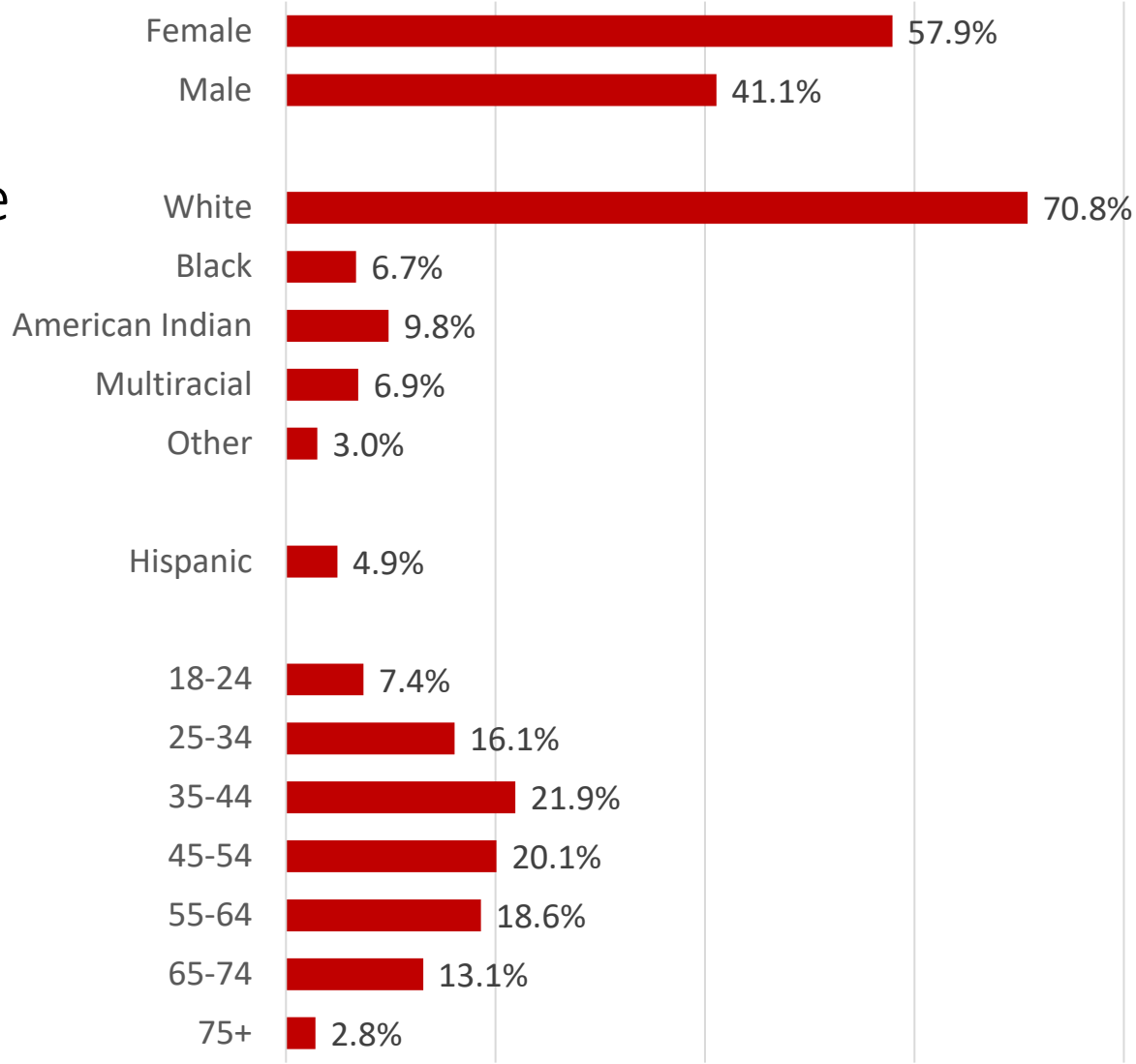
In FY26, 14,687 cigarette smokers completed a coaching session and/or received NRT from the Helpline. Using 2025 BRFSS, there are 397,164 cigarette users in the state, for a calculated reach of 3.7%.

This is lower than the treatment reach for FY25, 4.2%.

Characteristics of Helpline Participants:

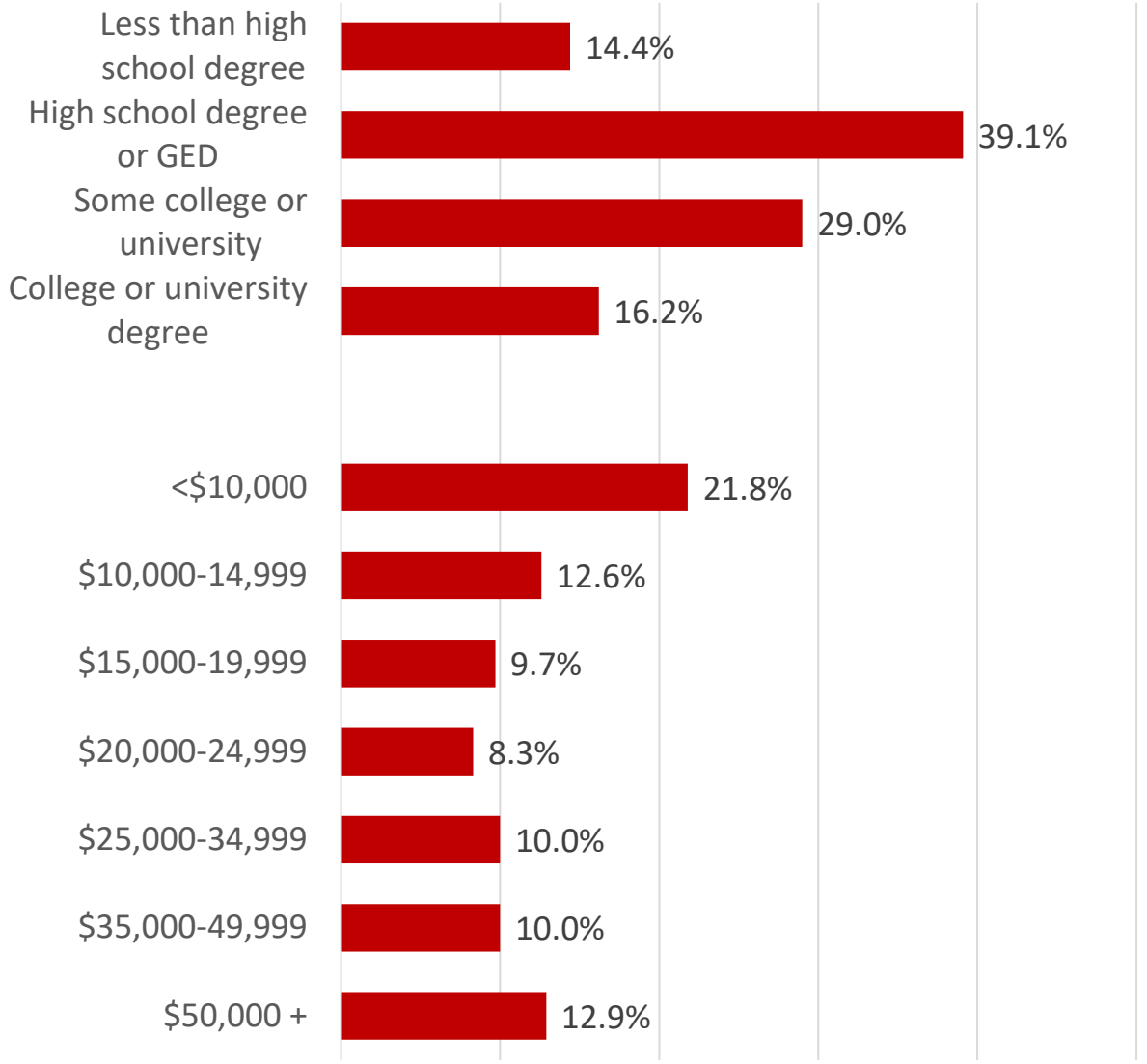
Sex, race/ethnicity and age of Helpline registrants, FY26

- A majority of registrants to the Oklahoma Tobacco Helpline were female (57.9%).
- Helpline registrants were also mostly white (70.8%) and non-Hispanic (95.1%).
- A majority of Helpline registrants was 45 years or older (54.6%).
- Race, ethnicity and age were similar to what has been observed in past years.



