

Tobacco Revenue, Use, Spending and Tracking Commission (TRUST)  
Bureau of Tobacco Education and Prevention Program (BTEP)

**September 25, 2008**

State Laboratory  
State Lab Auditorium (Igloo)  
250 N. 17<sup>th</sup> Ave  
Phoenix, AZ 85007

***MINUTES***

**Members Present:**

Linda Bailey  
Benton Davis  
Nancy Hook  
Kelly Hsu

Matt Madonna  
Violet Mitchell-Enos  
Babak Nayeri  
Bill Pfeifer, Chairman

**Members Absent:**

Wil Counts  
JR Ramirez  
Dana Russell  
Ronald Spark

**ADHS Staff:**

January Contreras, ADHS Director  
Jeanette Shea-Ramirez, ADHS Asst Dir  
Wayne Tormala, ADHS BTEP  
Mary Ehlert, ADHS BTEP  
Karen Boswell, ADHS BTEP

Gowri Shetty, ADHS BTEP  
Todd Pearce, ADHS BTEP  
Ben Palmer, ADHS BTEP  
Byron Homer, ADHS BTEP  
Stacy Green, ADHS BTEP

**Public Attendee:**

Kristen Barney  
Mary Gilles  
Jill Gomez  
Arnold Jackson  
Hector Juarez

Louise Strayer  
Tim Vaske  
Carol Whitlock  
Corey Woods

**Call to Order**

Bill Pfeifer called the meeting to order at 10:13 am.

**Mr. Pfeifer called for a motion to approve the April minutes.**

**Matt Madonna raised the question, Linda Bailey seconded the motion. Motion passed.**

## **Introductions**

Mr. Pfeifer asked the TRUST, ADHS staff and public attendees to introduce themselves with their name and affiliation ending with January Contreras, new ADHS Director. Ms. Contreras introduced herself and is the former Senior Health Policy Adviser to Governor Napolitano. She has heard and continues to hear many good things about the work Bureau Chief Wayne Tormala and BTEP have been doing. The Director's Office will be implementing a strategic plan to focus on health equity in an effort to eliminate inequities with disparate populations.

Mr. Pfeifer thanked Ms. Contreras for meeting with the TRUST Commission and him individually to discuss the Commission. Babak Nayeri asked Ms. Contreras what she believes the role of the TRUST Commission to be. Ms. Contreras stated the Commission serves in an insightful advisory role that she values. Ms. Contreras also addressed the potential for funding to be sweep. At this time she believes as the budget situation will require people to inquire about Tobacco Tax Funds but feels confident in the language of the law and that it "speaks for itself" as to describe that the money will likely not be touched.

## **Nominating Committee**

Benton Davis provided the Nominating Committee Report. Mr. Davis informed the commission that there is no report to give until the BTEP Strategic Plan fully dictates the composition of the TRUST. The issue should be put on hold until further notice.

## **Financial Report**

Karen Boswell provided the BTEP financial report. Ms. Boswell will reference three documents. A month trend line, an overall trend line and the BTEP/Chronic Disease budget with FY08 actual end figures and current FY09 figures. Ms. Boswell stated that the three documents are basic and clearly indicate that revenue is steadily declining. There is no way to project FY09 end figures because it is way too early to see any major trends.

Matt Madonna asked about the \$.02 tax used for enforcement. Wayne Tormala stated that approximately \$700,000 will be rolled into BTEP sometime in October. Further discussion occurred stating that some monies would remain with Smoke-free Arizona for administration and enforcement purposes. The \$700,000 has not yet been received and thus not been allocated. It will likely be used to help out in areas that are in need of extra funding which is beneficial due to reduced revenue.

Discussion occurred regarding vacancies with BTEP and the Bureau's ability to function if multiple vacancies with current staff were to occur. The main issue is funding. BTEP is funded with Tobacco Tax Dollars, not the general fund so in essence, they should not be subject to general fund rules. Mr. Tormala assured the commission that if multiple vacancies were to occur, there are contingencies in place to replace mission critical positions. Mr. Tormala further stated that BTEP has not done themselves any favors in this respect because they have functioned at a normal level using alternative methods such as brining in staff from other agencies, shifting job duties and using contractors from county partners. This creative use of staff was further supported by Jeanette Shea-Ramirez, Assistant Director for ADHS PHS, who stated that BTEP is one of the few Bureaus to not be adversely affected by the hiring freeze. The question was raised whether or not something formally should be stated to Ms. Contreras regarding the issue but the

Commission was informed that the issue cannot be raised to the ADHS Director because they answer to the Department of Administrative Services with issues pertaining to personnel.

