

#### House Bill 1004

Senate Appropriations Committee; Human Resources Division Senator Dever, Chairman

Neil Charvat, Program Director Tobacco Prevention and Control Program, Healthy & Safe Communities Section Public Health Division | March 7, 2023



Health & Human Services

### Tobacco Prevention and Control Program Synthesis Report 2021-2023



https://www.hhs.nd.gov/sites/www/files/documents/DOH%20Legacy/Tobacco/N D\_TPCP\_Synthesis\_Report\_FY23.pdf



### NORTH DAKOTA TPCP'S COLLABORATIVE APPROACH

Policy and ordinance

North Dakotans from

secondhand smoke and

changes to protect

The vision of the TPCP is:

All North Dakotans deserve the opportunity to reach their full health potential no matter where they are born or live.

**Sustained Change** 

vapor.

### Mission

#### Improve and protect the health of North Dakotans by reducing the negative health and economic consequences of the state's number-one cause of preventable disease and death - tobacco use.





Systems change through integration of nicotine dependence treatment in health systems and with payers.



Environmental changes are integrated into specific contexts (e.g., schools, worksites) to reduce tobacco use. **28** Local Public Health Units (LPHU) Funded to provide tobacco prevention, cessation support, and support for local policy change, education and enforcement.

**Funded partners** 

### **23** Health care sites/clinics

Funded to provide education on nicotine dependence and cessation support.

#### **2** Indigenous partners

Funded local lead agencies: University of North Dakota to collect tribal-specific and tribal lead data collection on tobacco use and a contractor from Turtle Mountain leads the Smoke-Free Casino project and community efforts.

**4** Additional contractors Funded to provide media, NDQuits services, external evaluation and research.



# TPCP'S APPROACH RELIES ON STRONG STATE AND LOCAL COLLABORATION

TPCP is implemented by a cross-sector collaboration of individuals and organizations at the state and local levels. Each group plays a critical role in supporting and implementing TPCP activities, building on the strengths of one another's level of influence.

#### State program staff



Provide infrastructure to support collective TPCP activities (e.g., technical assistance, monthly calls, specific trainings, inperson meetings, site visits, and program administration).

#### Local TPCP grantees

Lead and engage a crosssector coalition of local-level partners to implement TPCP strategies (e.g., manage mutually beneficial partnerships, and implement sustainable policies, systems, and environmental change).

TFND and other contractors provide support and content area expertise (e.g., evaluation, media, quitline, and policy).



#### Local community partners

Collaborate with TPCP grantees to implement TPCP strategies (e.g., implement projects, participate in coalitions, and spread the word).



### **TPCP HAS WORK TO DO**

Smoking damages nearly every organ in the body,<sup>4</sup> and there is emerging evidence on the harmful effects of vaping, including the emissions from vaping products or electronic nicotine delivery systems (ENDS).

> There is a profound and demonstrated negative health impact that commercial tobacco use has on the physical and mental health of those using tobacco products, as well as a large evidence base of the harms of secondhand smoke on non-smokers.

#### Tobacco or other nicotine use in youth wires the brain for a lifetime of continuous addiction.

Youth and young adults who had ever used e-cigarettes have seven times higher odds of becoming smokers, as compared to youth who had never vaped.<sup>5</sup>

Nicotine use impacts mental health. A cross-sectional study of 30,000 current e-cigarette users found that **2.4** Study of 50,000 currence e.g. frequent vaping increases the odds 2.4 times of having diagnosed depression. Nicotine use is also related to increased stress levels and anxiety.<sup>5</sup>



Smoking prevalence is three times higher for individuals without a high school degree, as compared to those with a college degree. Prevalence is twice is high for individuals below the poverty level (41%) as compared to those at or above the poverty level (21%).<sup>6</sup>

Using tobacco increase the risk of the following diseases:

Nearly 80% of COPD cases are caused by smoking.<sup>7</sup>

1 in 3 cancer deaths is linked to smoking; ה smoking contributes to at least 15 different cancers.<sup>8</sup>

