

**Minutes of the
Tobacco Education and Research Oversight Committee (TEROC)
Wednesday, January 28, 2015**

Residence Inn Sacramento-Marriott
Downtown at Capitol Park
Capitol Room
1121 15th Street
Sacramento, CA 95814

Alternate Location:
University of Southern California
Soto Building- Room: 302 M
2001 N. Soto Street
Los Angeles, CA 90032

Alternate Location:
1400 Arcadia Place
Palo Alto, CA 94303

MEMBERS PRESENT:

Ms. Denise Adams-Simms, Ms. Vicki Bauman, Dr. Wendel Brunner, Ms. Pat S. Etem, Dr. Pamela Ling, Dr. Michael Ong (Chair), Mr. Myron Dean Quon, Dr. Wendy Max (attending from the Palo Alto location)

MEMBERS ABSENT:

Dr. Lourdes Baézconde-Garbanati, Dr. Alan Henderson (Vice Chair)

OTHERS IN ATTENDANCE:

Dr. Bart Aoki, Tobacco-Related Disease Research Program (TRDRP)/ University of California, Office of the President (UCOP)
John Bacigalupi, California Department of Finance (DOF)
Lindsey Freitas, American Lung Association (ALA)
Tim Gibbs, American Cancer Society (ACS)/Cancer Action Network (CAN)
Margarita Garcia, California Department of Education (CDE)/Coordinated School Health and Safety Office (CSHSO)
Tonia Hagaman, California Tobacco Control Program (CTCP)
Rich Heintz, Project Director's Association (PDA)
Tom Herman, CDE/CSHSO
Dr. Jonathan Isler, CTCP
Jerry Katsumata, CTCP
Kevin Keyes, CDE/CSHSO
Richard Kwong, CTCP
John Lagomarsino, CDE/CSHSO
Jamey Matalka, DOF

Carol McGruder, African American Tobacco Leadership Council (AATCLC)
Francisco Michel, CTCP
Yuliana Moreno, CDE/CSHSO
Samantha Pellon, ALA
Sarah Planche, CDE/CSHSO
Heather Pollock, CDE/CSHSO
Dr. Tracy Richmond-McKnight, TRDRP
Nadine Roh, CTCP
Alexandria Simpson, CTCP
Dr. Elisa Tong, Medical Incentives to Quit Program (MIQs)
Cynthia Vela, MIQs
Dr. Xueying Zhang, CTCP
Rosa Barahona, University of Southern California (USC)

1. WELCOME, INTRODUCTION, AND OPENING COMMENTS

The TEROC Chair, Dr. Ong, called the meeting to order at 9:45 a.m. TEROC members and guests introduced themselves.

2. APPROVAL OF MINUTES, CORRESPONDENCE, AND ANNOUNCEMENTS

Approval of the December 18, 2014 meeting minutes with amendments moved by Pat Etem, seconded by Denise Adams Sims; motion passed unanimously.

The chair reviewed TEROC-related correspondence:

Incoming Correspondence:

- E-mail from Carolyn and Robert Karis to Chair of TEROC, Dr. Michael Ong, seeking support for an appeal to the San Francisco Board of Supervisors to prevent a vape shop, “Steam Stone Hookah Lounge,” from opening at 1963 Ocean Avenue, only blocks from Aptos Middle School.

Dr. Ling attended the meeting and spoke to the Board of Supervisors. The Board voted to allow the vape shop to open. Dr. Ling suggested the TEROC E-Cigarette Subcommittee update TEROC’s E-cigarette talking points.

- Senate Rules Committee TEROC appointment letter to Dr. Wendy Max.

Outgoing Correspondence:

- TEROC letter in response to the California Board of Equalization’s (BOE) solicitation for alternatives for future funding of the Cigarette and Tobacco Products Licensing Program.

- TEROC letter to Governor Edmond G. Brown Jr. expressing concern and providing recommendations regarding the Cigarette and Tobacco Products Surtax Fund in the 2015-2016 Governor's Budget.
- TEROC letter to the Honorable Tony Thurmond, Chair of the Assembly Committee on Budget – Subcommittee 1 Health and Human Services, expressing concern and providing recommendations regarding the Cigarette and Tobacco Products Surtax Fund in the 2015-2016 Governor's Budget.
- TEROC letter to the Honorable Holly J. Mitchell, Chair of the Senate Budget and Fiscal Review Committee – Subcommittee 3 on Health and Human Services, expressing concern and providing recommendations regarding the Cigarette and Tobacco Products Surtax Fund in the 2015-2016 Governor's Budget.
- TEROC letter to Matt Paulin of the California Department of Finance (DOF) expressing concern and providing recommendations regarding the Cigarette and Tobacco Products Surtax Fund in the 2015-2016 Governor's Budget.
- TEROC certificate of appreciation awarded to Dr. Jonathan Isler, former Chief of the Evaluation and Knowledge Management Section at the California Tobacco Control Program (CTCP).

Dr. Ong thanked Dr. Isler for his service and presented him with the certificate of appreciation. Mr. Isler graciously accepted the certificate and thanked TEROC.