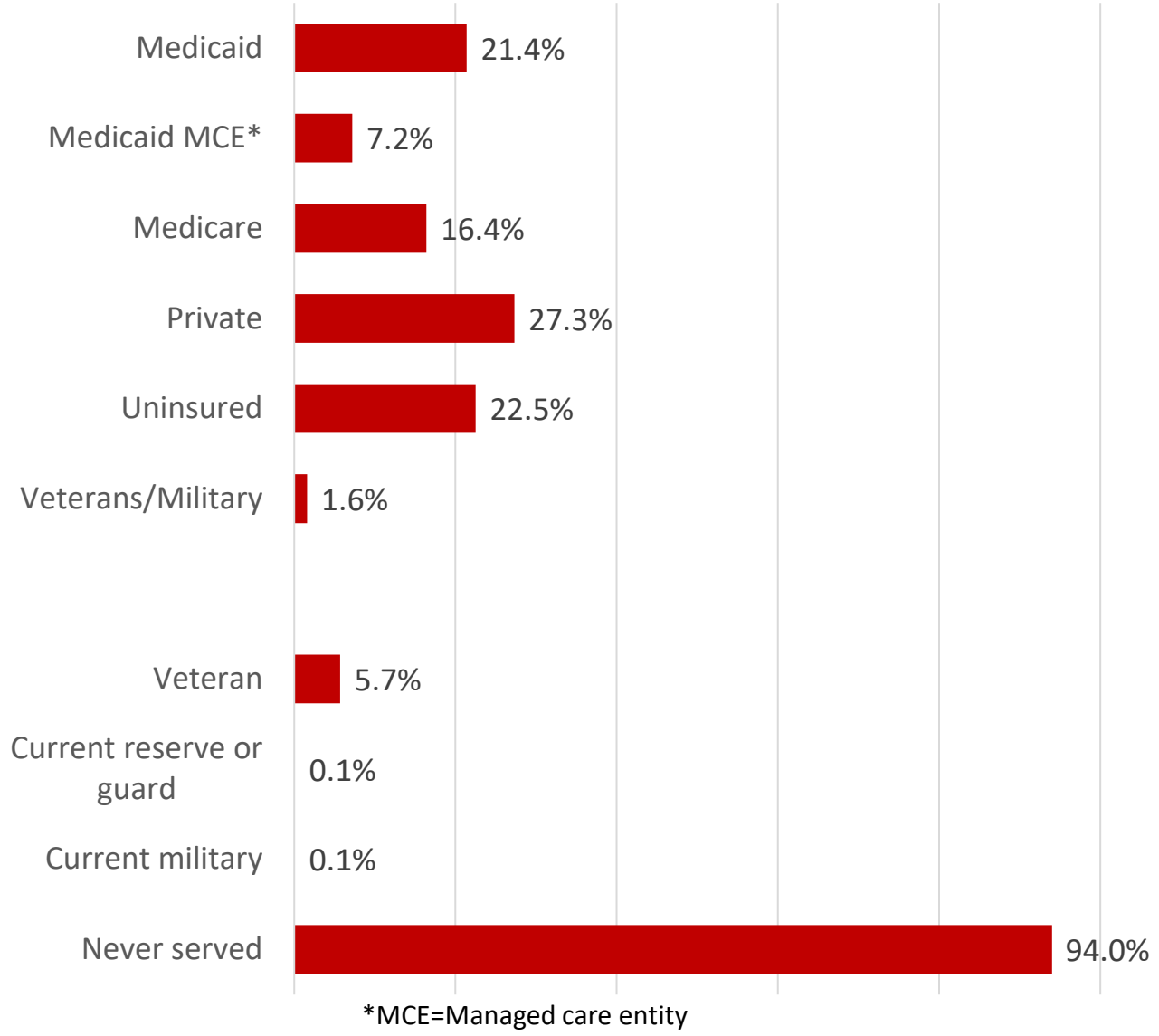
Education and income of Helpline registrants, FY26

- More than half of Helpline registrants reported less than a high school education (14.4%) or high school degree/GED (39.1%).
- A majority of Helpline registrants reported incomes less than $25,000 (52.4%).



Insurance status and military service among Helpline registrants, FY26

- Privately insured tobacco users accounted for the largest proportion of Helpline registrants (27.3%).
- About 1 in 5 reported traditional Medicaid coverage (21.4%) and another 7.2% reported coverage by one of three Medicaid MCEs.
- Veteran status was reported by 5.7% of registrants.



Helpline Registrants Reporting Mental Health & Substance Abuse Disorders

	N, %
Number (%) ever reporting 1+ MHSAD	14,411 (62.1%)
Number (%) eligible for the BHP: Among those ever reporting MHSAD, those reporting this will make it harder to quit (Yes (46.3%) and Don't know (21.2%) responses combined)	9728 (67.5%)
Among those eligible, number (%) enrolling in BHP in FY26	9256 (95.1%)

- In FY26, 62.1% 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, 46.3% believed their condition would interfere with their ability to quit tobacco, while 21.2% 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 FY26, 9256 tobacco users participated in the BHP.

