SMOKING CESSATION PROGRAM

Description:

Employee Wellness is partnering with KanQuit (Kansas Tobacco Quitline) to offer incentivized tobacco cessation services for Lakemary employees who wish to quit smoking.

While KanQuit is a free tobacco cessation program, our partnership includes paid incentives for Lakemary employees. Please review the following to find out more about eligibility requirements, incentives/services offered, and how to sign up:

Eligibility Requirements:

Must be actively employed (full-time or part-time) by Lakemary Center with a tenure of 90 days or more.

Services:

Tobacco cessation services are offered through KanQuit (Kansas Tobacco Quitline). The typical KanQuit program includes 5 coaching calls that last 15-20 minutes each. In addition to coaching, the KanQuit line offers assistance in connecting you to resources like nicotine quit medications. To learn more about the KanQuit programs, visit their webpage: https://kansas.quitlogix.org/en-us/about-the-program/quitline-programs/.

Incentives:

Incentives will be distributed on a first-come first serve basis to those who register for services through Lakemary Employee Wellness. The following is an outline of the incentives you can earn:

\$25 Walmart gift card- Enroll and complete the 1st call

\$25 Walmart gift card- Complete the 3rd call

\$50 Walmart gift card- Complete the 5th call

**As indicated above, eligible participants can earn up to \$100 through Lakemary's smoking cessation program.

Instructions for Registration:

- 1. Complete the Smoking Cessation Program Intake Form (attached below) and email it to Employee Wellness- grace.davis@lakemary.org.
- 2. Once received, Employee Wellness will use your information to create a referral to KanQuit, who will call you within 1-2 business days.
- 3. Employee Wellness will track your progress in the program. Upon completion of each indicated checkpoint, payments will be distributed via Walmart gift cards (\$25, \$25, \$50).

SMOKING CESSATION PROGRAM INTAKE FORM

First Name:		Last Name:			DOB:	
Primary Phone Type:	Cell	Home	Work	Primary #:		
Secondary Phone Type:	Cell	Home	Work	Secondary #:		
Zip Code:		Pr	eferred Lan	guage:		
Do you consent to receivevents, such as appoint	_	_			s tailored to you and other program	
YES NO	montron	iiiaoio, air	a quit aimiv	rerouries.		
Is it okay to leave a voice	email?					
YES NO						
Are you hearing impaired	d?					
YES NO						
_	ck my pro	gress throน _ุ	gh the KanQ	uit program for th	v, I give my consent for Lakemary e express purpose of assigning and	
\$25 Walmart gift card - E	Enroll and	I complete	the 1 st call			
\$25 Walmart gift card - (
\$50 Walmart gift card- C	complete	tne 5" call				
Participant Signature:					Date:	