- TEROC certificate of appreciation awarded to Dr. Ronald Chapman, Director and State Health Officer, California Department of Public Health (CDPH).
- TEROC certificate of appreciation awarded to Dr. Wendel Brunner for his service to TEROC, as a TEROC member. Dr. Brunner announced his retirement from TEROC as well as from his position as Health Officer of Contra Costa County.

Dr. Ong thanked Dr. Brunner for his service to public health. Dr. Brunner thanked TEROC and discussed the importance of the work TEROC does, particularly on the local level.

Action Item

The TEROC E-Cigarette Subcommittee will update the e-cigarette talking points with the latest data available.

3. **ENVIRONMENTAL UPDATE**

TEROC discussed tobacco control issues in the media, including the following news articles and reports:

- **Respected national survey shows teen use of e-cigarettes surpasses use of regular cigarettes**
http://www.monitoringthefuture.org//pressreleases/14cigpr_complete.pdf

- **American Lung Association Releases State of Tobacco Control 2015**
<http://www.stateoftobaccocontrol.org/state-grades/california/>

In response to discussion regarding California's poor performance relating to the American Lung Association's State of Tobacco Control 2015 report, Ms. Etem asked Ms. Freitas what TEROC could do to help improve California's grade in access to cessation services. Ms. Pellon informed TEROC that California's grade had increased from a "F" to a "D" grade due to the Quitline data. An area of improvement would be cessation benefits relating to Medi-Cal and State Employee plans.

- **A better way to help people quit smoking?**
<http://www.thelancet.com/journals/lanres/article/PIIS2213-2600%2814%2970294-2/abstract>
<http://www.med.upenn.edu/cirna/>
<http://www.washingtonpost.com/news/to-your-health/wp/2015/01/13/a-better-way-to-help-people-quit-smoking/>
- **Using both phone support and websites help smokers kick the habit**
http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6351a1.htm?s_cid=mm6351a1_w
<http://blogs.kqed.org/stateofhealth/2015/01/01/using-both-phone-support-and-websites-help-smokers-kick-the-habit/>
- **E-cigarette boom among kids more than Feds' fault**
<http://www.sacbee.com/opinion/editorials/article4654587.html>
- **Supervisors reject appeal against e-cigarette business as part of packed agenda**
<http://www.sfexaminer.com/sanfrancisco/supervisors-reject-appeal-against-e-cigarette-business-as-part-of-packed-agenda/Content?oid=2916727>
- **Toddler's death revives push for e-cigarette regulation**
<http://thehill.com/regulation/229398-ny-toddlers-death-revives-push-for-e-cigarette-regulation>

- **No smoke, but haze around e-joint**
http://www.nytimes.com/2015/01/13/health/with-the-e-joint-the-smoke-clears-.html?ref=health&_r=0

4. **DEPARTMENT OF FINANCE REPORT**

John Bacigalupi and Jamey Matalka of the California Department of Finance (DOF) provided a Proposition 99 Budget update in regards to the 2015-2016 Governor's Budget.

Mr. Bacigalupi began the DOF presentation by providing an overview of discussion items, including:

- Discussion of 2013-14 Actual Revenues and Program Expenditures
- Comparison of 2014 Budget Act to the 2015-16 Governor's Budget: 2014-15 Projected Revenues and Program Expenditures
- Comparison of 2014 Budget Act to the 2015-16 Governor's Budget: 2015-16 Projected Revenues and Program Expenditures

2013-14 Actual Revenues and Program Expenditures:

Revenues

- Actual revenue transferred increased by \$22 million compared to 2014 Budget Act:
 - 2013-14 @ 2014 Budget Act: \$246 Million
 - 2013-14 @ 2015-16 Governor's Budget: \$268 Million

Expenditures

- Actual program expenditures decreased by \$23 million compared to 2014 Budget Act:
 - 2013-14 @ 2014 Budget Act: \$276 Million
 - 2013-14 @ 2015-16 Governor's Budget: \$253 Million

Result:

- Ending account balances in 2013-14 (beginning balances in 2014-15) increased by a total of \$41.5 million:
 - Estimated balances totaled \$43.4 million at 2014 Budget Act
 - Actuals balances totaled \$84.9 million at 2015-16 Governor's Budget

2014-15 Projected Revenues and Program Expenditures:

Revenues

- Estimated revenue increased by \$7 million:
 - 2014-15 Estimate at 2014 Budget Act: \$237 Million
 - 2014-15 @ 2015-16 Governor's Budget Estimate: \$244 Million
- Proposition 10 Backfill Revision increased by \$0.8 million:
 - Estimate at 2014 Budget Act: \$10.6 Million
 - 2014-15 @ 2015-16 Governor's Budget Estimate: \$11.4 Million

Expenditures

- Minor changes to current year for various state operations costs, such as adjustments for Employee Compensation and Retirement.
- Offsetting reallocations of expenditures between Department of Public Health programs within Health Education and Research Accounts.