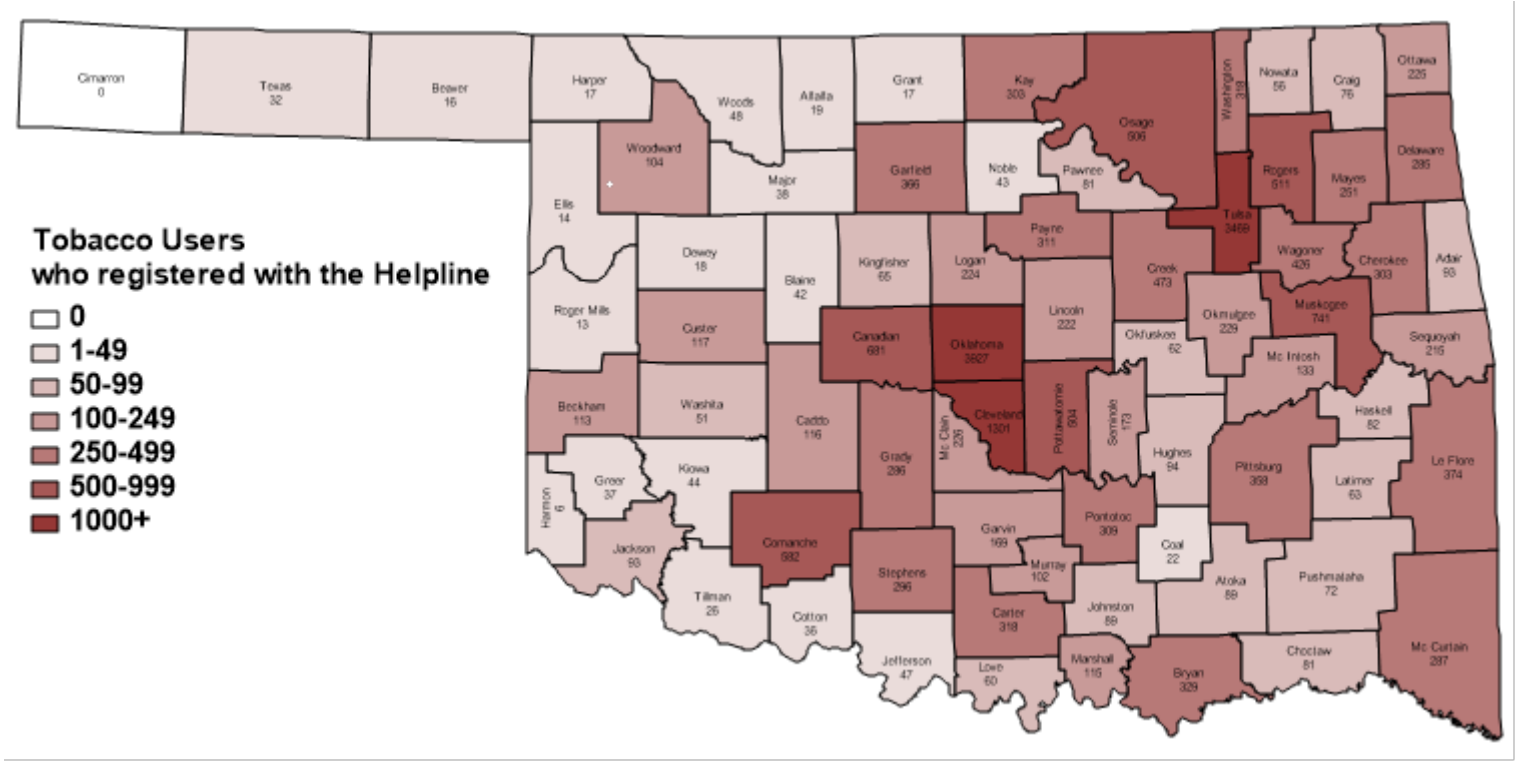
Helpline Utilization by Pregnant Women

	N*
Currently pregnant	211
Planning pregnancy	198
Currently breastfeeding	88
Gave birth within last 6 months	132
Gave birth within past year	217

*categories not mutually exclusive

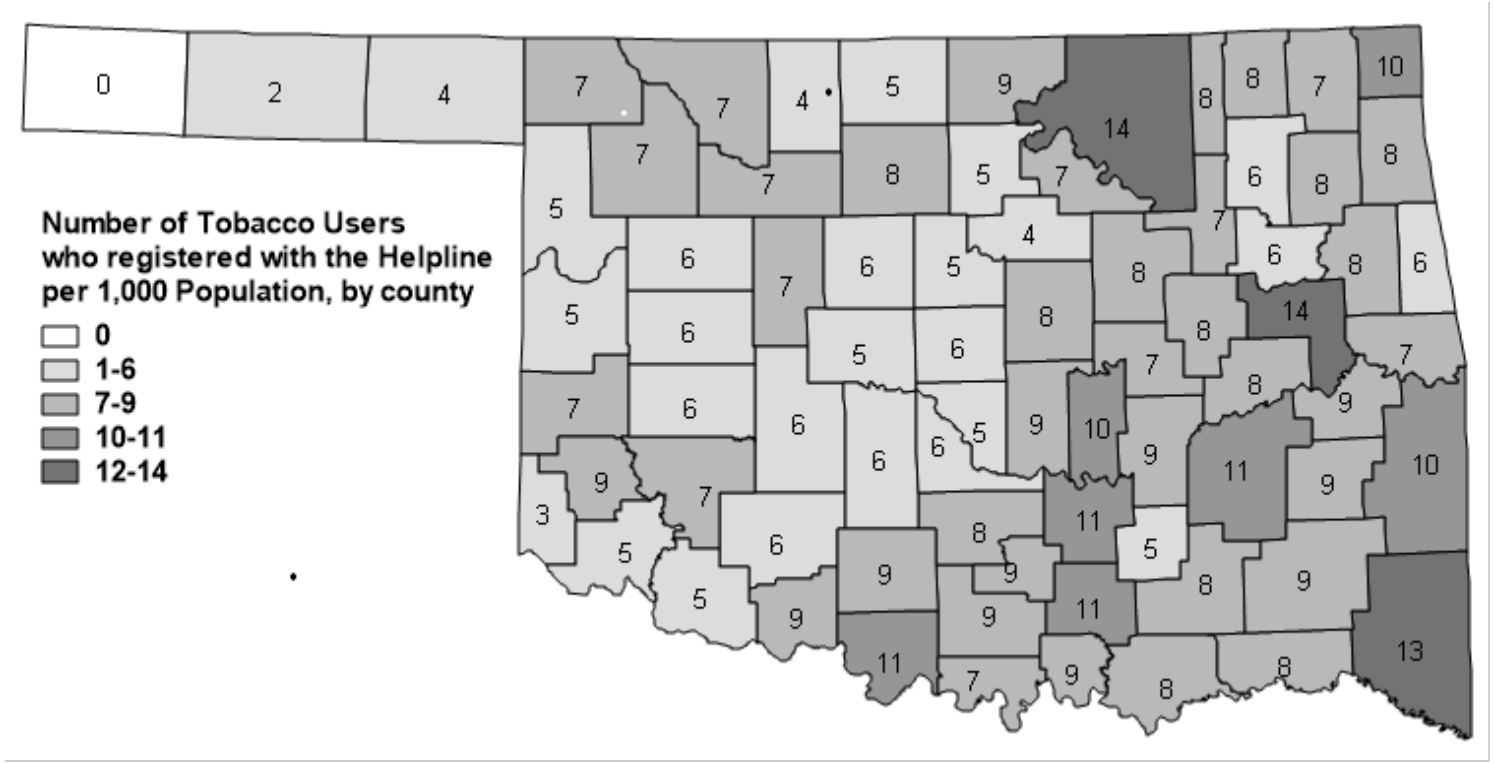
- During FY26, 211 Helpline registrants were pregnant, and 198 were planning pregnancy. Another 88 reported breastfeeding and 349 reported giving birth in the last year.
- These Oklahomans were eligible for an enhanced program that included 7 coaching sessions and up to 8 weeks of NRT.
- Most enrolling in the enhanced pregnancy program registered online (78.1%, n=588). However, 36% of those registering online received no evidence-based services (no coaching and no NRT).