1 in 4 deaths from cardiovascular disease are caused by smoking.<sup>7</sup> Heart disease is the leading cause of death in North Dakota.<sup>9</sup>

People who smoke are 30-40% more likely to develop type 2 diabetes that those who do not smoke; <sup>7</sup> there are 58.3 thousand North Dakotans with this disease. <sup>10</sup>

Ŷ Smoking has impacts before, during, and after pregnancy, and increases the likelihood of premature birth and low birth weight.7



### NDQUITS HELPS NORTH DAKOTANS QUIT

Since 2004, the quitline has provided evidence-based tobacco counseling and nicotine replacement therapy to North Dakotans ready to make a quit attempt.

> Nearly 2,000 unique North Dakotans utilized the state's guitline, NDQuits, annually during this biennium. Among the survey respondents who used tobacco when they enrolled in NDQuits and who received evidence-based service from the program (NRT or a counseling call):<sup>26</sup>



Quit tobacco for at least a day during the 7 months since using NDQuits.

.....

**37%** Quit tobacco for at least 30 days during the 7 months since using NDQuits.

**33%** Quit tobacco for at least 30 days during the 7 months since using NDQuits when ENDS use was included as tobacco use.

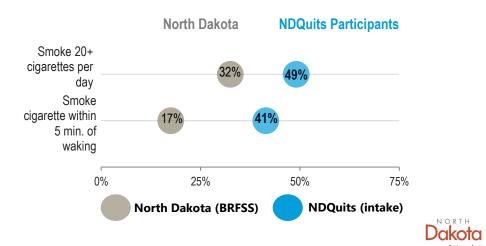
These guit rates meet the NDQuits goals (7-month and 30day guit rate, North American Quitline Consortium (NAQC) benchmark) of 85% and 30%, respectively. A strength of NDQuits is enrollees who get treatment go on to guit at standard rates. Further, it appears use of ENDS may make quitting tobacco more challenging, given the lower quit rate.

#### NDQuits is consistently cost effective.



For every \$1 spent on NDQuits, North Dakota saves \$2.57 - \$2.89 under the current tax rate (\$0.44 per pack).<sup>26</sup>

#### **NDQuits reaches highly addicted** tobacco users.



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### EXPANDING THE WORK OF THE PHARMACIST PROVIDER

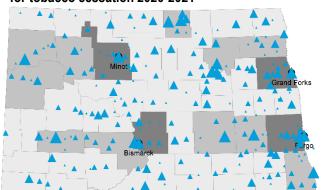
Senate Bill 2221 during the 67th legislative session (2021) allowed pharmacists independent authority to provide immunizations and tobacco cessation therapy.

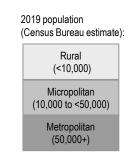
North Dakota Health and Human Services (HHS), North Dakota State University (NDSU) College of Pharmacy, and the NDQuits contractor created an approved training to expand the pharmacist's role of prescriptive authority. This one-hour online, on-demand module is available for free.

HHS partnered with the Collaboration and Advancement in Pharmacy (CAP) Center at NDSU College of Pharmacy to support the Pharmacists Service Enhancement Project (PSEP). The PSEP is a collaboration with North Dakota pharmacies to expand tobacco/nicotine addiction treatment services to include counseling in rural and urban communities.

The importance of expanding pharmacist's ability to treat nicotine addiction is underscored by the following map. Medicaid claims come from North Dakotans across the state, as shown on the following map.







"Tobacco use continues to be a problem across North Dakota. With pharmacists being the most accessible health care providers, it is our hope that we can learn from and train pharmacists to become primary providers of tobacco cessation services. Leveraging the CAP Center Core Principles of Implementation, we will learn about barriers to implementing the services in pharmacies, and design solutions to overcome those barriers. Over time, we are hopeful that this program will grow and expand so that provision of comprehensive tobacco cessation services is the norm in North Dakota pharmacy practice."