2015-16 Projected Revenues and Program Expenditures:

Revenues

- Estimated \$7 million year-over-year decrease in revenues:
 - 2014-15 Revised Estimate: \$244 Million
 - 2015-16 Estimate: \$237 Million
- Proposition 10 Backfill Revision at \$11.4 million (equals 2014-15 amount)

Expenditures

- Flow-through from projected 2014-15 ending fund balances resulted in additional revenue to be allocated to various programs in the Health Education, Physicians' Services, Research, and Unallocated Accounts.
- Despite flow-through of projected 2014-15 ending fund balances, beginning fund balances combined with decreased year-over-year revenues did not support expenditures at 2014-15 levels in the Hospital Services and Public Resources Accounts.
- Increases from 2014-15 Budget Act by Account:
 - Health Education Account: \$11.7 million
 - Physicians' Services Account: \$0.7 million
 - Research Account: \$2.3 million
 - Unallocated Account: \$0.6 million
- Decreases from 2014-15 Budget Act by Account:
 - Hospital Services Account: \$9.9 million
 - Public Resources Account: \$0.4 million
- Total increase of \$9.2 million over 2014-15 Budget Act in Department of Public Health projected expenditures relating to tobacco use prevention:
 - Health Education Account increased by \$8.6 million
 - Research Account increased by \$0.6 million
 - Unallocated Account increased by \$0.1 million

Notes on 2015-16 Projected Revenues and Program Expenditures

- Revenue projections for both current year and budget year will be updated at 2015 May Revision. A decrease in projected revenues at that time may require reversing the increases in expenditures proposed for 2015-16.
 - Similar to updates from Governor's Budget that occurred last year with the 2014 May Revision as well as 2009 May Revision
- Projected increase in Hospital Services expenditures for 2015-16 is the result of the reallocation of resources from the Access for Infants and Mothers (Medi-Cal Access) and Major Risk Medical Insurance Programs.

- Access for Infants and Mothers caseload has declined primarily due to more mothers qualifying for full-scope Medi-Cal
- Major Risk Medical Insurance Program funded in 2015-16 by existing resources within Major Risk Medical Insurance Fund and does not require allocation of Proposition 99 revenue

Dr. Ong had a question regarding the Research Account (0234) in fiscal year ending June 30, 2014. The University of California line-item was listed as only expending \$1.897 million. Dr. Ong questioned whether or not that was an error. Mr. Bacigalupi and Mr. Matalaka explained that the number is carry-forward of resources to utilize until 2016 and is reflected due to a methodology change in how carry-forward is shown on the Prop 99 charts.

Dr. Aoki noted that the actual expenditures in 2013/2014 (\$9-10 million) are much more than was reflected on the charts.

Mr. Matalaka and Dr. Aoki decided to meet at a later time to discuss and reconcile the numbers reflected in the budget.

Ms. Etem and Mr. Matalaka discussed the process behind the distribution of money. The DOF works with different departments on distribution of funds reflected in the Proposition 99 charts.

Dr. Ong asked Mr. Bacigalupi about the line item for the California Health Interview Survey which is no longer receiving an allocation from the Unallocated Account (0236). Dr. Ong asked to learn the process for eliminating this line item. Mr. Bacigalupi will follow-up on this.

The Chair thanked Mr. Bacigalupi and Mr. Matalaka for the presentation.

5. VOLUNTARY HEALTH AGENCY UPDATE

Lindsey Freitas from the American Lung Association (ALA) and Tim Gibbs of the American Cancer Society (ACS) presented on behalf of the voluntary health agencies.

Mr. Gibbs began the conversation by discussing Senate Bill (SB) 140 (Leno), which addresses growing public health concerns about the unregulated use of electronic cigarettes (e-cigarettes) in California by adding e-cigarettes to the Smoke Free Act and the Stop Tobacco Access to Kids Enforcement (STAKE) Act. The bill is receiving a tremendous amount of publicity. Mr. Gibbs requested a letter of support from TEROC.

Mr. Gibbs also discussed SB 24 (Hill), which would add e-cigarettes to the STAKE Act and require that retailers selling electronic cigarettes apply for a license from the Board of Equalization. The bill would also require e-cigarettes cartridges to be in child-proof packaging. The bill does not define

e-cigarettes as a tobacco product. The voluntary health organizations are opposing SB 24 unless amended. Mr. Gibbs requested a letter of opposition, unless amended, from TEROC.

Ms. Freitas continued by discussing the tremendous amount of interest in tobacco at the Capitol currently.

Senator Hernandez is rumored to be introducing a bill which would raise the legal minimum age to purchase tobacco products from 18 to 21 years of age. The bill would raise the age of the youth tobacco access provisions in the Stop Tobacco Access to Kids Enforcement (STAKE) Act, enforced by the California Department of Public Health (CDPH), Food and Drug Branch (FDB), from 18 to 21 years of age. Mr. Gibbs and Ms. Freitas requested a letter of support from TEROC.

Ms. Freitas also discussed a potential bill that would amend the Welfare and Institutions Code to require Medi-Cal to include tobacco cessation services as a covered benefit. It would require unlimited quit attempts, as defined, with no required break between attempts, for enrollees of any age who use tobacco products. The bill would define a quit attempt to consist of (1) at least four counseling sessions (telephone or in-person; individual or group) and (2) 90-day treatment regimen of any medication approved by the federal Food and Drug Administration (FDA) including prescription and over-the-counter medications. Mr. Gibbs and Ms. Freitas requested a letter of support from TEROC. Ms. Adams-Simms expressed support for this bill and provided that TEROC should write a letter in support of.

Ms. Freitas clarified that the deadline to introduce bills is at the end of February.

