



March 9, 2015

To: The Members of the Finance Committee

Re: S.B. No. 946 AN ACT CONCERNING REVENUE ITEMS TO IMPLEMENT THE GOVERNOR'S BUDGET

Good Morning. I am John O'Rourke, LCSW, and Program Director for CommuniCare's tobacco cessation program. CommuniCare is a unique and dynamic behavioral healthcare partnership between BHcare and Bridges... A Community Support System, providing comprehensive services for 19 cities and towns.

Since 2009, CommuniCare, Inc. has been implementing tobacco use cessation services that has approximately 2,000 enrollments in numerous behavioral health settings in Connecticut with funding from the Department of Public Health Tobacco Use Control and Prevention unit (DPH) and the Tobacco and Health Trust Fund (THTF). Through our cessation programming, we are able to provide people with effective cessation counseling and medications at no cost to the participant. In addition, we are able to provide involved agencies with expert consultation on best practices surrounding the development of tobacco-free practices as well as an overhaul of a culture from one that condones tobacco use to one that addresses it and provides ongoing support.

Here are the benefits of funding tobacco cessation services here in Connecticut:

- The average cost of cessation services in CT per client (2013-2014) is \$966.
- Health care costs and productivity savings per smoker quit are \$7,528.
- The return on investment savings ranges from \$1.25 - \$3.71 for every dollar spent on cessation programming.

Our current funding (which is solely through DPH and the THTF) has us focusing our efforts on the geographical area of greater New Haven. Through this, we are able to provide cessation counseling across the area at the following agencies and entities: Crossroads Treatment Center, Southern Connecticut State University, University of New Haven, The Connection and through CommuniCare's home office location. In addition, we are supporting initiatives to develop tobacco-free campuses and areas for Southern Connecticut State University, University of New Haven and for the City of New Haven under an initiative set forth by Mayor Toni Harp.

Even under the current level of funding, the needs of the City are undermet. I had intended to provide testimony today to encourage you to increase spending on tobacco use cessation, prevention and control today to come closer to what the recommended level of spending is as per the Centers for Disease Control. An increase in spending on tobacco use control would pay great dividends to the state and greatly improve the health and wellness of the residents of Connecticut. Instead, I'm here to plead with you to not eliminate this funding. To spend zero funds of all the state receives from the Master Settlement Agreement for two years is unconscionable.



To give you some perspective on the continuing impact of tobacco, here are some facts:

- In Connecticut, 480,000 adults, more than 1 out of every 6 citizens, still uses some form of tobacco, with 4,900 adults in Connecticut dying from this addiction each year. Tobacco-caused health costs in Connecticut top \$2 Billion annually, including \$520.8 Million in state Medicaid costs, and tobacco-caused productivity losses total \$1.25 Billion. (Campaign for Tobacco-Free Kids)
- Comprehensive tobacco control programs funded at the level recommended by the Centers for Disease Control and Prevention would help reach at least 25,000 additional Connecticut tobacco users each year, generating over \$20 million in savings from averted healthcare and lost productivity costs as more tobacco users quit. Fully funded tobacco control programming would also keep more than 25,000 youth from becoming tobacco users over a 10 year period, saving more than \$3.4 billion in averted tobacco related healthcare costs. (as determined by the University of North Carolina @ Chapel Hill, Tobacco Prevention Evaluation Program, DPH's independent evaluator)

There are a number of current initiatives that will be halted if the \$12 Million annual transfer to the Tobacco and Health Trust Fund in both FY 2016 and 2017 is eliminated. Local initiatives such as the one in New Haven to declare all City-owned property tobacco free would be unsupported and unsuccessful. In addition, new statewide bills that are being proposed (HB5449, HB6283, HB6285 and HB6290) to address and regulate electronic cigarettes to protect our state's youth and young adults would not be supported.

Lastly, I'm well aware that, in addition to these cuts, massive cuts have been proposed to the DMHAS and DDS budgets. To even propose these cuts, considering that these systems are already working on shoestring budgets is absurd. I implore you to reconsider these cuts. I understand that you're facing very tough decisions. However, balancing the budget on the backs of our state's most vulnerable is inconceivable, and you must consider other options. Thank you for your time.

Sincerely,

A handwritten signature in black ink, appearing to read "John O'Rourke". The signature is fluid and cursive, with the first name "John" and last name "O'Rourke" clearly distinguishable.

John O'Rourke, LCSW
Program Director