Geographic Distribution of Registrants



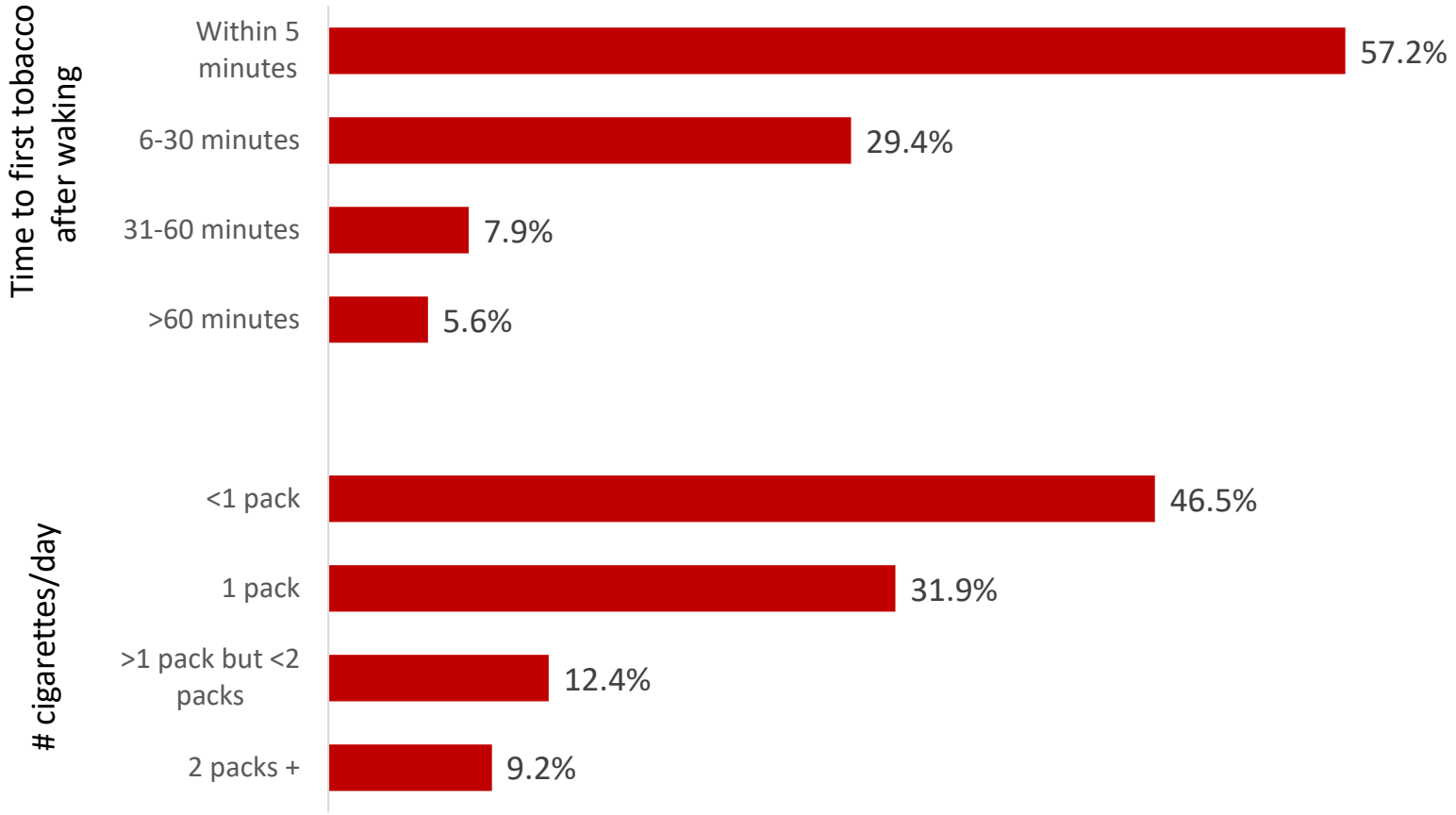
Oklahomans from all counties but one (Cimarron) contacted the Helpline for services in FY26. Among those registering for services, 16.9% came from Oklahoma County (n=3927) and another 14.9% came from Tulsa County (n=3469). Cleveland County accounted for 5.6% of registrations (n=1301).

Helpline Registrants per 1000 Population by County



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, Osage and Muskogee counties had the highest rates of registration, with 14 registrants per 1000 adult population.

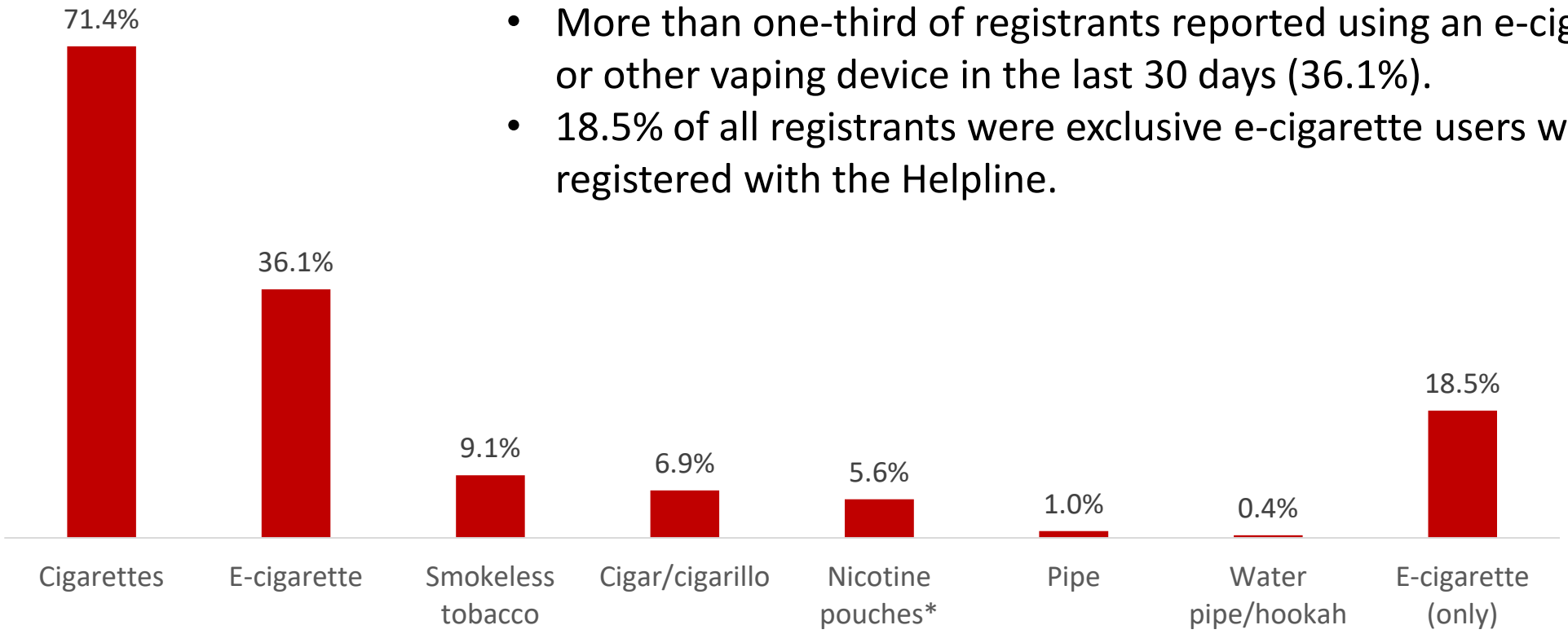
Tobacco use patterns among Helpline registrants



- More than half of Helpline registrants stated that the time after waking to first tobacco use was five minutes or less (57.2%).
- 46.5% reported smoking <1 pack of cigarettes a day.