Mr. Pfeifer asked a question regarding the tracking of Internet sales and the black market. Ms. Boswell will review with BTEP's financial manager. The question was posed as to find a direct correlation as to why revenue is declining. Is it because of a decrease in consumption or prevalence? Currently intake at the Arizona Smokers' Helpline (ASHLine) asks the question of where smokers purchase their cigarettes. Gowri Shetty stated that the surveillance will be changed to make it more modular. There will be more tobacco questions. They have some data that can be provided at the next meeting.

### **Request for Grant Applications Status Report**

Ms. Boswell stated that two Requests for Grant Applications (RFGAs) were established and are currently in the review process. The two RFGA's cover priority populations and tribes. Sixteen applications for the priority populations were received as well as two for the tribal populations. They will be publicly awarded in October. Specific attention was paid to the population and geographical area wished to be served and focuses on tobacco and chronic disease efforts relating to the four leading causes of death as defined by the Centers for Disease Control (CDC). The award recipients will have specific and measurable goals and will have been selected by a team of outside experts to ensure impartiality. The awards will be renewable depending on the completion of phases. Phase 1 is a community needs assessment, Phase 2 is determining the viable partners out there in the community to work with and Phase 3 is sustainability. One major advantage to this selection process will be that all the grants will begin at approximately the same time, thus appropriate comparable evaluation can occur with respect to data collection.

### **BTEP Coordination with Chronic Disease Program**

Wayne Tormala provided the update on BTEP's efforts to partner and coordinate with the Chronic Disease program. There is a strong linkage between tobacco and chronic disease. Tobacco use often leads to chronic disease if unchecked. The goal is to "de-silo" all parties involved and work with one another by using a holistic approach. By using an integrated systems approach, effectiveness is strengthened both financially and programmatically.

Mr. Madonna asked if priorities have already been established. Mr. Tormala stated that yes they have, but may need to be revisited and in the process as well as the best practices will be reviewed as well. To expand on the possible linkage between BTEP and Chronic Disease, there will be some RFGAs and worksite wellness campaigns. An integrated website linking all parties involved will be created to centralize and simplify efforts for those who seek services. Experts and stakeholders will be a part of the process.

Discussion occurred around the carry forward dollars of Chronic Disease and the four leading causes of death in Arizona. Monies are being spent at a greater frequency but can only be spent on the four leading causes of death. Some members of the commission felt the CDC recommended guidelines discriminate against certain smaller sections of the population where other diseases are more prevalent.

A question concerning the quitline and its readiness for deaf and blind potential users was asked. Linda Bailey addressed the concern by stating new and innovative methods are in development including face-to-face teleconferencing.

### **Marketing Campaigns Update**

Mary Ehlert provided the marketing campaign. The new cessation campaign will air at the end of FY2009 and not January 2009 as previously indicated. This is due to the EX Legacy campaign still going on.

The rough cuts for the “Brought to You by” youth prevention campaign were shown to Mr. Tormala and Mr. Pfeifer. Mr. Pfeifer expressed his enthusiasm and support for the rough cuts even in their primitive form. He further stated that they were edgy, well-done and have a very professional feel to them. Ms. Ehlert explained that the campaign was intended to grab people’s attention, especially the key demographic, and drive them to the website. The website will appeal to youth and not be known as an ADHS website.

The worksite wellness campaign seeks to centralize all marketing. It will be a one stop shop. Included will be a worksite wellness diagnostic. There will be a spokesperson to help champion the cause. This will also help leverage some of the media costs. The expected launch date for the site will be during the Great American Smoke-Out (GASO) on Nov. 20<sup>th</sup>.

**Babak Nayeri made a motion for ADHS BTEP to collaborate with the Phoenix Area Indian Health Services (IHS) on promotion of the chronic disease web resources, in reference to the holistic approach (nutrition, exercise and cessation resources).**

**Seconded by Violet Mitchell-Enos. Motion Passed.**

### **2009 National Conference on Tobacco or Health Update**

BTEP continues to work with representatives from DANYA and the CDC with regard to the 2009 National Conference on Tobacco or Health. Sponsorships have not been nailed down as of yet. A committee consisting of Lynn Angelo, Benton Davis and Tim Riester has been asked to reign in the sponsorships. Conference funds will come from the registration and other sponsorships.

### **Program Updates**

Todd Pearce provided the program update for the ASHLine. Mr. Pearce stated that there is a need to fully fund the quitline to be up to capacity for the expected increase in phone calls. Calls are up 30%, referrals are up 20% and total enrollment is up 10%. 15% of calls are answered by a live person and this is all before any type of campaign kick-off. Ms. Bailey asked a question regarding the ASHLine medication. Mr. Pearce responded that there will be a two week NRT, no medication at this time.