TEROC discussed writing the requested letters. Ms. Etem requested to read more about the intent of the bills prior to committing to support or amend.

Ms. Freitas discussed the Save Lives California Coalition, which members include the California Medical Association (CMA), ACS, ALA, AHA, and Service Employees International Union (SEIU). The coalition has joined forces to generate support for increasing the California tobacco tax by \$2-per-pack by the end of 2016 in order to save lives and lower the cost of providing medical care to smokers. Plans include movement for either a legislative or ballot initiative.

Action Items

Dr. Ling moved that TEROC write a letter in support of SB 140 and another letter opposing SB 24 unless amended to define e-cigarettes as tobacco

products. Ms. Bauman seconded the motion. Motion passed with an abstention from Ms. Etem.

Conditional, upon whether the bills are introduced, Ms. Simms moved that TEROC write letters in support of both the “Medi-Cal Cessation” and “Tobacco 21” bills. Ms. Bauman seconded the motion. Motion passed with an abstention from Mr. Quon.

Ms. Etem asked to please reopen the vote on the “Medi-Cal Cessation” and “Tobacco 21” bills. Ms. Etem’s understanding of “conditional” was that TEROC members would be able to weigh-in on the legislation once it has been officially introduced. However, due to Bagley-Keene requirements, TEROC members would not be able to provide this feedback independent of an official meeting. The meaning of “conditional” was that the letter would be “conditional” based on whether or not the bills were actually introduced.

Dr. Ling suggested voting on TEROC writing a letter of support for a concept, rather than a specific bill, so even if the concept of a bill changed, TEROC’s purpose would remain intact. However, Mr. Gibbs noted that the letter would not be included in the analysis if the bill number was not referenced.

Ms. Bauman noted that she didn’t want TEROC to miss an opportunity to support legislation that could be beneficial to public health.

Ms. Etem moved to reopen the vote allowing TEROC to write letters in support of both the “Medi-Cal Cessation” and “Tobacco 21” bills. Mr. Quon seconded the motion. Motion passed with one opposing vote from Ms. Bauman and two abstentions from Dr. Ong and Dr. Max.

The vote officially reopened.

Dr. Brunner asked to please separate the “Medi-Cal Cessation” and “Tobacco 21” letters because he is in favor of the “Medi-Cal Cessation” bill and not the “Tobacco 21” bill because of several reasons including the potential of increasing tobacco attractiveness to youth.

Ms. Adams Simms moved that TEROC separate the “Medi-Cal Cessation” support letter from the “Tobacco 21” support letter. Included in the motion, Ms. Simms moved that TEROC support the “Medi-Cal Cessation” bill, if it comes to fruition. Ms. Bauman seconded the motion. Motion passed with an abstention from Ms. Etem.

Dr. Ong moved that TEROC write a letter supporting the bill, if introduced, raising the legal minimum age to purchase tobacco products from 18 to 21 years of age. Ms. Bauman seconded the motion; motion passed with an opposing vote from Dr. Brunner and an abstention from Ms. Etem.

The Chair thanked Ms. Freitas and Mr. Gibbs for the update.

6. MEDI-CAL INCENTIVES TO QUIT PROJECT

Dr. Elisa Tong, Associate Professor of Internal Medicine, UC Davis presented on behalf of the Medi-Cal Incentives to Quit Project (MIQs). Dr. Tong serves as the principal investigator for the project.

The MIQs Program was funded between 2011 through 2016 by Centers for Medicare and Medicaid (CMS). Ten states were awarded funding through the Affordable Care Act (ACA); priority areas included: Tobacco, Obesity, and Diabetes.

Dr. Tong explained that economic incentives work 73 percent of the time on changing consumers' preventive behavior and the overall goal was to increase Medi-Cal calls to the California Smokers' Helpline to 75,000 (50 percent increase) with 25,000 earning incentives over four years.

The program went statewide in July of 2012; requiring 1-800-NOBUTTS callers to ask for the \$20 gift card incentive for the Sacramento County pilot. In September of 2013, nicotine patches were added as an additional incentive. This incentive did not require callers to "ask." In December of 2014, another incentive was added by not requiring callers to ask for the \$20 gift card and an additional \$10 per call for four follow-up calls.

Dr. Tong continued by providing an overview of the outreach that was performed including Medi-Cal, statewide organizations and organizations at the county level. In addition, outreach was performed to priority populations such as; Latino, African American, Asian American, Native American, Pacific Islander, and Lesbian, Gay, Bisexual and Transgender (LGBT) communities.

Dr. Tong presented MIQs information and resources for clinicians including YouTube videos on "Ask, Advise, Refer" and how to refer online. Buttons, badges, newsletters, postcards, and posters were also utilized to distribute the promotion.

