

**Tobacco and Health Board of Trustees**

**November 13, 2023**

**Via Microsoft Teams**

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

<https://www.youtube.com/watch?v=a21GbCAJr0o>

Tobacco and Health Trust Fund Board of Trustees - Members in Attendance: Claudio Gualtieri (Chair), Robert Boris, Anne Foley, Pareesa Charmchi Goodwin, Toni Harp, Rep. Cindy Harrison, Mathew Jasinski, Michael Rell, Suchitra Krishnan-Sarin, Andrew Salner, and Jody Terranova

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

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

Meeting called to order by Chair Claudio Gualtieri at 10:32 A.M.

<b>Agenda Item</b>	<b>Minutes</b>
Welcome and introductions	Chair Claudio Gualtieri, (OPM) called the meeting to order at 10:32 A.M. Melissa Morton, (OPM) called the role.
Adopt Minutes from October 11, 2023 Meeting	Claudio Gualtieri called for a motion to adopt the minutes from the October 11, 2023 meeting. Andrew Salner made a motion to adopt. Anne Foley seconded. There was no discussion. Ten (10) members voted in favor and one (1) member, Michael Rell abstained. Motion approved.
State Goal of Today's Meeting	<p>Claudio Gualtieri informed members the purpose of the meeting is to engage in discussion and vote on priority areas and funding allocations for the 2023 Trust Fund allotment of \$12 million. He also reminded members that at their request Department of Public Health (DPH) staff obtained updated CDC guidance documents on tobacco use, cessation and prevention. The documents support the 2014 CDC Guidelines. Updated documents were shared with members prior to this meeting.</p> <p>Discussion:</p> <ul style="list-style-type: none"><li>Members asked how the work of the Tobacco and Health Trust Fund Board of Trustees (Board) intersects with the JUUL Settlement that Connecticut will be receiving. Claudio Gualtieri cautioned Board members about coordinating with the Juul Settlement at this time since the outcome of CT receiving funds is uncertain. He advised rather than delay our work to wait on JUUL action, the Board can move forward with its priorities and set the programs that the JUUL Settlement group can consider coordinating with when the time comes. Staff from the Department of Mental Health and Addiction Services (DMHAS) will be presenting to the Committee in January and can be asked to provide a JUUL settlement update.</li></ul>
Refresher on Statute, CDC Best Practices & Materials	Chair Claudio Gualtieri introduced DPH Deputy Commissioner Jody Terranova to provide a brief overview of the updated CDC materials and a refresher on the CDC recommended funding allocation breakdown for the five (5) CDC best practice categories: (a) State and Community Interventions, (b) Mass Reach Communications, (c) Cessation

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	<p>interventions, (d) Surveillance and Evaluation, and (e) Infrastructure, Administration, and Management and a definition of each category.</p> <p>Discussion:</p> <ul style="list-style-type: none"> <li>Andrew Salner highlighted the importance of addressing youth prevention and cessation and noted that mass health communications and state and community interventions are CDC categories where this can be addressed.</li> </ul>
<p>Discussion and Vote on Priority Areas for Funding</p>	<p>Claudio Gualtieri reminded members of the Board’s statutory charge and the fact that the Board may add priority areas to the four (4) referenced in statute but to consider that (1) all funding priorities must fall under the CDC categories that are now codified in statute, and (2) that adding priority areas necessarily dilutes the four (4) statutorily specified priority areas. The four (4) priority areas specified in statute are: (i) prevention of initial tobacco and nicotine product use among youth and young adults; (ii) smoking cessation directed at adults and youth; (iii) elimination of exposure to secondhand smoke and aerosol; and (iv) identification and elimination of tobacco and nicotine-related disparities.</p> <p>The following are highlights of the ensuing discussion:</p> <ul style="list-style-type: none"> <li>Toni Harp shared her view that we need to allocate some funding to engage in early childhood prevention. Claudio Gualtieri confirmed that there is no age floor and that the Board can clarify age groups such as “early childhood” and “young adult” in the allocation plan submitted to the committees of cognizance. Jody Terranova confirmed that the CDC defines youth as ages 18 and under.</li> <li>Andrew Salner raised the need to address vaping and more focused at-risk groups in the priorities. Members discussed whether edits to the provisions are needed to do this. Claudio Gualtieri reminded members that funding for specific groups can be braided across all priorities and that the inclusion of vaping was legislative intent.</li> <li>Suchitra Krishnan-Sarin noted the Board may wish to make a statutory change to reference “combustible” and “non-combustible” smoking and nicotine products to be more inclusive. She also noted the need to address smoking marijuana. Claudio Gualtieri encouraged the Board to focus funding on nicotine and smoking matters and not dilute funding to address marijuana use since other funding exists specifically to address substance use and abuse. He also suggested the Board may wish to consider forming an ad hoc subcommittee to refresh the Board’s authorizing statute to add a member of DMHAS so there is a direct line to the JUUL settlement work.</li> </ul> <p><u>VOTE</u>: Andrew Salner made a motion to formally ratify adhering to the four (4) funding priorities outlined in statute [P.A. 23-92, Section 4 (d)(1)]. Michael Rell seconded. All in favor by voice vote. Motion carried.</p>

