

**Tobacco and Health Trust Fund Board of Trustees**

**January 22, 2025**

**Via Microsoft Teams**

**The meeting was recorded and can be viewed in its entirety at this link**

<https://youtu.be/bmNqiMHLY1s>

Tobacco and Health Trust Fund Board of Trustees - Members in Attendance: Claudio Gualtieri (Chair), Robert Boris, Pareesa Charmchi Goodwin, Ayesha Clarke, Anne Foley, Samuel Hahn, Toni Harp, Rep. Cindy Harrison, Steven Hernandez, Suchitra Krishnan-Sarin, Mathew Jasinski, Manisha Juthani, Christopher Moran, Tricia Orozco, Michael Rell, Andrew Salner.

Tobacco and Health Trust Fund Board of Trustees - Members Excused: Ayesha Clarke

Board of Trustees Staff: Melissa Morton, Office of Policy and Management (OPM) and Sharica Rose (OPM)

Meeting called to order by Chair Claudio Gualtieri at 10:31 A.M.

<b>Agenda Item</b>	<b>Minutes</b>
<b>Welcome and introductions</b>	<p>Chair Claudio Gualtieri, (OPM) called the meeting to order at 10:31 A.M. and made the following announcements:</p> <ul style="list-style-type: none"><li>• Introduction of new Trustee:<ol style="list-style-type: none"><li>(1) Manisha Juthani – Commissioner of Department of Public Health (DPH). Commissioner Juthani is the first Indian-American to serve as a Commissioner in the state of CT. Before her position as Commissioner, she was a Professor of Medicine at Yale School of Medicine through September 2024, while she continues to be an Adjunct Professor of Medicine at Yale. She served as Director of The Infectious Disease and Fellowship Program from 2012 to 2021 and received her B.A. from the University of Pennsylvania and her M.D. from Cornell University Medical School. She completed her medical residency at New York Presbyterian Hospital, Weill-Cornell Campus.</li><li>(2) Commissioner Juthani acknowledges the kind introduction to the Board and looks forward to working with the team. She further expresses that her three buckets of priorities for DPH, are (1) emerging and preparedness related issues, (2) the regulatory matters related to healthcare quality and safety, and (3) preserving and protecting foundational public health. Among the list of areas that she is focused on, tobacco cessation and prevention is among them. She shared the state has made great progress in this area, and she looks forward to continuing the work as part of the Board.</li></ol></li><li>• Member Pareesa Charmchi Goodwin was welcomed back from her leave.</li></ul> <p>Melissa Morton, (OPM) called the roll.</p>
<b>Adopt Minutes from October 23, 2024 Meeting</b>	<p>Chair Gualtieri called for a motion to adopt the minutes from the October 23, 2024, meeting. Andrew Salner made a motion to adopt. Christopher Moran seconded. No discussion. Twelve (12) members voted in favor, zero opposed, and three (3) members, Pareesa Charmchi</p>

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	Goodwin, Toni Harp and Commissioner Juhani abstained. Motion approved. Minutes adopted.
<b>Stated Goal of Today's Meeting</b>	<p>Chair Gualtieri reminded members of the meeting objectives:</p> <ul style="list-style-type: none"> <li>• In response to Tobacco and Health Trust Fund (THTF) Board of Trustees' request to get a better sense of the projects that are being funded and the outcomes, much of today's meeting will be focused on the FY 2023 and FY 2024 allocation processes, funded projects and the impact of the Board's allocated funds to date.</li> <li>• Additionally, Trustees asked for an update on the new QuitLine vendor, National Jewish Health, therefore, a representative from National Jewish Health will present and answer questions. The presentation documents will be transmitted to legislative committees of cognizance for awareness. As they have expressed interest in these services.</li> <li>• The meeting will begin with a presentation from the Department of Mental Health and Addiction Services (DMHAS) to update the Board on the administration of JUUL Settlement funds. Chair Gualtieri noted that this presentation was held over from the October 2024 meeting. Pursuant to Public Act 23-92, beginning in September 2024, DMHAS is required annually to submit to our board a report of the disbursements of JUUL funding to the Regional Behavioral Health Action Organizations (RBHAOs).</li> </ul>
<b>JUUL Annual Report to the Board</b>	<p>Sarju Shah, Division Director of Prevention and Health Promotion at DHMAS provided a review of the 2024 JUUL Annual Report. The full presentation can be found on the <a href="#">Tobacco and Health Trust Fund website</a>. The following are highlights of the presentation:</p> <ul style="list-style-type: none"> <li>• Five (5) RBHAOs operate as subcontractors to DMHAS to carry out Alcohol, Tobacco, and Other Drugs (ATOD) prevention initiatives, including those that are part of the JUUL settlement.</li> <li>• In May 2024, sixteen-month contracts were executed with the five (5) RBHAOs in the amounts of \$300,000 each for a total of \$1.5 million disbursed by September 30, 2025.</li> <li>• RBHAOs will use the Substance Abuse and Mental Health Services Administration (SAMHSA) strategic planning framework, consisting of Needs Assessment, Capacity Building, Strategic Planning, Implementation and Evaluation to implement activities with JUUL settlement funds.</li> </ul> <p><u>Discussion</u></p> <p>A question-and-answer period followed the presentation. Below are the highlights:</p> <ul style="list-style-type: none"> <li>• Dr. Suchithra Krishnan-Sarin asked for clarification on the link between the work of RBHAOs related to e-cigarette prevention and cessation and that of the THTF to ensure there is no duplication. Sarju Shah responded that DMHAS and DPH</li> </ul>