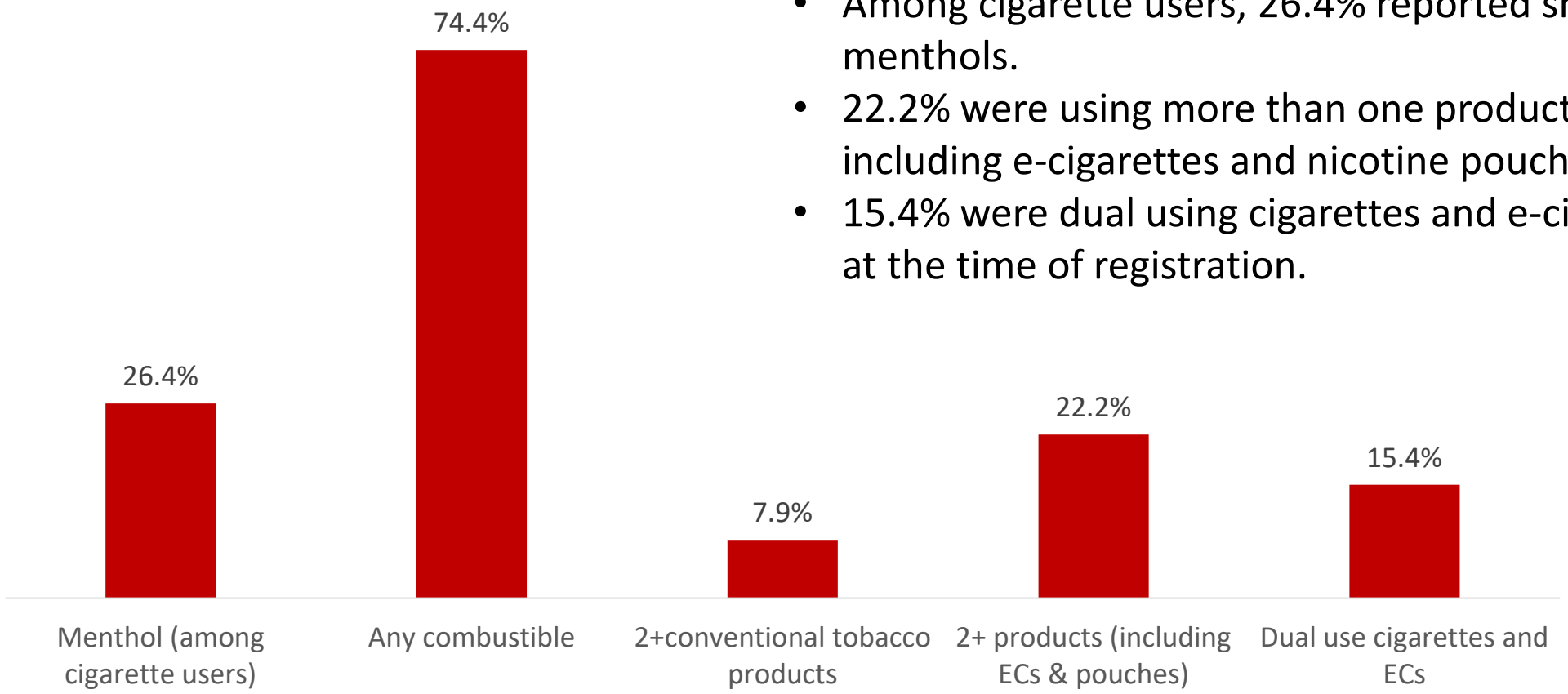
Types of tobacco/nicotine products used by Helpline registrants

- Cigarettes were the predominant form of tobacco used by Helpline registrants (71.4%).
- More than one-third of registrants reported using an e-cigarette or other vaping device in the last 30 days (36.1%).
- 18.5% of all registrants were exclusive e-cigarette users when they registered with the Helpline.



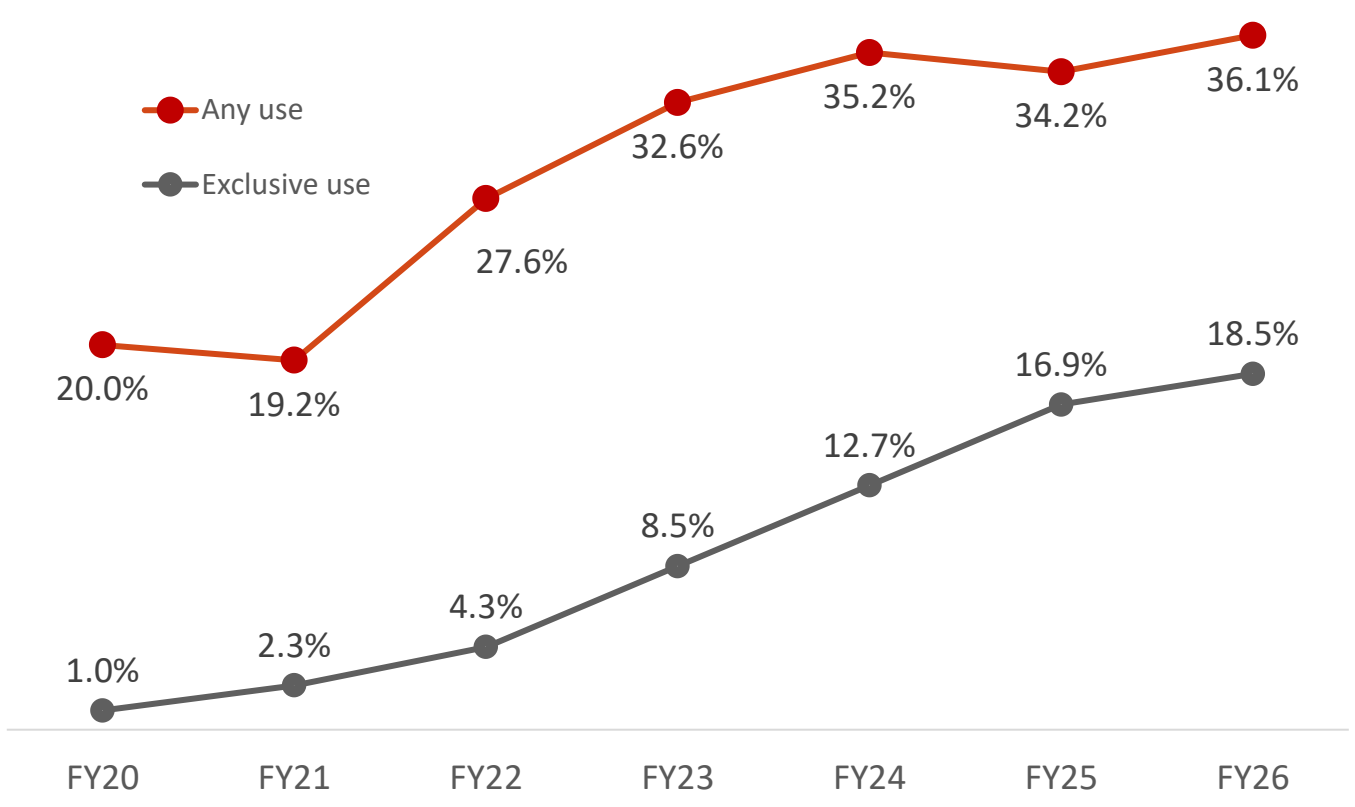
*use of pouches only available for March-June registrants

Combinations of tobacco/nicotine products used by Helpline registrants



- Among cigarette users, 26.4% reported smoking menthols.
- 22.2% were using more than one product, including e-cigarettes and nicotine pouches.
- 15.4% were dual using cigarettes and e-cigarettes at the time of registration.

