SustiNet Health Partnership Tobacco & Smoking Cessation Task Force

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Tobacco & Smoking Cessation Task Force Regular Meeting June 23, 2010 Meeting Minutes

Attendees: Jeannette DeJesus, Co-chair; Andrew Salner, Co-chair; Linda Green (SustiNet Consultant);

David Gregorio; and Barbara Koren

Office of the Healthcare Advocate: Africka S. Hinds-Ayala

Absent: Frank Scifo and David Scribner

Guest Attendees: Pat Checko (MATCH Coalition); Barbara Walsh (DPH)

Andy Salner opened the meeting by welcoming Tobacco & Smoking Cessation Task Force members, Office of the Healthcare Advocate staff, and the assigned SustiNet Consultant.

The June 2, 2010 meeting minutes were approved, without correction, by all members present.

Andy publically thanked and acknowledged each member of the Working Group. Andy said main order of business for the meeting will be to have a presentation of the draft report and discuss how to strategize to move forward with the goal of submitting the final report to the SustiNet Board of Directors and Legislative Leadership. There are other items on the agenda that will be discussed after the presentation: 1. establish a conference call next week to vote on finalizing and officially accept the final report; 2. discussion of future meeting after July 1; and 3. discussion of media attention to the event of the final report.

Andy turned the meeting over to Pat Checko, Barbara Walsh, and David Gregorio to present the draft report, detailing the current status and the steps that need to be taken for completion. Pat Checko said the committee has met twice via a conference call to flush out the recommendations. The draft report was separated into three areas: cessation, prevention, and policy issues, with sub-headings of background information, economic burden, estimated cost, health benefits, and action steps for recommendation. Andy requested that Pat walks everyone through the draft with a summary version hitting the highpoints along the way with additions, changes, etc.

David Gregorio requested that everyone considers that the document was formatted in a certain way outlining the areas promoted/highlighted by importance; the taskforce needs to vote on the document and there were a number of ways to layout the document by various categories. Everything is out on the table in equal value; therefore think about what is being stated and the actions to implement. Andy invited Linda to the table and asked what is the process used with the almost final version to place is in a format consistent with what is being requested; does the consultant act before or after the issuance f the final report.

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Linda said her approach is to read to find editorial issues; the document has the full flavor of what needed to be written and should be retained. The final report will be place in an orderly fashion with better flow recommendations that will not impact the final report. Linda agrees with David and the relative importance of some of the recommendations; it is ok to say that there are issues emerging and need to be looked at more closely over time. A final should be available Sunday with a vote on Tuesday, June 29, 2010.

Andy apologized for the interruption and requested that Pat continues with the presentation of the draft report. Pat said the draft was written from the stand point that the final document will go to the Board and the legislature. Pat reiterated that all the recommendations were included in some shape or form, but not ranked.

The presentation continued with ample discussion in the areas as follows:

CESSATION: Provide comprehensive tobacco use cessation services for all Connecticut residents. There are several CESSATION recommendations dealing with various issues, with action steps (arrows) that need to be taken to accomplish that one recommendation, are as follows:

- R1. Provide Medicaid coverage for tobacco use cessation (TUC) services.
- R2. Require all public and private health insurers to provide comprehensive tobacco usage cessation interventions, including counseling and all FDA-approved nicotine replacement therapies (NRT) and pharmaceuticals.
- R3. Integrate tobacco use cessation (TUC) interventions into medical encounters.
- R4. Implement and sustain a statewide, telephone QuitLine for smoking cessation that provides both counseling and NRT.
- R5. Increase the number and types of TUC services available in diverse settings; develop and provide educational opportunities for training traditional and non-traditional TUC service providers.
- R6. Make the business case for smoking cessation benefits for employees

Andy asked if the legislature would know the cost of implementation: Pat replied that they would know the cost for Medicaid recipients for sure. Pat said the Insurance Committee will call for a cost-benefit analysis. The Quit-Line will have good info with regard to cost. Andy asked who would be insured under SustiNet; Pat said that is a question for SustiNet. Andy asked Linda if the SustiNet Board will be looking for specific work or consult with the taskforce as to what should be included in the insurance plan; Linda responded that the final reports develop d will be used as reference documents with regard to coverage and program options. Pat Checko said state employees have cessation benefits, but not every insurance plan option Jeannette DeJesus stated that the recommendations should be placed in the order of the simpler ones coming first and not endorse any specific organization. Pat stated that there should be cessation services that are web-based and evidence-based; the mention of the American Lung Association is not an endorsement, but a reference/resource of a web-based tool that is evidence-based. Linda requested that the group define the criteria to order the recommendations. Barbara said the order should be by the most important and largest impact made. Pat said the two primary targets is coverage for the Medicaid population and the rest of the community, with the remaining recommendations as supporting components of the two primary recommendations.

PREVENTION OF SMOKING INITIATION: Reduce the health and economic burden of tobacco use.