Mr. Pearce provided the Community Network Development update. Thus far it has gone extremely well. A lot of silos existed and have since been broken down through the process. St. Lukes Imitative provided and funded consultants to help the process. The consultants will train staff who will then train their respective partners. The asset mapping is allowing for the

formation and building-up of links and partnerships with out partners and those in their communities.

Discussion occurred around the network development and what are the expected outcomes. As of now, each community is different. Each outcome will differ, each timeline will differ. Phase 1 dictates phase 2 and eventually phase 3. Ms. Shetty added that evaluation-wise, they are looking at the landscape of the community by starting small and getting bigger. Mr. Tormala stated that the Community Network Development piece was the centerpiece of what we expect the counties to focus on as we move forward.

Gowri Shetty provided the Tobacco Evaluation Research Network (TERN) update. Currently BTEP is in the process of putting together an evaluation group with people from across the state and outside the state both virtually and in person. It will be a shape and approach method. The goal is to collect pilot data and perhaps write grants that bridge academic, research and practice elements.

Ms. Shetty provided an update on the NRT Pilot program. During March, April and into May. 2,100 calls were received and there was a 53% response to all 2,100 follow-up calls. They hope to get quit rates for the 3 month shortly check-ups shortly with 6 month and 1 year quit rates to follow. This information will also include the product they chose as well. In response to a question from Mr. Madonna, staff confirmed that clients were able to choose their preferred products, and that 80% used NRT, with 70% choosing medication (mostly Chantix).

Ms. Shetty continued her report on NRT with a focus on the AHCCCS NRT Program. This is a partnership that begins on October 1<sup>st</sup> with AHCCCS clients qualifying for free NRT. There is an anticipation of a surge in the quitline. AHCCCS clients will only have access to what their benefit allows. While they cannot be required to call the quitline, they will be strongly encouraged to.

Ms. Bailey asked whether referrals go through AHCCSS or the quitline. Ms. Shetty explained that AHCCCS member would go through that system when they call the quitline. The approximate prevalence rate for AHCCCS smokers is 37%. Mr. Tormala explained that scenarios could emerge that could have a major impact. Mr. Madonna asked if there is a coverage screen of health costs. Ms. Shetty replied that the cost is skewed. People they have seen have tried previous methods and they are not just giving it away. All potential users will be screened.

### **Future Development of the TRUST Commission Update**

Mr. Pfeifer entertained the notion of putting off discussion of the development of the TRUST Commission until the next meeting. Mr. Pfeifer is in favor of having a board with smaller committees comprised of members not non-members with expert knowledge. The driving force behind the change is that the Commission currently does not exist due to technicalities in its formation. It was set-up via the President of the Senate and Speaker of the House as opposed to the entire legislature. If one or both heads of the legislature are no longer in their position, the commission ceases to exist. This was not the understanding of Matt Madonna upon his formation of the group which also allowed for the commission to devise their own bylaws. It should be

noted that ADHS BTEP has still operated in conjunction with the TRUST Commission as though it still existed. This commitment from staff shows a true desire to work with the Commission and how much they value their input.

### **Future Policy Items**

Mr. Pfeifer explained the future policy items section. This will be a time when future policy items are to be discussed with the possibility of action being taken. The idea of smoking in multi-housing units and smoking in vehicles when children are present are two examples of ideas that could and will likely be discussed.

Commission members felt it necessary that some of the tax funds should go towards cessation and not just prevention. It is a health inequity that forces smokers to pay for prevention services only. They should be entitled to some resources put back towards them to pay for cessation.

Discussion occurred around the approximate \$.18 tax differential tribes had compared to the rest of the State. This tax was not traceable and was supposed to mirror the state, but be \$.18 less. Perhaps looking into this situation is something that either the American Lung Association, American Heart Association, American Cancer Society or even the Coalition for a Tobacco-Free Arizona could look into due to limitations posed by ADHS and the TRUST that would prevent them from asking the necessary questions.

### **Public Commentary**

There was one (1) public comment from Louise Strayer. Ms. Strayer reiterated the importance of colorectal screenings and reminded the public that November 20<sup>th</sup> is the Great American Smoke-Out (GASO).

### **Adjourn**

**The meeting was adjourned at 1:37 pm.**

The TRUST Commission is a public meeting. In compliance with the State of Arizona's open meetings laws, the recorded minutes for the September 2008 TRUST Commission meeting are available to the public three working days after the meeting. Please contact the TRUST Coordinator at the Bureau of Tobacco Education and Prevention Program, 602-364-0824, to make arrangements to obtain the minutes.