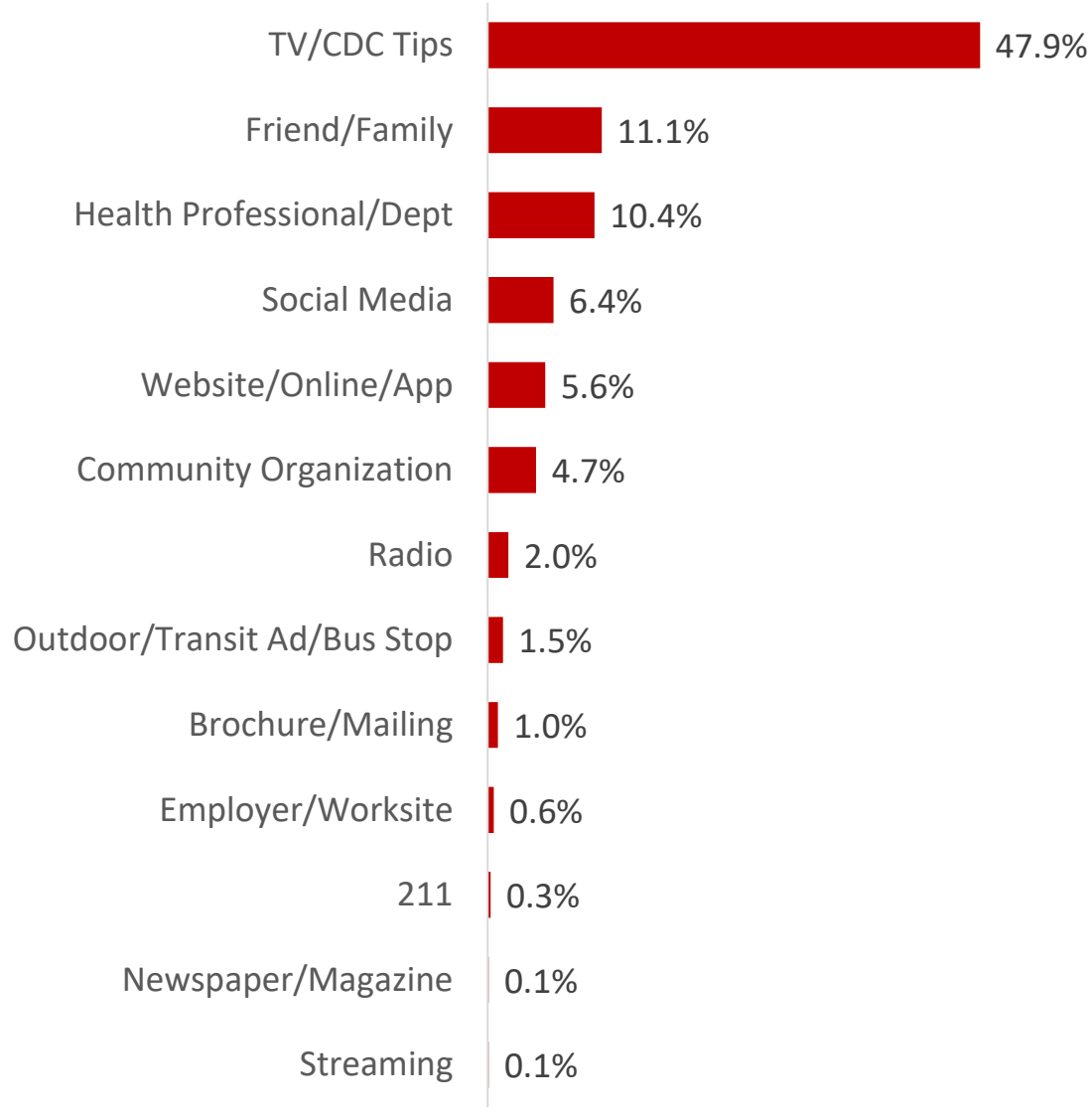
E-cigarette use in past 30 days among Helpline registrants, FY20-FY26



- The percentage of Helpline registrants using e-cigarettes *exclusively* in FY26 was the **highest to date (18.5%).**
- More than one-third of registrants (36.1%) 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 FY26, almost half of registrants reported hearing about the Helpline from TV/CDC Tips ads (47.9%).
- Friends/family and Health professional/health department were the next most frequent responses (11.1% and 10.4%, respectively).

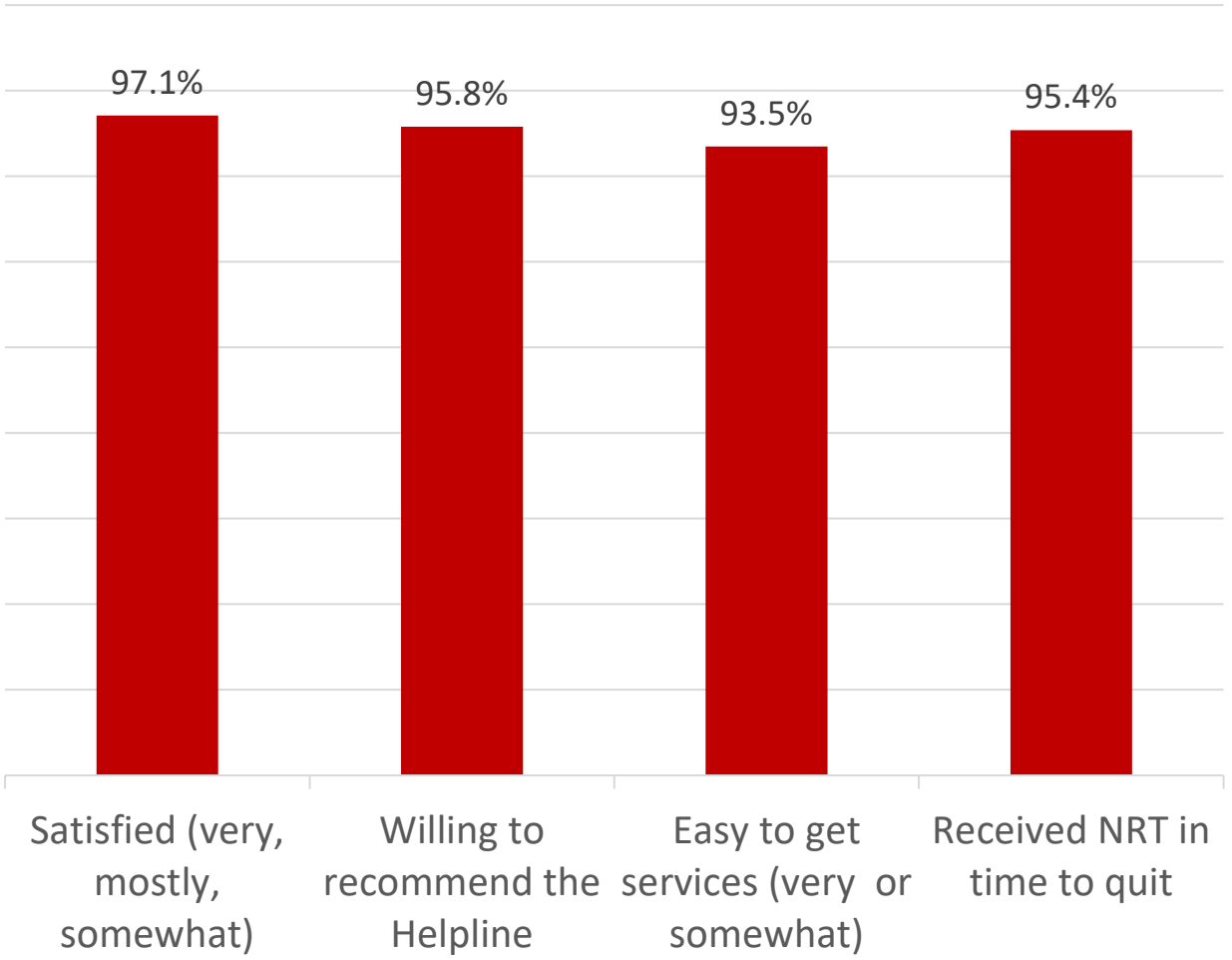


7-month follow-up evaluation

- 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 FY26 report includes 1,271 randomly selected tobacco users registering for services between December 1, 2024 and November 30, 2025. The 7-month follow-up survey was conducted from July 13, 2025 through July 2, 2026.
- 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 39.2%.
- **A total of 1,271 participants completed the 7-month follow-up survey.**

Are Helpline registrants happy with the services they receive?