- R1. Require age appropriate life skill education in grades K-12 in CT that address anti-tobacco education, drug/alcohol use prevention, nutrition, stress management, and exercise.
- R2. Provide sustained funding for anti-tobacco media programming that incorporates evidence based strategies and current technologies including social marketing.
- R3. Redirect revenues generated through enforcement of youth tobacco access laws under CGS§12-295a(c) and CGS§53-344(b) for tobacco prevention services concerning merchant and community education.
- R4. Require mandatory prevention education for youth who are fined under the CGS§12-344(c) for possession of tobacco.

Andy questioned the use of counter-advertisement within this portion of the report: Pat said that it is included somewhat in recommendation #2 and include on page 17 in more detail. David said that Recommendation #1 is health education in schools and affecting social norms through social marketing. Pat said this is an attempt to look at a cross-cutting issue to be address in a school setting by the school administration; this is a statement.

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PREVENTION OF SECOND-HAND SMOKE EXPOSURE: Eliminate the exposure to Second-Hand Smoke where people work, live, and play.

- R1. Pass legislation that prohibits smoking in all workplaces including restaurants, bars, and in public places and eliminate availability of smoking rooms in workplaces.
- R2. Encourage adoption of Healthy Home Concept of no smoking policies in homes.
- R3. Require school districts to establish and maintain no tobacco use policies on school grounds and school events (including day-care, K-12, and college/university settings).
- R4. Ban the sale of E-Cigarettes and other non-traditional nicotine delivery devises that are not sanctioned as NRT. Develop a system to review other new products prior to their introduction / acceptance for sale in Connecticut.

There was some prioritization within this section. The recommendations are legislative issues and will continue to be addressed under Policy and Environment. The recommendations will assist those in public housing (special leases for smoke-free families) and address social marketing efforts for adolescents / college-age adults.

POLICY / ENVIRONMENT:

- R1. Update the Connecticut Tobacco Use Prevention and Control Plan and implement, fund, and sustain it.
- R2. Pass tax parity on all other tobacco products and insure any future tobacco tax increases include all tobacco and tobacco-related products.
- R3. Provide voluntary cessation services for youth who are fined under the CGS 53-344§.(c) for possession of tobacco.
- R4. Support the CT fair Trade Law which helps counteract the manufacturer trade discounting and encourage an increase to keep viable and competitive retail economic sector to CT's economy.
- R5. Insure a healthy retail environment with ample competition for Connecticut's citizens by offering replacement products for lost tobacco revenue for retailers.
- R6. Develop a surveillance mechanism that would utilize health information developed through SustiNet's IT Systems to collect and analyze data to smoking prevalence, cessation interventions, and quit raves and other parameters necessary to evaluate the efficacy and cost-effectiveness of tobacco prevention and control strategies.
- R7. Provide opportunities and support for individuals in traditional and non-traditional healthcare settings to obtain training in evidence-based TUC protocols.
- R8. Restrict new and reduce current cigarette license renewals.

Pat referenced California Laws and the impact made o date. Andy asked if more information should be provided regarding parity; Pat said that testimony will be added. Barbara explained how convenience stores are reprimanded for law violation. Barbara said that 30-50% of convenience store sales are tobacco products. There are limitations for tobacco products mark-up and minimal prices sales. Andy asked if CT should reference MA; Barbara said that what MA is doing now is not within the spirit of CT action items and support of Fair Trade Laws. Barbara said there should be restrictions for entities who can sell tobacco products; there are current license with check cashing facilities, medical facilities, and major department stores. There should be a restriction on the number of licenses, with an increase of the fee to \$100, which would allow DMHAS to complete site visits within a 12-month period. Pat continued the discussion that there is money being made available that should be applied for. Pat said there are behavioral and environmental impacts of smoking. Andy said the SustiNet HIT committee with develop a Health Information Exchange for providers to share information across the board; there was some mention of the state RHIO and HITECT. David said that it is important to pay attention to the industry's advertisements and the effect on society. Barbara said there are upcoming laws that limit internet sales; advertisement issues are being addressed. Massachusetts is still leading the way with compliance issues.

Andy said that the accompanying documents must be attaché das appendices to supplement the report and support the recommendations made. Jeannette questioned how disparity is being addressed; Pat said that everything that listed will help everyone, but it is written from the perspective to reduced disparities across the board for gender, race/ethnicity, age, etc. This information was agreed to be included in the introduction of the report, with stress on education, socioeconomic background, etc. Linda said the information and supporting documentation is plentiful and that a shuffled will be available by Friday, June 25, 2010 with everyone on the committee receiving the final, shuffled version by Monday, June 28.2010.

There was no unfinished business to be addressed by the Tobacco & Smoking Cessation Task Force. Andy did request that the group remain in-touch to discuss new findings and report to the Board as needed.

The group will have a scheduled conference call June 29, 2010 at 11:00am to finalize/approve the report.

Meeting was adjourned.