Dr. Tong presented the mailing and targeting information:

September 2013

- 30,000 to physicians (DHCS/OSP)

June-November 2013

- 750,000 MIQS resources to California Primary Care Association safety net clinics, statewide (CTCP/ Tobacco Education Clearinghouse of California (TECC)/Education and Training Resources (ETR)

March-June 2014

- 190,000 with updated free nicotine patch offer

June-December 2014

- 125,000 mailed
 - JvR mailings (June-Sept, Dec)
- January 2015
- Eligibility Division

Dr. Tong discussed 2014 MIQS major mailings with partners:

June 2014- California Comprehensive Cancer Control Program

- 75 Indian Health Program Clinics/12 NCI Cancer Centers
 - (37,500 MIQS Native American postcards)

July 2014 – Molina Healthcare Plan

- 20,000 to Molina Healthcare Plan, including by language

September 2014: California Rural Indian Health Board (CRIHB)

- 200 CRIHB Social Service and Behavioral Health Clinics
 - (40,000 MIQS Native American postcards)

December 2014: State Office of Rural Health

- 1250 Rural Health Clinics & 50 Small Hospitals
 - (62,500 MIQS Multi-Cultural English/Spanish Postcards)

December 2014: CDPH Immunization

- 234 School-Based Health Centers

Dr. Tong continued by discussing the interim results of MIQS.

MIQS Enrollment and Call Totals March 2012 – December 2014:

- Members Enrolled in MIQS Project
 - Goal = 25,000 thru 2015
 - Total Enrolled to Date: 35,769
- Medi-Cal Calls to Helpline
 - Goal = 75,000 – 100,000
 - Total Calls to Date: 72,961
- Nicotine Patches Mailed:
 - 31,581 (since September 2013)
- \$20 Gift Cards Mailed:
 - 8,264 (since March 2012)

Dr. Tong discussed: 1) the increasing Medi-Cal calls among all helpline calls; 2) 12.5 percent of Medi-Cal callers asked for \$20 incentive; 3) 58.5 percent of Medi-Cal callers received the nicotine patch incentive.

MIQS Caller Data Trends:

- Women (60 percent)
- 45-64 years old (55 percent)
- 25-44 years old (33 percent)
- English-speaking (95 percent)
- African American
 - (30 percent ask for the \$20 incentive vs. 19 percent that do not ask for it)
- Chronic disease (50 percent)

- LGBT (6 percent)

Discussion continued regarding sources of increases in calls based on various promotions, including mailings from Kaiser North and Molina Health. The return on investment for the Molina promotion was approximately \$3 per unit invested.

Dr. Tong concluded the presentation by providing take-home points for TEROC:

- MIQS project outreach successfully reached and exceeded goal to increase Medi-Cal calls to the Helpline
- Broad outreach strategy with multi-level targets and includes priority populations
- Direct mailings to members are effective
 - Sustainable with Medi-Cal managed care plans

Dr. Ling asked if the \$20 incentive will be offered. Dr. Tong answered that the incentive was initially not offered, but had to be “asked” for by the caller. Six months into the program, the program was changed so that an “ask” was no longer needed.

Dr. Ling asked whether or not the promotional codes printed on the promotional materials are population specific. Dr. Tong answered that the promotional codes indicate which fliers were received by different geographical areas. This was a “lesson learned” for the MIQS project. If the program continues in the future, they will utilize promotional codes to track additional information.

Dr. Ling asked if they tracked where the gift cards were spent. The group did not track this information.

The Chair thanked Dr. Tong for her presentation.

7. CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, CALIFORNIA TOBACCO CONTROL PROGRAM REPORT

Richard Kwong presented the CTCP update.

Mr. Kwong began the presentation by announcing the impending release of the State Health Officer’s Report on E-Cigarettes and Health Advisory on E-Cigarettes and thanked TEROC for their support. A telephone press briefing led by the State Health Officer, Dr. Ronald Chapman, accompanied by April Roeseler, is to be held at 1:30 p.m. to educate the public on E-cigarettes.

Ms. Etem asked if TEROC members would be able to hear the press conference afterwards. Mr. Kwong answered that the press event was

intended for press only and that the public would become privy of the information through news outlets.

CDPH launched an Open Data Portal to share health information with the public in August, 2014 and CTCP has subsequently shared multiple data sets for publication. The annual average illegal sales rate of tobacco to youth, collected via the California Youth Tobacco Purchase Survey (YTPS) annually from 1997-2014, was added to the Open Data Portal in early January, 2015.

The contract with the California State University – Sacramento (CSUS) to conduct the YTPS was approved. The three-year contract will run through the end of 2017. CSUS will oversee the survey logistics, training of research assistants and youth, and data management. This annual survey of illegal sales of cigarettes to minors is conducted to determine the rate of illegal tobacco sales across California and to comply with the Stop Tobacco Access to Kids Enforcement (STAKE) Act.

Dr. Max asked if the YTPS included questions regarding e-cigarettes. Mr. Kwong informed TEROC that this survey includes cigarettes only. CTCP is currently developing a youth purchase survey protocol for e-cigarettes.

A few key television spots were adapted and translated into additional languages to optimize local use of the advertisements and stretch media resources. The main communication goals are to: maintain awareness of the negative effects of tobacco; generate calls to the Helpline; and encourage quit attempts. These television spots will be made available on Partners, so local projects can use them freely.

CTCP shared its television, print, radio, and digital advertisements from the last two years with the Centers for Disease Control and Prevention's (CDC) Media Clearinghouse Resource Center (MCRC). For over 15 years, the CDC MCRC has housed and provided access to advertisements developed by more than 25 state health departments, nonprofit health organizations, and federal agencies. The CDC licenses the advertisements so other tobacco control entities can order and use them. California's advertisements are some of the most 'in demand' spots requested by other states.