- Among Helpline registrants, **97.1%** reported being “very,” “mostly,” or “somewhat” satisfied with Helpline services. This is similar to satisfaction rates reported in previous years.
- A similar proportion (95.8%) reports willingness to recommend the Helpline to a friend.
- 93.5% reported that it was “very” or “somewhat” easy to get the Helpline services they wanted.
- 95.4% also reported that they received their NRT from the Helpline in time to quit.



Are Helpline registrants getting the services they want?

On the follow-up survey, 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 (0.6%)

Helpline Service	% Interested in receiving service when registering	Among those wanting service, % receiving service after enrollment
NRT	97.6%	97.8%
Coaching via Phone	36.7%	85.7%
Coaching via Live Text	39.0%	0.6%
Coaching via Web Chat	5.2%	3.0%
Coaching via Virtual Group	6.9%	3.4%
Automated Text Messages	43.5%	81.7%
Emails with Tips	29.4%	67.9%
Online Resources/Trackers	16.0%	67.0%

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.

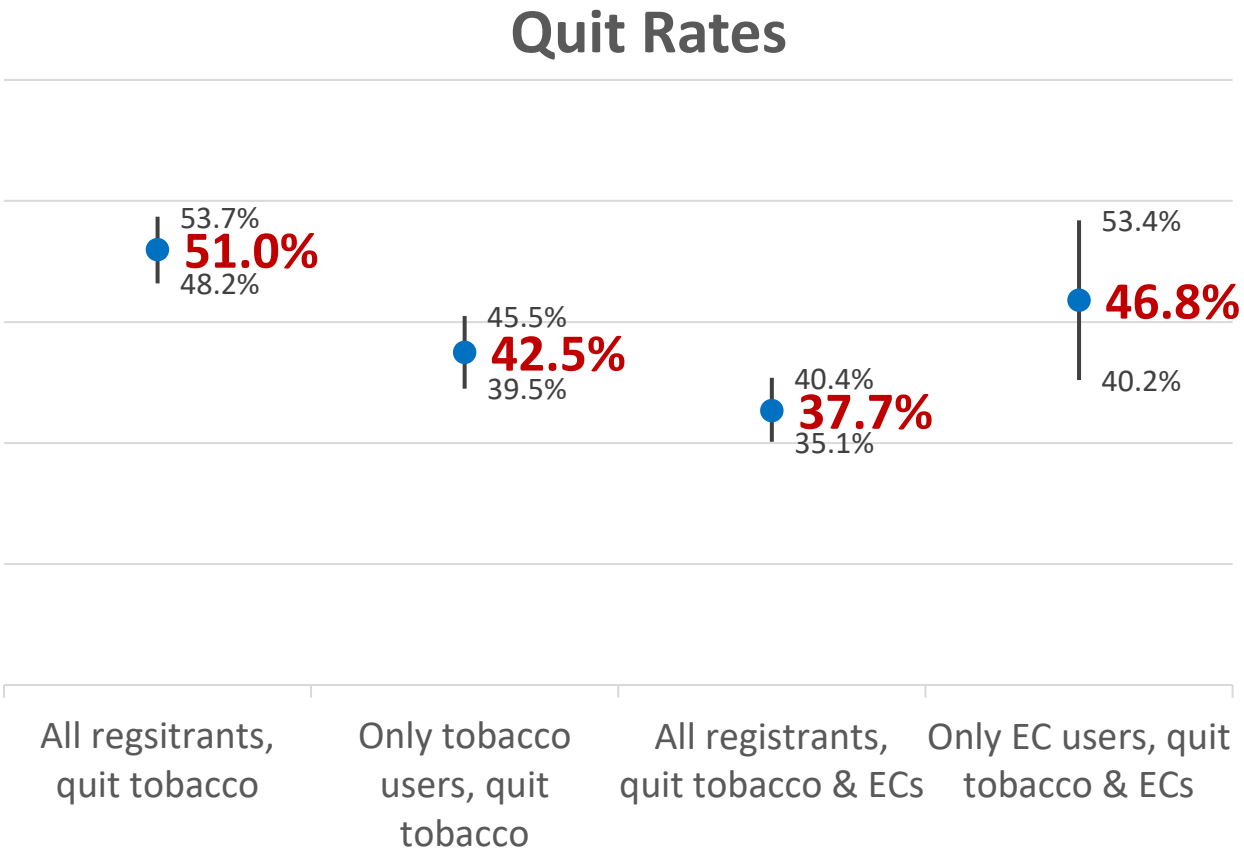
In FY26, 18.5% of participants were not actually using tobacco products at registration but were looking for help to quit electronic cigarettes (ECs). If we include them in the tobacco product quit rate, we will over-estimate the impact of the Helpline. Thus, we also calculated the overall quit rate 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, 51.0% (95% CI 48.2-53.7%) 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, 42.5%.

When abstinence is defined as not using both conventional tobacco and ECs in the last 30 days, the overall quit rate is 37.7% (95% CI 35.1-40.4%). Among exclusive e-cigarette users wanting help quitting e-cigarettes, 46.8% 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

Pouch use was reported by 5.6% of participants at registration (page 35).

We also asked about nicotine pouches at the 7-month follow-up. We found that 19.0% 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 (9.8%), 59.3% of them used the product 10 or more days during the last month.

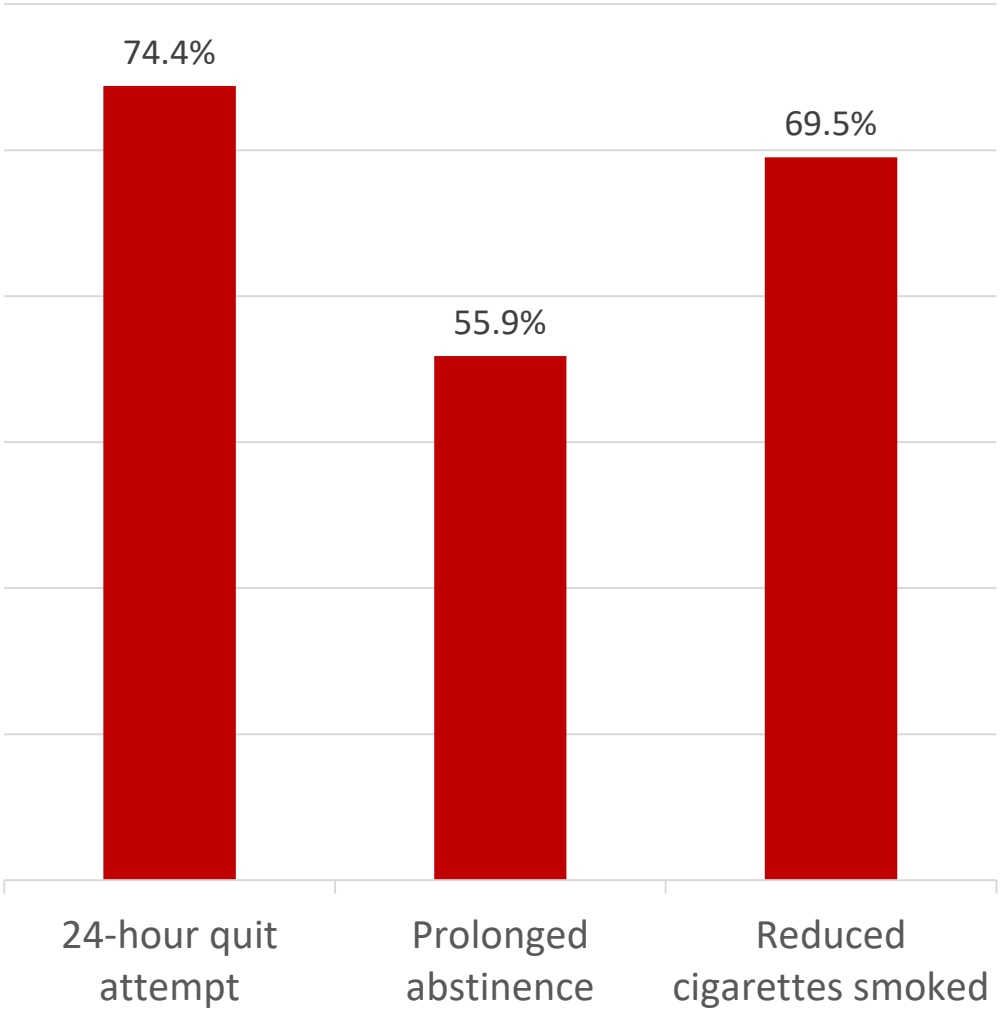
Reasons for pouch use was not asked at registration or follow-up.