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<b>JUUL Annual Report to the Board</b>	<p>coordinate activities and will continue to work together to build resources and avoid duplication.</p> <ul style="list-style-type: none"> <li>Dr. Suchithra Krishnan-Sarin also noted that as the Board is developing programs, members need to remember what substances youth are currently vaping. It goes beyond nicotine and includes marijuana as well. Sarju Shah responded that DMHAS has a Cannabis Prevention Program also being administered in coordination with RBHAOs. Additionally, DMHAS is identifying retailers selling to youth as part of their mandated enforcement program through utilization of undercover buys, focusing on retailer education, staying on top of new vaping mechanisms and products and working with police departments to keep them up to date on new laws. Chair Gualtieri noted that the Board may wish to obtain DMHAS feedback when developing the next allocation plan.</li> </ul>
<b>Update on Fiscal Year (FY) 2023 and FY 2024 Request for Proposal (RFP) Process</b>	<p>Chair Gualtieri recognized DPH staff and Board members who assisted and evaluated applications during the RFP process. He then introduced DPH Commissioner Juthani to provide an update on the FY 2023 and FY 2024 RFPs.</p> <p>Commissioner Juthani provided an update on the outcome of RFP process for the FY 2023 funds and the development and release of the RFPs for FY 2024 funds. The full presentation can be found on the <a href="#">Tobacco and Health Trust Fund website</a>. The following are highlights of the presentation:</p> <p><u>FY 2023 Funding RFP and Contract Development Update</u></p> <ul style="list-style-type: none"> <li>Commissioner Juthani provided a review of the five (5) Centers for Disease Control and Prevention (CDC) Best Practice Components that also comprise the Board's allocation categories. They include (1) State and Community Interventions, (2) Mass Reach Health Communication, (3) Cessation Interventions, (4) Surveillance and Evaluation, (5) Infrastructure, Administration and Management.</li> <li>The FY 2023 Fund Allocation Plan distributing \$12 million was approved by the legislature on March 14, 2024, and followed by the development and release of two RFPS (1) for components one (State and Community Interventions), three (Cessation) and five (Surveillance and Evaluation) and (2) for component two (Mass Reach Health Communications).</li> <li>The RFP process concluded on January 2, 2025, and resulted in 100% of the FY 2023 funds being awarded.</li> <li>RFP one encompassing components one, three and four resulted in receipt of 17 proposals with seven being selected to receive funding in the amount of, \$9,587,500. The seven awarded vendors are: CATCH Global Foundation, City of Bridgeport and Southern CT State University for Component One. American</li> </ul>

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<p><b>Update on Fiscal Year (FY) 2023 and FY 2024 Request for Proposal (RFP) Process</b></p>	<p>Lung Association, Farmington Valley Health District, Wheeler Clinic for Components one and three. Island Peer Review Organization, Inc (IPRO) for Component four.</p> <ul style="list-style-type: none"> <li>• RFP two targeted component two, Mass Reach Health Communication specifically because the Department of Administrative Services (DAS) has a list of five (5) contracted media vendors with approved contracts to work with the state. Each of the vendors was notified of the RFP opportunity and two (2) proposals were received. The Odonnell Company was selected to receive the award of \$1,387,500.</li> <li>• As it relates to component five, Infrastructure, Administration and Management, \$525,000 has been transferred to DPH from the FY 2023 allocation. A new position for a Health Program Associate (HPA) has been filled and accepted by Amanda Fata, who will start on January 24, 2025. Ms. Fata will focus on contracting and programmatic work to administer the Tobacco and Health Trust Fund dollars. She will be introduced to the Board at the April 2025 meeting.</li> <li>• The contracts and statements of work (SOW) for the FY 2023 funds are under development.</li> </ul> <p><u>FY 2024 Funding RFP Update</u></p> <ul style="list-style-type: none"> <li>• The Board recommended disbursement of \$14,394,776 of 2024 funding between the five (5) CDC categories. The allocation percentages of Components 1, 2 4 and 5 were all slightly reduced, so that the percentage allocation of Component 3, Cessation Interventions, could be increased from 40% to 48%.</li> <li>• The draft FY 2024 RFP is in queue for Legal Review, with only Component 1, State and Community Interventions and Component 3, Cessation being listed for new proposals. As part of the revisions to the next RFP, it will be recommended that projects fill gaps in service areas across Connecticut that were not included in the FY 2023 selected projects, while attempting to reach minority communities and less populated areas as well. The goal is to ensure that funded projects cover as much of the state as possible and DPH will, therefore, attempt to solicit proposals from as broad a swath of entities as possible.</li> <li>• At this time, Component 2, Mass Reach Health Communication; \$2 million of Component 3, Cessation designated for the QuitLine vendor National Jewish Health; and Component 4, Surveillance and Evaluation will not go to RFP but have the existing contracts extended.</li> <li>• DPH is always looking for volunteers to participate in the next RFP round. If anyone would like to volunteer, please contact DPH staff Allison P. Sullivan at <a href="mailto:Allison.Sullivan@ct.gov">Allison.Sullivan@ct.gov</a> or <a href="mailto:DPHTobacco@ct.gov">DPHTobacco@ct.gov</a>.</li> </ul>