CTCP's "Tie" & "Addictions" Spanish language print ads won an Association of National Advertisers (ANA) 2014 Multicultural Excellence Award. These print advertisements were created by CTCP's Spanish language subcontractor, Acento. This is a prestigious award from the advertising industry, and the ANA awards given in a variety of categories help to celebrate the past year's preeminent multicultural advertising from across the nation.

On January 26, 2015, the California Youth Advocacy Network (CYAN) presented a webinar entitled *Unregulated Exuberance in E-Cigarette Advertising*. This webinar focused on the aggressive and unregulated marketing of e-cigarette products, and featured speakers Dr. Robert Jackler and Divya Ramamurthi from the Stanford University. Dr. Jackler and Ms. Ramamurthi highlighted their research on how e-cigarette manufacturers are using various media to promote e-cigarettes and related products to youth and young adult populations.

Mr. Kwong discussed the CDC Quitline Capacity project. Now in Year 3, this CDC funding allows the California Smokers' Helpline to: (1) provide services during expanded hours and in six languages, and (2) operate the Asian Smokers' Quitline. The Asian Smokers' Quitline is available to callers nationwide. Since the largest population of Asian in-language smokers in the nation reside in California, the majority of calls to the Asian Smokers' Quitline originate from California. During Year 2 of the Quitline Capacity project, the California Smokers' Helpline provided intake for an additional 8,837 callers. At the end of the two-year period, the Asian Smokers' Quitline had completed intake for 5,743 Asian language speakers from all states, including the largest call rate at 47.6 percent from California.

Mr. Kwong thanked TEROC for their letter of support for CTCP's 2015-2020 grant application to CDC for the National State-Based Tobacco Control Programs. Currently under review by the CDC, CTCP's grant application was submitted to CDC on December 1, 2014. This grant is a reconfiguration of CDC's previous Collaborative Chronic Disease, Health Promotion and Surveillance cooperative agreement. The core work plan focuses on: tobacco tax, retail environment, extended producer responsibility, electronic cigarettes, clean indoor air, smoke-free multi-unit housing, cessation, and health equity. A competitive component of the application work plan proposes a two-year project to develop and pilot test health retailer certification criteria. CDC intends to issue the notice of award by March 30, 2015.

Ms. Adams-Simms asked for additional information regarding the Healthy Retailers Certification. Mr. Kwong noted that the certification ties in with our current Healthy Stores for a Healthy Community (HSHC) Campaign; particularly focusing on the availability of healthy choices at the retail level.

Ms. Etem asked about Extended Producer Responsibility. Mr. Kwong answered that it is the concept that tobacco manufacturers should be responsible for the products for the entire life-cycle of the product. So the burden of cost should be on the producer. Mr. Kwong noted that he would personally be working with Cal-Recycle on this concept.

Cost reports have been submitted by the Local Lead Agencies (LLAs) to document how their funding allocation was spent during the six-month reporting period.

The Phase I Bridge Year, FY 2013-14 of the LLA FY 2013-17 plan ended on June 30, 2014. CTCP is closing-out this one year plan and working with the LLAs to roll-over any allowable unspent monies. These monies are the balances from the LLA plans after the completed deliverables have been verified.

CTCP is working with the LLAs to finalize the revisions that will move allowable unspent monies from the Phase I plan into the Phase II plan. Currently there are nine revisions still outstanding. CTCP anticipates the revision process will be completed before the end of January, 2015 when the progress reports are due.

Mr. Kwong also noted that CTCP has many vacancies and are continuing to recruit to fill the vacancies. Ms. Etem discussed the vacancies and inquired whether they were tied to grant dollars. Mr. Kwong and Ms. Roh provided information regarding the vacancies and advised TEROC that they are watching the dollars closely and working to fill the vacancies.

Ms. McGruder noted that The Loop would be providing a webinar on how to apply for a State job through their Leadership Development program.

The Chair thanked Mr. Kwong for the presentation.

8. CALIFORNIA DEPARTMENT OF EDUCATION REPORT

Tom Herman, John Lagomarsino, and Sarah Planche presented on behalf of the California Department of Education (CDE)/ Coordinated School Health and Safety Office (CSHSO).

Mr. Herman began the presentation by announcing that San Juan Unified School District (SJUSD) was recently honored at the Sacramento County Tobacco Control Coalition's 17th Annual Recognition Meeting. The Coalition recognized SJUSD for outstanding efforts toward tobacco control and public health in 2014, specifically relating to the District's recent update to their current smoke-free policy to include e-cigarettes. Dr. Linda Bessire, (Director, Pupil Personnel Services) in accepting SJUSD's award on behalf of the entire Prevention Programs Team stated, "It's great to see our hard work and efforts being recognized by others in the community."

Staff from the CDE's American Indian Education Center (AIEC) TUPE Program will present at the May meeting. This presentation will provide information regarding the grants provided to the AIECs for the purpose of reducing tobacco use among the youth in this population.

