

DOH FPHS WORKGROUP

Workgroup Session 3 | January 10, 2014 Chronic Disease and Injury Prevention Discussion Guide

TOBACCO

Understanding the Right Magnitude

One step toward refining the estimate for tobacco is to bring in outside estimates of what a reasonable level of spending might be. DOH has found two potential reference points to use for a statewide level of spending on tobacco programs:

1. **Historic DOH Program Spending.** In the 2007-09 biennium, DOH supported a comprehensive tobacco program with \$26.8 M per year in spending. This number includes money that went toward LHJ programs and community partners.
2. **CDC Recommendations.** A 2007 CDC study titled *Best Practices for Comprehensive Tobacco Programs* recommends spending of about \$10 per capita on tobacco programs, which is about \$67.3 M per year in Washington State. This estimate assumes spending on state and community interventions, health communication interventions, cessation interventions, surveillance and education, and administration and management.

Group Discussion Points

- How could the numbers above be used to think about a reasonable level of spending for a statewide foundational tobacco program?
- Does spending on the previous DOH program represent a foundational level of tobacco program spending?
- How does the CDC's recommendation align with the foundational services framework?

Estimate Methodology

A second element to discuss is how to estimate a reasonable cost for a statewide tobacco program. There are two potential approaches:

- **Assume a Statewide Number.** For this study, we could use one of the above recommended numbers as our estimate for the tobacco program. Additional chronic disease activities and other foundational costs would continue to be estimated using the provided sample data.
- **Estimate DOH and LHJs Separately.** Using updated sample data from PHSKC and Chelan-Douglas, we could also estimate LHJs using this new information. *[to continue this discussion, we will move into the live model]*

HEALTHY EATING, ACTIVE LIVING (HEAL)

Understanding the Right Magnitude

DOH staff have taken a first cut at estimating what a statewide HEAL program would look like, including estimates of money that goes toward LHJs and community partners. Their initial estimate is \$11.3 million per year, or about \$1.65 per capita per year.

[we will bring up the live spreadsheet during the meeting if attendees would like additional detail on what is included in this estimate]

Group Discussion Points

- Does this estimate seem like a reasonable level of overall spending for a statewide HEAL program?
- What would this mean for DOH expenditures? LHJ expenditures?

Estimate Methodology

A second element to discuss is how to estimate a reasonable cost for a statewide HEAL program. There are two potential approaches:

- **Assume a Statewide Number.** For this study, we could use the above recommended number (or a new statewide estimate that stemmed from our discussion) as our estimate for the HEAL program. Additional chronic disease activities and other foundational costs would continue to be estimated using the provided sample data.
- **Estimate DOH and LHJs Separately.** Using updated sample data from PHSKC and Chelan-Douglas, we could also estimate LHJs using this new information. *[to continue this discussion, we will move into the live model]*