Intermediate quit measures

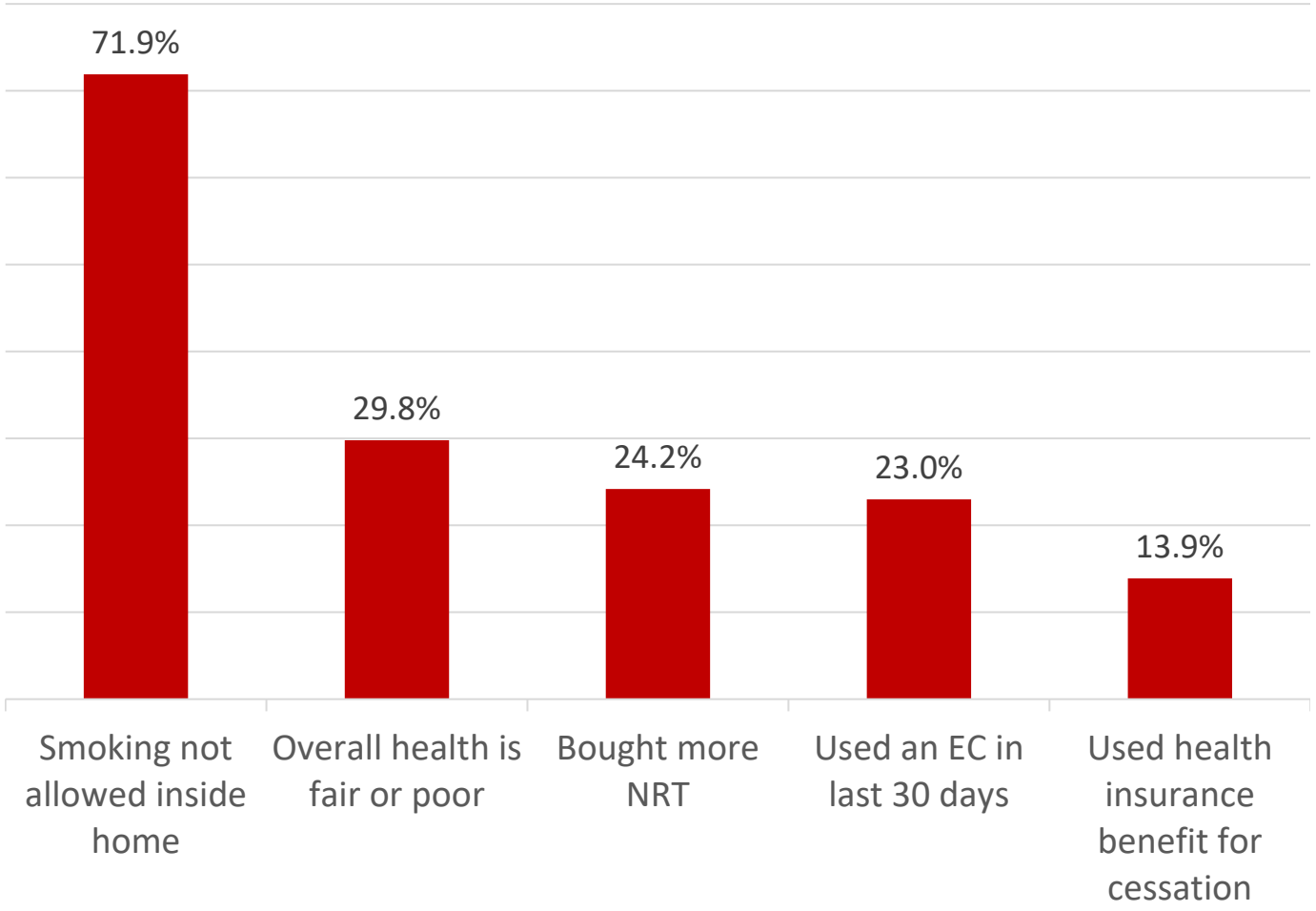
In addition to 30-day abstinence at follow-up, intermediate quit measures are also assessed.

- 74.4% had at least one quit attempt lasting at least 24-hours any time between enrollment and follow-up (24-hour quit attempt).
- 55.9% 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, 69.5% reported fewer cigarettes smoked per day at follow-up compared to baseline.



Other results from follow-up survey

- 71.9% of participants reported smoking is not allowed anywhere inside the home.
- 29.8% of Helpline participants reported their overall health was fair or poor.
- 24.2% bought more NRT.
- 23.0% reported using an e-cigarette within the last 30 days and 62.9% reported using them to quit regular cigarettes (data not shown).
- 13.9% of those with health insurance used their benefit for additional smoking cessation services.



Discussion

Although utilization of the Helpline was down 16% compared to FY25, this evaluation report demonstrates high utilization of the Helpline in FY26 (n=23,203), with online registrations accounting for about half (50.5%) of all registrations. Overall registrations were also impacted favorably by the “Limited Time Offer” expanded benefit offered two times during the year.

The decline in the number of Helpline registrants may reflect declines in overall smoking prevalence in Oklahoma (14.2%) but is also consistent with national trends as reported by our quiltine vendor and NAQC.

In FY26, 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 (19.5%) tobacco users who register online do not receive any coaching or any NRT. Among phone enrollees, the percentage is 3.4%. While some attrition is expected between enrollment and receipt of services, more than 2300 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 FY26, 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 36.1% of all registrants. Exclusive e-cigarette users are now registering with the Helpline for help quitting e-cigarettes, representing 18.5% of all registrants.

While the use of nicotine pouches was only asked at registration starting in February, 5.6% reported use in the last 30 days, and at the 7-month follow-up, 19.0% of Helpline registrants reported using a nicotine pouch since registering with the Helpline. 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, 97.1% of participants were somewhat, mostly or very satisfied, and 95.8% would recommend the Helpline to a friend or family member.

FY26 quit rates were high; 51.0% 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.

Several benefit enhancements are planned for FY27, including a new incentive program for pregnant and postpartum participants and a minimum of eight weeks of NRT for all registrants. Ongoing evaluation will continue to monitor program effectiveness and reach, will identify populations served by the Helpline, and assess potential gaps in services, outreach, and access