During Red Ribbon week in October the Protecting Health and Slamming Tobacco (PHAST) coalition did a butt litter clean-up. PHAST is a youth coalition that organizes peer education and advocacy projects in school, communities, and throughout Stanislaus County with creative and collaborative style. This public service was picked up by media outlet KCRA. Mr. Herman presented the clip to TEROC. References to toxic waste were made throughout the clip. <http://www.kcra.com/news/students-pick-up-thousands-of-cigarette-butts-from-local-parks/29487992>

Mr. Herman also presented a Facebook video showcasing San Juan High School as the first place winner of the *Anti-Tobacco Public Service Announcement Contest*.
<https://www.facebook.com/video.php?v=728813860538076&set=vb.156102361142565&type=3&theater>

The Coordinated School Health and Safety Office received a total of 13 applications. In reviewing the applicants, it was determined that one applicant was eligible to just extend its current Cohort H grant and was removed from the reading. The remaining 12 applications were read and scored on December 8, 2014. All twelve applicants received the minimum qualifying score and as a result will be funded beginning July 1, 2015. Funding results will be posted on the CDE’s Funding Results Web page in the near future.

In the last reporting period, CSHSO reported that middle school and high school e-cigarette rates have increased. West Ed has been asked by CSHSO to provide this 2013-2014 aggregate statewide data to Professor Stan Glantz. These data are not representative of the state, but only represented the districts who administered the California Healthy Kids Survey (CHKS) in 2013-14, the first year CDE started collecting these data. The representative statewide data will not be out until a year later. The data, however, were collected from 452,236 students in 409 school districts.

CDE was pleased that this information was also included in the State Health Officer’s Report on E-Cigarettes.

Table 1. Self-Reported Lifetime and Current Use of Cigarettes and Electronic Cigarettes by Grade

	7 th Grade	9 th Grade	11 th Grade	Non-Traditional ^A
Lifetime Use (% Responding 1 or More Times)				
Cigarette	2.9	10.4	17.4	42.6
Electronic cigarette/other nicotine delivery device	11.4	23.6	29.3	46.6
Current Use (% Responding 1 or More Days)				
Cigarette	2.0	4.3	6.8	24.8
Electronic cigarette/other nicotine delivery device	6.3	12.4	14.3	26.7
Number of Observations				
Student	144,368	155,355	132,340	20,173

School	846	546	536	279
School district	334	232	233	168

Notes: Results were based on CHKS data collected among 452,236 students attending 1,624 public schools in 409 school districts during the 2013-14 school year.

^ANon-Traditional includes continuation, community day, and other alternative school types.

Mr. Herman attended the Interagency Prevention Advisory Council meeting on January 14, 2015 in Sacramento.

The date and location of the CDE's 2015 Statewide Tobacco Use Prevention Education (TUPE) Advisory Work Group meeting have been determined. The meeting will take place on Tuesday, March 10, 2015 at the Sierra Health Foundation in Sacramento.

The objective of the work group is to examine the current TUPE program and to make recommendations to the CDE to improve the structure and purpose of the program within the current provisions of the Health and Safety Code.

As of January 15, 2015, the CSHSO staff were still seeking to secure attendance from additional members to represent the African-American youth population, voluntary health organizations (American Lung Association, American Heart Association, or American Cancer Society), and an additional county office of education to represent medium population size.

Dr. Ong noted that there were representatives from the voluntary health organizations in the room and that this may be a good opportunity to coordinate. Mr. Lagomarsino spoke with Kimberly Amazeen and she indicated that the voluntary health organizations would attend.

Ms. Etem asked if there were efforts to increase the number of local education agencies (LEAs) with e-cigarette policies. Mr. Lagomarsino noted that a majority of the LEAs will recertify this year and as they go through the process, many will include e-cigarettes in their updated tobacco policies. Ms. Etem asked if CDE provided guidance to the LEAs. Mr. Lagomarsino informed TEROC that sample language was provided to the LEAs to help with implementing e-cigarette policies.

Ms. Adams Simms asked if the 12 awardees for the 2015 Cohort K Tier 1 TUPE grant had been announced. Mr. Lagomarsino answered that the intent to award was not been officially approved, yet. However, the awardee names would be released soon.

The Chair thanked Mr. Herman, Mr. Lagomarsino and Ms. Planche for the presentation.

**9. UNIVERSITY OF CALIFORNIA OFFICE OF THE PRESIDENT
TOBACCO-RELATED DISEASE RESEARCH PROGRAM REPORT**

Drs. Bart Aoki and Tracy McKnight presented on behalf of TRDRP.

The 134 applications submitted in response to the Cycle 24 Call for Applications are still pending peer review by seven separate review panels scheduled for February, 2015. Since submission of the applications on December 1, 2014, the program has focused on recruiting reviewers, assignment of applications to reviewers according to relevant expertise, and organizing the meeting logistics. Similarly, the Joint TUPE Evaluation review and funding recommendations will be completed by April, 2015.

The Scientific Advisory Committee (SAC) meeting will occur during the last week in March, 2015. TRDRP is currently completing grantee surveys and stakeholder/expert interviews and revised grant types and priorities will be issued by July 1, 2015.

Dr. McKnight presented information and TEROC engaged in discussion regarding the UC-Historically Black Colleges and Universities (UC-HBCU) Initiative Collaboration. Since the last report, the program has focused on developing a database of prior applicants and grantees who are potential applicants for the UC HBCU Initiative. The Call for Proposals was released in early November, 2014 and the deadline for grant submission is March 11, 2015. The bulk of the outreach to UC faculty will occur in January, 2015 with the goal of having at least one application submitted from a previous or current TRDRP applicant.