- Brody Maack, NDSU faculty and pharmacist



### YOUTH ACTION SUMMITS

Two Break Free Youth Action Summits (YAS) took place during the biennium, with both happening during 2022 due to a COVID-19 delay. A total of 326 high school students from across the state participated in one of these Summits.



Fall 2022 Break Free YAS in Bismarck. Representatives Glenn Bosch and Lawrence Klemin and candidate (now elected Senator) Sean Clearly participated.



Fall 2022 Break Free YAS in Fargo, organized by Bismarck Burleigh Public Health, Fargo Cass Public Health, TFND, and the TPCP.

The Break Free YAS has been a statewide annual event for the past five years. In the fall of 2022, a speaker was brought in from a national organization, Truth Initiative, whose focus was on supporting peers with quitting.

#### "

The Youth Action Summit provides me with tangible information and opportunities to advocate a tobacco-free lifestyle within my community.

Erynn, High School Senior from Bismarck and 4x Summit Attendee

#### "

We are excited to host the third Fargo Youth Action Summit. Youth involvement in tobacco prevention is critical and the summit will give students tools they need to take action and make a positive change, both in their communities and throughout the state.

> Annabel DeFault, Fargo Cass Public Health Tobacco Prevention Coordinator





# 2023-2025 Budget request

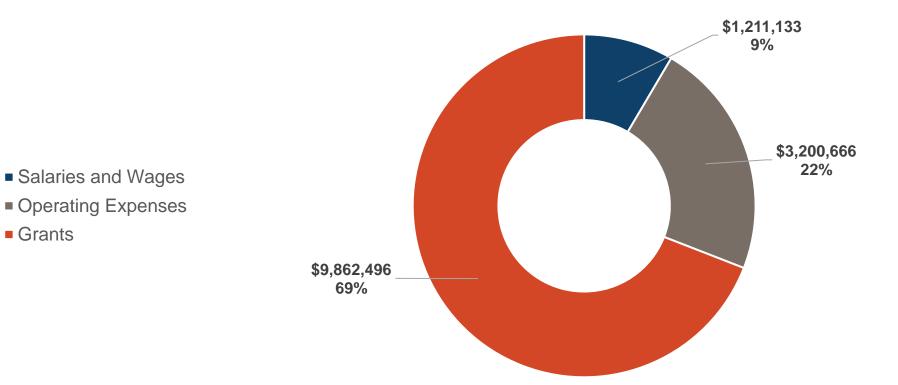
The program, systems and workforce support necessary to continue to serve North Dakotans



