



Testimony to Joint Committees on Public Health and Appropriations

Connecticut Cancer Partnership

December 22, 2014

On behalf of the CT Cancer Partnership, which unites the members of our state's diverse cancer community--academic and clinical institutions, state and local government health agencies, industry and insurers, advocacy and community groups, and cancer survivors, I am pleased to support the Tobacco and Health Trust Fund (THTF) Board of Trustees proposed disbursements of the 3.5 million dollars available and recommend the Joint Committees' adoption.

Tobacco use is associated with approximately 30% of all cancers, is the primary cause of 80 % of all lung cancers and continues to be the number one cause of preventable death in the United States. Since the historic national tobacco settlement of in 1998, the tobacco industry has provided states with 116.3 billion dollars, with Connecticut receiving approximately 2 billion dollars.

These funds helped many states develop and implement comprehensive tobacco programs. There is conclusive evidence that tobacco prevention and cessation programs work to reduce smoking, save lives and save money by reducing tobacco-related health care costs, when part of a comprehensive strategy that also includes higher tobacco taxes and smoke-free workplace laws.

Studies have shown that California, which has the nation's longest-running tobacco prevention and cessation program, has saved tens of thousands of lives by reducing smoking-caused complications at birth, heart disease, strokes and lung cancer. Between 1988 and 2004, lung and bronchus cancer rates in California declined nearly four times faster than the rest of the United States. A February 2013 study in the scientific journal PLOS (Public Library of Science) ONE found that from 1989 to 2008, California's tobacco control program reduced health care costs by 134 billion dollars, far more than the 2.4 billion dollars spent on the program.

A December 2011 study in the American Journal of Public Health found that between 2000 and 2009, the state of Washington saved more than five dollars in health care costs for every one dollar spent on their tobacco prevention and cessation programs by reducing

hospitalizations for heart disease, stroke, respiratory disease and cancer caused by tobacco use. Over the 10-year period, the program prevented nearly 36,000 hospitalizations, saving 1.5 billion dollars compared to the 260 million dollars spent on the program. The 5:1 return on investment is conservative because the cost savings reflect only the savings from hospitalizations that were prevented.

While Connecticut has made progress in reducing overall adult cigarette use from 22.8% in 1999 to 15.5% in 2013, smoking rates and continued poor health outcomes have changed little for high risk populations including the poor, Medicaid recipients, those with behavioral health conditions and also those who have little education. These populations utilize more health care services at a very high cost. Yet the tobacco industry continues to create new products, some totally unregulated, to induce yet another generation of youth to become addicted and dependent on tobacco

Currently, the THTF is almost the exclusive source of funding for Connecticut's tobacco prevention and control efforts. Without continued financial commitment to funding the Trust Fund, there would not be a State Quitline, counter-marketing media campaigns, smoking cessation programs in high-risk settings, community-based prevention programs, or evaluation of the outcomes, success and cost-benefit of these efforts. We strongly urge you to adopt the THTF Board's recommendations and continue to use settlement funds to address the disproportionate burden of disease and cost due to the use of tobacco products.

Sincerely,

December 16, 2014

Dareey Cobbs-Lomax, MBA, MPH
P.O. Box 9293
New Haven, CT 06533

~~RE: SUPPORT OF PROJECT:~~ Project Access New Haven (PA-NH) Breast Health Navigation Program

Dear Ms. Cobbs-Lomax:

I am writing in support of the Project Access New Haven (PA-NH) application to Komen for funding a program to use patient navigation to improve access to and utilization of timely breast health services in the Greater New Haven area. Patients will be screened at Fair Haven Community Health Center (FHCHC) and, if an abnormal finding is identified, referred to PA-NH for navigation of care. The primary goal of the program will be to link individuals with abnormal findings to timely and appropriate care and provide navigation through the continuum of care.

This collaborative program will include the following:

- Education of patients and families as they move through the breast cancer continuum of care
- Ensuring the linkage of patients to appropriate timely care
- Collaborative meetings between referring providers, Patient Navigators, and specialists
- Linking patients to community resources (transportation, translation, financial assistance etc.) as needed
- Comprehensive collection of data through the use of EPIC Electronic Medical Record (EMR) to which both PA-NH program staff and FHCHC providers and staff have access

We at the Connecticut Cancer Partnership are in concurrence with the goals of the program and are pleased to see that they align closely with goals of the Connecticut Cancer Plan, 2014-2017.

Specifically, our cancer treatment chapter in the state Plan cites the following relevant strategies:

- Share implementation strategies and best practices, including development of survivorship care plans (which include treatment summaries) and patient navigation programs
- Reduce disparities in access to treatment related to geography, income, insurance status, etc. through policy, systems and environmental changes that address barriers and increase access to quality treatment
- Support patient navigation programs
- Disseminate information about medical home approaches to cancer care

I am aware of the exemplary efforts by PA-NH in addressing the needs of the underserved. This work is essential as we seek to eliminate disparities in the burden of cancer in Connecticut.

I currently serve as Chair of the Board of Directors of the Connecticut Cancer Partnership and Chair of the Early Detection Committee. The Partnership is responsible for the Connecticut Cancer Plan, 2014-2017, the blueprint for coordination of comprehensive cancer control activities in the state, following the CDC approach. **The Connecticut Cancer Partnership has a successful history of working with organizations on patient navigation initiatives.**

~~I strongly encourage Komen to approve this proposal.~~

Sincerely,

A handwritten signature in cursive script, appearing to read "Linda Mowad".

Linda Mowad, RN

Chair, Connecticut Cancer Partnership

Chair, Early Detection Committee