Dr. Aoki discussed a recent meeting held regarding e-cigarette tax policy and research. The meeting took place in Oakland on January 22, 2015 and over 60 individuals attended.

Dr. Aoki discussed recent developments regarding e-cigarettes, including:

- Increased promotion, marketing, and uptake of e-cigarettes
- Intensified demand for public health and regulatory action
 - Increased demand on all Prop 99 agencies for information and policy development
- Increased demand for TRDRP grants for e-cigarette research
- 25 percent of proposals recommended for funding in last cycle
- \$2,368,789 (30 percent) of proposed commitment to new research grants in last cycle

Dr. Aoki discussed the purpose of the meeting:

- Initiate a discussion in California about state and local issues surrounding the taxation of e-cigarettes
 - Implications for youth and non-smoker uptake
 - Implications for revenue directed towards supporting the state's tobacco control efforts necessitated by e-cigarettes

- Review the current status of e-cigarette taxation policies and implementation approaches
- At least 30 states are considering some form of taxation in 2014
- Explore any research needs surrounding e-cigarette taxation and the potential nature of TRDRP support for such research

An array of presenters traveled to join the discussion including, but not limited to, Mark Meaney from the Tobacco Control Legal Consortium, Dr. Frank Chaloupka from the University of Illinois at Chicago, Dr. Stanton Glantz from the University of California, San Francisco (UCSF), Kimberly Amazeen from ALA, Dr. Lisa Henriksen from Stanford University, and Dr. Wendy Max from UCSF.

Dr. Aoki discussed the key points and recommendations that came out of the meeting:

- Goal(s) for e-cigarette taxation must be clear
- Industry is enacting laws to pre-empt effective taxation policies
- Explosion of nontraditional distribution channels pose challenge
- Clear definition of what is being taxed is essential
 - Define as “tobacco products”
 - Plan and resources for enforcement are key including effective licensing
- Need to consider taxing strategy in the context of marijuana legalization, e.g., “vapor device” regulation as Oregon is considering

In addition, Dr. Aoki discussed the potential research that could be done to support the State’s tax policy:

- Model projected revenue and benefits:
 - How much revenue would be generated under alternative tax rates and structures?
 - Could we quantify the potential benefit of using that revenue for various purposes?
- Characterize distribution and sales environments:
 - Characterize licensed and unlicensed electronic nicotine delivery system (ENDS) retailers
- Public and consumer attitudes:
 - How will people in various groups respond to a price (tax) increase?
 - Message framing for e-cigarette taxation and regulation
 - What is the relationship between industry marketing and increased youth initiation?
 - What is the relationship between industry marketing and triggers for urges to smoke in former smokers?
 - What is public’s perception and reaction to industry’s pro-vaping and anti-tax messaging

Dr. Max felt that the TRDRP's report on the e-cigarette tax policy meeting was very informative. She continued by expressing the need for additional research and the need for adding questions to surveys regarding e-cigarettes. Dr. Zhang let TEROC know that questions are potentially being added to the Behavioral Risk Factor Surveillance Survey (BRFSS) and California Health Interview Survey (CHIS). In addition, a secondhand e-cigarette exposure question had been added to BRFSS.

Dr. Ling suggested updating and expanding TEROC's position on e-cigarettes and expressed the need for data and resources regarding e-cigarettes.

Mr. Lagomarsino and other TEROC members discussed the need for more information regarding where e-cigarettes fall under the Master Settlement Agreement (MSA).

Mr. Kwong informed TEROC of a new product called "voke" that delivers nicotine through compressed air, without a heating element. This is something to keep in mind when defining e-cigarettes.

The Vice Chair thanked Dr. Aoki and Dr. McKnight for the presentation.

10. 2015-2017 TEROC MASTER PLAN

Ms. Etem presented on behalf of the TEROC Master Plan Dissemination Subcommittee.

Ms. Etem and Dr. Baezconde-Garbanati have been meeting and working towards a final release date for the 2015-2017 TEROC Master Plan. An American Public Health Association (APHA) Abstract is nearly ready to be submitted. Ms. Etem has shared the Master Plan with the Cancer Control Advisory Committee; they are using the TEROC Master Plan in their own Cancer Control Master Plan.

Ms. Etem presented a rough draft of the 2015-2017 TEROC Master Plan Infographic. TEROC members and guests provided feedback including making the infographic more usable for legislators and advocates presenting to the legislators and changing the graphics and a few of the data points. Members and guests also discussed the printing of the Master Plan and infographics, including budgetary constraints.

Dr. Ling suggested creating a one-page infographic for each objective.

Mr. Kwong presented certificates of appreciation from CTCP leadership to a few key members of the CTCP TEROC Master Plan Taskforce, Ms. Simpson, Gretta Foss-Holland and Mary Modayil for their contributions towards the development of the TEROC Master Plan.

The Chair thanked Ms. Etem for the presentation.

11. PUBLIC COMMENT

No public comment.

The meeting was adjourned at 4:00 PM.

The next TEROC meeting will take place in Sacramento.

APPROVED