### **2023-25 Executive Recommendation By Line Item**

Total \$14,274,295

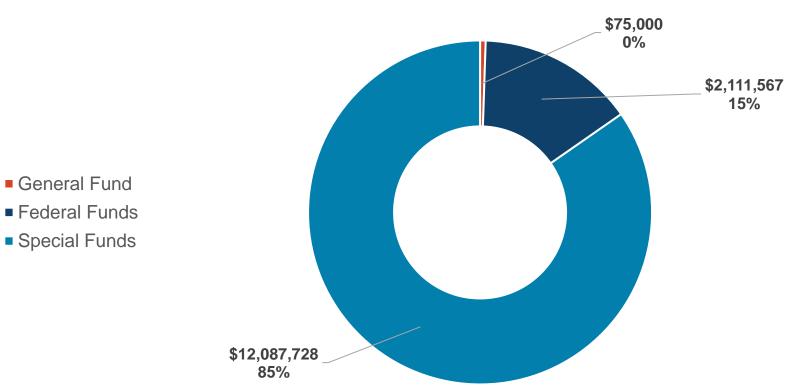
Grants





### 2023-25 Executive Recommendation By Funding Source

Total \$14,274,295



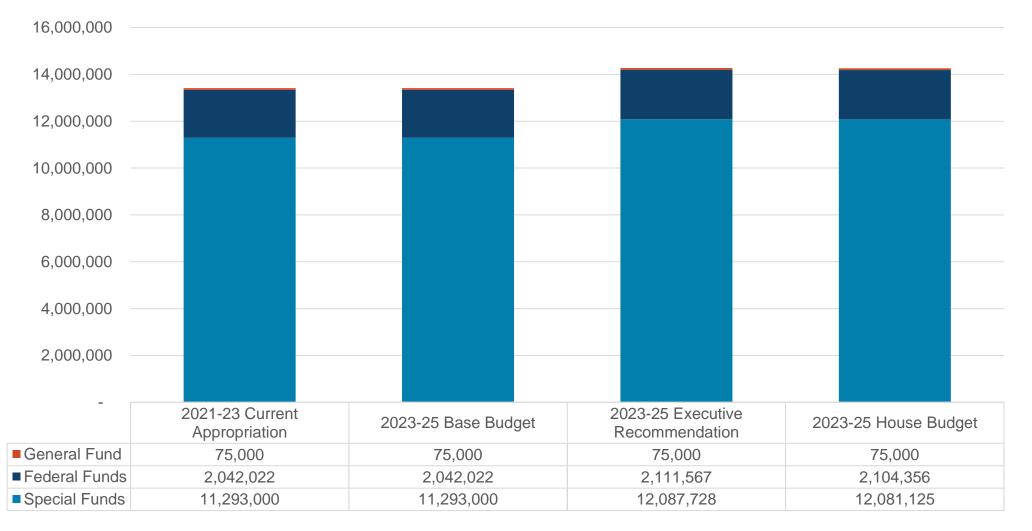


# **Budget Comparison**

Description	2021-23 Current Appropriation	2023-25 Base Budget	Increase/ (Decrease)	2023-25 Executive Rec.	House Increase / (Decrease)	2023-25 House Budget
Salaries and Wages	1,140,306	1,140,306	70,827	1,211,133	(13,814)	1,197,319
Operating Expenses	3,207,220	3,207,220	(6,554)	3,200,666	0	3,200,666
Grants	9,062,496	9,062,496	800,000	9,862,496	0	9,862,496
FTE	6.2	6.2		6.2		6.2

