

Exhibit 4
Nebraska Tobacco Quitline Reporting Requirements
Request for Proposal Number 6204 Z1

The below is not an exclusive list, but provides basic details of what type of information will be required within some of the reports.

I. MONTHLY REPORTS

Provide for current month and contract year-to-date.

A. CALL DATA

1. TOTAL INCOMING CALLS

- a. Method of entry
 - i. First time callers, Web, Fax, DÈJELO-YA, if language line was utilized
- b. Reconnected callers

2. CALLER TYPE

- a. Tobacco user, proxy and /or provider
- b. How heard about Quitline by county
- c. Tobacco users by race, ethnicity, gender, age, education, language spoken
- d. Pregnancy status
- e. Tobacco users by type of tobacco (including e-cigarettes)
- f. Stage of readiness to quit
- g. Public housing question
- h. Tobacco users by chronic conditions:
 - i. Asthma
 - ii. CAD
 - iii. COPD
 - iv. Diabetes (Type 1 or Type 2)
 - v. Cancer
 - vi. CHF
- i. Tobacco Users by Mental Health Condition:
 - i. ADHD
 - ii. Anxiety
 - iii. Bi-Polar
 - iv. Depression
 - v. Drug or Alcohol Abuse
 - vi. PTSD
 - vii. Schizophrenia
- j. Tobacco users by income and marital status
- k. Registrations by county
- l. Callers by health plan

3. PHARMACOTHERAPY

- a. Participant shipments
- b. Boxes sent

4. QUITLINE MATERIALS SENT

- a. Welcome packets
- b. Web coaching
- c. Email message summary
- d. Text message summary

5. HEALTHCARE PROVIDER TRAINING

- a. Summary of services provided
 - i. Website/training analytics
 - ii. Number of completed trainings
 - iii. Type of profession/specialization
 - iv. Number of CME/CEU certificates provided
 - v. Which county provider is located
 - vi. Participant pre/post knowledge check results
 - vii. Training participating evaluation/satisfaction results

6. TOTAL SERVICES PROVIDED IN CURRENT MONTH

- a. Services provided to tobacco users in current month
- b. Services provided to providers in current month
- c. Services provided to proxy callers in current month
- d. Services provided to clients during month, regardless of registration date:
 - i. Single call intervention: registered, completed, attempt letter, materials only
 - ii. Multiple call intervention: registered, completed 1st, 2nd, 3rd, 4th, 5th calls, etc. attempt letter, ad-hoc calls
 - iii. Materials sent to registrants (number by type)

II. QUARTERLY REPORTS (same as monthly just different timeframe)

A. REPONSES TO CDC MONTHLY QUESTIONS TO CAPTURE FEEDBACK ON NATIONAL MEDIA CAMPAIGNS

- 1. Does not Know
- 2. No
- 3. Refused
- 4. Yes
- 5. Missing

Note: Employer name must be included in client database, but not reported in monthly or quarterly reports.