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<p><b>Update on Fiscal Year (FY) 2023 and FY 2024 Request for Proposal (RFP) Process</b></p>	<p><u>Discussion</u></p> <p>A question-and-answer period followed the presentation. Below are the highlights:</p> <ul style="list-style-type: none"> <li>• When asked why the \$2 million in funding for National Jewish Health (NJH) is separated from the overall cessation funding Commissioner Juthani responded, NJH is the QuitLine vendor, and the Board had allocated \$500,000 for them in FY 2023 and \$2 million in FY 2024 to ensure continuity of services. Chair Gualtieri confirmed that this was a topic of discussion and deliberation among the Board, during the second round of allocations and members as well as advocates noted that consistency with the QuitLine matters. Additionally, there is a body of evidence from the previous third-party evaluator highlighting the QuitLine as a successful intervention with good outcomes. Therefore, the Board supported a multi-year contract to support QuitLine services for a continuous five years.</li> <li>• Cindy Harrison asked if services are going to expand to other areas of the state where vendors may not have responded or been awarded. Commissioner Juthani responded, that as part of revisions from the FY 2023 RFP, DPH will recommend prioritizing projects to fill gaps in service areas across the state.</li> <li>• In response to Dr. Andrew Salner’s question about timelines for the finalization of the FY 2023 contracts and start of project implementation, and the RFP release and contract completion for FY 2024 funds, Julie Vigil, Branch Chief at DPH responded that the current awardees were notified the first week of January of their award amounts. The team is currently finalizing the contracts and working on streamlining the process with the Legal Division. Commissioner Juthani added that she anticipates it may be several months before FY 2023 contracts are signed, the work starts after that. She noted that the six-month post award timeframe is a good point for DPH to provide an update on the status of the FY 2023 contracts.</li> <li>• Dr. Suchithra Krishnan-Sarin noted that many of the awarded proposals to be funded in with FY 2023 dollars may be comprehensive and cover a large area, but there are not many that focus-on minority communities. She suggested that the next RFP guide proposers to this need. Commissioner Juthani noted that point and shared that a good way to do this would be to incorporate criteria into the scoring system that can prioritize or give additional points to programs and interventions that target minority populations.</li> </ul>
<p><b>QuitLine Presentation</b></p>	<p>Chair Gualtieri opened and welcomed Dave Woodruff from National Jewish Health (NJH) to present updates on the QuitLine. The full</p>

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QuitLine Presentation	<p>presentation can be found on the <a href="#">Tobacco and Health Trust Fund website</a>.</p> <p>The following are highlights of the presentation:</p> <ul style="list-style-type: none"> <li>• NJH is the current cessation and QuitLine vendor for Connecticut since July 2024.</li> <li>• NJH was founded in 1899 and is dedicated to respiratory health for over 125 years.</li> <li>• QuitLine is a division of NJH which was developed in 2022 as a comprehensive tobacco cessation program. Currently, it is the largest nonprofit provider of telephone-based tobacco cessation services in the U.S.</li> <li>• The program is evidence-based and has assisted more than 2.5 million people with their quit attempts.</li> <li>• The program features, telephone coaching with experienced Tobacco Treatment Specialists, a suite of digital services, personalized educational materials and Nicotine Replacement Therapy (NRT) for eligible participants. Phone coaching is available seven days a week; online resources are available 24/7. Coaches speak English and Spanish and more than 200 additional languages are offered via translation services.</li> <li>• The process flow consists of: Intake, Enrollment, Coaching, NRT Order and Outcomes.</li> <li>• Program eligibility for Connecticut requires that participants are state residents, 13 years or older. NRTs are available only to participants 18 years of age or older.</li> <li>• During the intake process data is collected and used to provide participants with educational materials personalized and tailored to their specific needs.</li> <li>• Population specific services include programs dedicated to Pregnancy and Postpartum and My Life, My Quit, Youth Program.</li> </ul>
<b>Discussion of Next Steps</b> a) <b>Standing Agenda Items</b> b) <b>DPH Data Presentation</b>	<p>Chair Gualtieri shared that DPH budget and project updates will remain as standing agenda items for future meetings along with vendor presentations as appropriate. The April meeting will also include a presentation on the most recent set of Behavioral Health Risk Assessment Surveillance System data collected by DPH.</p>
<b>Public Comment</b>	None
<b>Adjourn</b>	<p><b><u>VOTE:</u></b> Chair Claudio Gualtieri called for a motion to adjourn. Dr. Andrew Salner made a motion to adjourn. Seconded by Michael Rell. All in favor. Meeting adjourned at 12:03 P.M</p>