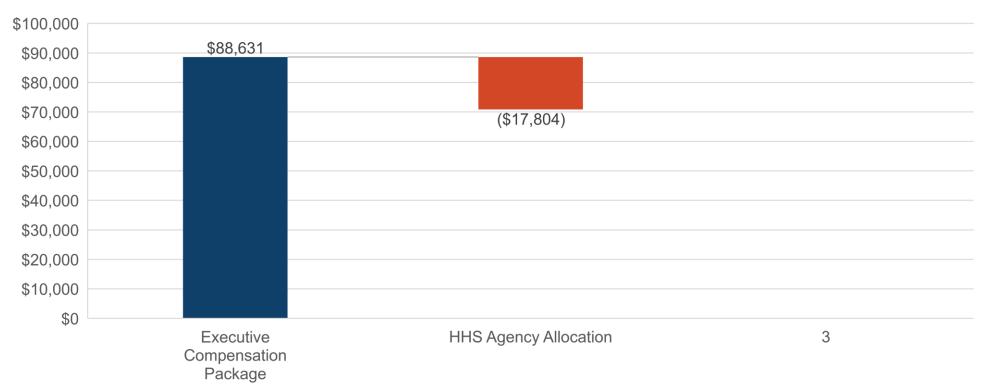


### **Overview of Funding Changes**





### **Major Salary & Wage Differences**



■ Increase ■ Decrease ■ Total



### **Operating Differences Detail**

Description	2023-25 Base Budget	Increase/ (Decrease)	2023 - 25 Executive Budget	House Increase /(Decrease)	2023-25 Hou	ise Budget
Travel	14,105	-	14,105	0		14,105
IT - Software/Supp.	9,972	(4,472)	5,500	0		5,500
Professional Supplies & Materials	21,019	(6,019)	15,000	0		15,000
Buildings/Vehicle Maintenance Supplies	1,015	(1,015)	0	0		0
Miscellaneous Supplies	1,000	-	1,000	0		1,000
Office Supplies	4,646	-	4,646	0		4,646
Postage	3,928	-	3,928	0		3,928
Printing	55,246	-	55,246	0		55,246
IT Equip Under \$5000	2,800	(800)	2,000	0		2,000
Lease/Rentals - Equipment	759	-	759	0		759
Lease \Rentals Buildings.\Land	23,369	(5,369)	18,000	0		18,000
Repairs	105	-	105	0		105
IT-Data Processing	24,197	11,121	35,318	0		35,318
IT-Telephone	7,211	-	7,211	0		7,211
IT - Contractual Services	10,000	-	10,000	0		10,000
Professional Development	33,091	-	33,091	0		33,091
Operating Fees & Services	33,037	-	33,037	0		33,037
Professional Services	2,961,720	-	2,961,720	0		2,961,720
Total Operating	\$ 3,207,220	\$ (6,554))	\$ 3,200,666	\$ -	\$	3,200,666



### **Major Operating Differences**

#### Increase Decrease Total

\$3,207,220	\$11,121	(\$0.040)	(#5.000)	(\$4.470)		\$3,200,666
		(\$6,019)	(\$5,369)	(\$4,472)	(\$1,815)	
2023-25 Base Budget	NDIT Data Processing	Prof Supplies & Materials	Building Rent	IT Software & Supplies	Other changes	2023-25 Exec. Rec.



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### **Grant Detail**

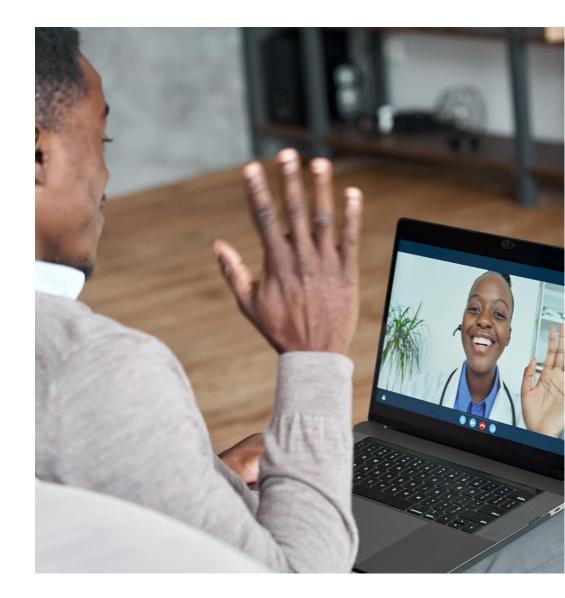
Description	2021-23 Current Appropriation	Increase/ (Decrease)	2023-25 Base Budget	Increase / (Decrease)	2023-25 Executive Budget	2023-25 General Fund	2023-25 Federal Funds	2023-25 Special Funds
Grants to Local Public Health Units	6,250,000		6,250,000	-	6,250,000			6,250,000
Grants to Health Systems	1,159,000		1,159,000	-	1,159,000			1,159,000
Grants to Tribes	508,000		508,000	_	508,000		508,000	
Statewide coalition capacity building - Tobacco Free North Dakota	404,000		404,000	-	404,000			404,000
NDQuits Cessation Program with Pharmacies	<u>-</u>		-	500,000	500,000			500,000
Youth Vaping and Nicotine Prevention			-	300,000	300,000			300,000
Tobacco Grant for Pregnancy Risk Assessment Monitoring System (PRAMS) to NDSU	20,000		20,000	_	20,000		20,000	
NDQuits - UND	646,496		646,496	-	646,496			646,496
Synar Program - grants for Tobacco Compliance Checks	75,000		75,000	_	75,000	75,000		
Total Grants	9,062,496	-	9,062,496	800,000	9,862,496	75,000	528,000	9,259,496



### Summary and Key Takeaways

### **Tobacco Prevention and Control:**

- **Ingenuity** Expanding Pharmacy Provider Support
- **Enterprising** Effective, contextually relevant
- **Community** Increasing youth involvement to address vaping issues
- **Opportunity** Continue to expand on what works in tobacco prevention and control







# **THANK YOU**

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