VERMONT TOBACCO EVALUATION AND REVIEW BOARD MEETING

Wednesday,
February 1, 2017
3:00 p.m. – 5:00 p.m.

Agency of Human Services
Sally Fox Conference Center, Ash Conference Room
280 State Drive, Waterbury Vermont

DRAFT MINUTES

Start time: 3:08pm
Board Attendance: Amy Brewer, Alexandra Potter, Rebecca Thompson, Megan Sault, Greg MacDonald, Rhonda Williams, Kate Larose, Helen Wagner, Bob Uerz, Barbara Cimaglio, Alex Crimmin, Rep. George Till (phone)

Community participants: Gary Kessler, Rebecca Ryan, Tina Zuk (phone) and Jill Sudhoff-Guerin (phone)

Approval of Board Minutes
January 4, 2017
Helen requests two edits to the minutes: Clarify the last full sentence on page 1 to read “how much less they are paying in reimbursements” and on page 2 under “Approve Annual Report” remove the second “Rebecca”.
Alexandra motions to accept the minutes. Rebecca seconds. Eleven in favor, none opposed, Helen and Barbara abstain.

Public Comment
None

Announcements
Amy Brewer welcomes Representative George Till, the new appointee to the Board from the House of Representatives appointed by the Speaker of the House. Amy announces Senator Ginny Lyons from Chittenden County will be the Board’s new appointee from the Senate.

Amy Brewer is on vacation for VTERB March 1 meeting. Alexi offers to facilitate the meeting. Erin will follow-up with the Board to make sure we will have a quorum.

Community Grant RFP: Rhonda- Yesterday was the open bidders call. All questions will be posted for all applicants to view on VDH website. Proposals are due March 3rd. 8 people will be on the review committee, 3 from VDH and 5 from VTERB. 20-25 proposals expected, 3 reviewers per proposal, 4 proposals for each reviewer. Reviewer training is scheduled for March 9th in person and webinar format. Reviewers will meet to make selections on March 27th. Not using Survey Monkey this year. Board members should let Rhonda know by next Wednesday (one week) if they can participate.

Helen – A new FDA rule was issued; the rules speaks to marketing e-cigarettes for cessation purposes. If a product is advertised for cessation purposes, it will need to apply to be regulated as a cessation product. The rule will be in effect February 8th. With this rule the FDA will now have
authority over all tobacco products. Now entities that manufacture e-liquids must register with FDA and need to comply with federal laws for tobacco manufacturers. Entities who are mixing e-liquids in the backroom will need to come into compliance and it is estimated 70-80% will be unable to comply.

Rhonda – US Surgeon General’s report on youth and young adults came out with a call to action at the end on e-cig use with health advisory on e-cigs for parents, teachers and youth. Erin Singer from VDH put together a memo comparing State and National tobacco rates. Erin H will email it to the Board and invite Erin Singer to present data to Board.

Alexi asks for an update on the new media buy? Curious on early data? No early data yet but Rhonda will send it to Erin to distribute to the Board when available.

OVX rally at the State House on Friday 10:30-1pm concerning flavor tobacco products.

Legislative Updates (15 min)
Representative Till – Rep. Till introduced a bill to raise the age of tobacco purchasing to 21, H.52, is in Human Services committee. In the Senate, Senators Clarkson and Lyons introduced S. 88 a similar Tobacco 21 bill. Last year Tobacco 21 was late to pass in House and not taken up in the Senate. Hoping it moves sooner as it has more support in the Senate this session and a new Governor may provide a better chance of passage. Bill H. 178 will increase Tobacco tax by $1.25. Another bill, H. 179 will tax e-cig like other tobacco products. Finally, a bill that prohibits smoking in multi-unit housing, H. 127, was introduced by Rep. Stevens of Waterbury.

Gary Kessler – Explains limitations to making DLC changes due to the no new fees and no new taxes stipulations set by the Governor. Some things can change within the current statute which only prescribes minimum of a 6 month period for record retention which could be raised to 18 or 24 months. Gary exploring which items can be changed by the DLC within the current statute.

Governor’s Budget (20 min)
Governor’s budget address was on Tuesday. Most of our program is level funded but there is a decrease in AHS funding for Erin’s job and evaluation. The Governor’s budget proposal is $25k to pay for the board to exist. (compared to this year’s $67,500)
Barbara Cimaglio and other agency employees can’t take a position other than what the governor budget says.
The mission of this board is compromised with this budget cut. We are not able to have independent evaluation. The Board is accountable to the most vulnerable Vermonters and children and should be a priority. The board will not be able to complete essential tasks with this budget cut. We will fight to have funding maintained.

Other states oversee the TCP differently than we do. Board will explore and share different models.

VTERB Evaluation (40 min)
VTERB has a small amount of money for evaluation. We are looking at exact budget numbers but it is somewhere between $20-25k.

We are interested in pursuing a small study on Return on Investment or health care cost savings for VT’s Tobacco Prevention and Control Program. We wanted this information for the Annual Report and it doesn’t exist for Vermont. VDH tried to do ROI for Medicaid but couldn’t get healthcare data just for Medicaid. VTERB could do all health care costs or a specific area like COPD ICU admissions or cardiovascular disease. We could look at research already happening in health care at the State level through Blue Print or at UVM and build on it. The product would be a fact sheet rather than a larger report. Easy to digest and simple considering our timeframe. Erin will talk to her supervisor to see how we can move the money and if we need a competitive RFP.
Other Business/Information

(20 min)

Rebecca Ryan- In the Governor’s budget VDH’s Tobacco funding is moving from MSA to funding with a greater amount being paid by the Global Commitment. Federal budget is unpredictable and Global Commitment doesn’t feel sustainable. MSA is not a steady funding source as it is dependent on sales volume, but it still could sustain our entire program and might be less risky than something tied to Federal Medicaid dollars.

Meeting end: 4:55pm.