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Discussion and Vote on Funding Allocations	<p>Claudio Gualtieri reminded members now that priority areas have been confirmed the Board’s next point of business is to set the funding allocation percentages across the statutorily adopted CDC funding categories: (1) state and community interventions; (2) communication methods to disseminate health information to a wide audience; (3) cessation interventions; (4) surveillance and evaluation; and (5) infrastructure, administration and management. He reminded members that the previously approved priority areas can fall under multiple funding categories.</p> <p>Highlights of the ensuing discussion:</p> <ul style="list-style-type: none"> <li>• Members discussed what constitutes surveillance and evaluation and whether there are other entities in the state better positioned to conduct surveillance and examine prevalence rates. Deputy Commissioner Jody Terranova informed members that surveying behaviors and health outcomes can be examined beyond just prevalence. Toni Harp noted that it would be helpful to know what traditional and nontraditional surveillance activities are already underway in the state to avoid duplication. Claudio Gualtieri noted that the RFP development team can address this concern by requiring proposers to conduct a landscape analysis that ensures they are not duplicating existing efforts.</li> <li>• Andrew Salner voiced his view that it is important to adequately fund robust third-party evaluation of the programs the Board funds and that most entities recommended allocating 10% of total funding to such work.</li> <li>• Members discussed the most effective ways to address equity and various disparities that affect rates of smoking and prevention and cessation outcomes and agreed that equity can be addressed across programs in all funding categories.</li> <li>• Rep. McCarthy Vahey reminded Board members of the need to braid funding from various sources together.</li> <li>• Deputy Commissioner Jody Terranova requested that Board allocate \$500,000 to continue funding the Quitline, a historically Board supported initiative that is an evidence-based success story. It was noted that the final retrospective report developed by the prior iteration of the Board highlighted the Quitline as a success and recommended funding it in the future should funding become available. She also noted that a portion of the \$500,000 would be used to establish e-rereferrals from physicians rather than putting the onness on the patient to proactively call the Quitline. She also clarified that outreach to promote the line is a separate cost not included in the \$500,000 ask and covered by other funds. The \$500,00 exclusively covers services. Representative Cindy Harrison asked if the cessation products offered can be provided to youth under age 18. Deputy Commissioner Terranova clarified that they are not FDA</li> </ul>

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	<p>approved for that age group. She also shared that the Quitline bills DPH according to usage rates, so the number fluctuates. Cost is currently \$35,000/month. Melissa Morton shared the last two years of the Board’s existence the Quitline was awarded \$1.6 million. Suchithra Krishnan-Sarin said the Quitline is a good resource, but more money needs to go towards communications to youth and we need to look at who is using the Quitline and equity concerns.</p> <ul style="list-style-type: none"> <li>• Claudio Gualtieri reminded members that statute allows the Board a \$50,000 or 10% allocation variance should it need to redistribute a portion of funds from one category to another in the approved allocation plan.</li> </ul> <p><u>VOTE</u>: Deputy Commissioner Jody Terranova made a motion to allocate \$500,000 to continue funding the Quitline. Toni Harp seconded. All in favor. Motion carried.</p> <p><u>VOTE</u>: Claudio Gualtieri called for a motion to approve the Tobacco and Health Trust Fund Allocation Plan set in accordance with CDC Best Practices. Robert Boris made the motion. Toni Harp seconded. All in favor. Motion carried.</p>
Discussion of Next Steps	<ul style="list-style-type: none"> <li>• Chair Gualtieri summarized the following next steps: <ul style="list-style-type: none"> <li>○ Allocation Plan will be drafted and submitted to the Committees of Cognizance who have thirty (30) days to take action or it is automatically adopted.</li> <li>○ Anyone interested in serving on the RFP development or evaluation teams should email Shana Jones at DPH with their information area of interest.</li> </ul> </li> <li>• Anne Foley added that the Board may wish to consider a legislative change that increases the \$50,000 category shift allowance to provide the Board with more flexibility in the future. She also recommended that a change should be made to clarify who is the Board Chair.</li> </ul>
Public Comment	None
Adjourn	Chair Gualtieri called for a motion to adjourn. Andrew Salner made a motion to adjourn. Seconded by Michael Rell. All in favor. Meeting adjourned at 12:10 P.M.