

Public Health Trust Fund Executive Committee (PHTFEC) Meeting Minutes

Date/Time: October 4, 2017 – 1:00 p.m.

Place: Mass Gaming Commission

101 Federal Street, Boston, MA 02110

Present: Executive Committee

Lindsey Tucker, Co-Chair, Associate Commissioner, Massachusetts Department of

Public Health

Stephen P. Crosby, Co-Chair, Chairman, Massachusetts Gaming Commission

Jennifer Queally, Undersecretary of Law Enforcement

Rebekah Gewirtz, Executive Director of the National Association of Social Workers, MA Chapter and Representative of the Massachusetts Public Health

Association

Michael Sweeney, Executive Director, Massachusetts State Lottery Commission

Attendees

Marlene Warner, Executive Director, Massachusetts Council on Compulsive Gambling

Bruce Cohen, Retired Director, Massachusetts Department of Public Health Victor Ortiz, Director of the Office of Problem Gambling, Massachusetts Department of Public Health

Teresa Fiore, Manager of Research and Responsible Gaming, Massachusetts Gaming Commission

Mark Vander Linden, Director of Research and Responsible Gaming,

Massachusetts Gaming Commission

Enrique Zuniga, Commissioner, Massachusetts Gaming Commission

Brianne Tolson, Director of Policy and Communications, Massachusetts Council

on Compulsive Gambling

Jacqui Krum, Senior Vice President and General Counsel at Wynn Resorts

Development

Rachel Volberg, Principal Investigator, SEIGMA, UMass School of Public Health

and Health Sciences

Alissa Mazaar, Project Manager, SEIGMA, UMass School of public Health and

Health Sciences

Call to Order

1:03 p.m. Co-Chair Tucker called to order the Public Health Trust Fund Executive Committee ("PHTFEC") Meeting.

Approval of Minutes

1:09 p.m. *Michael Sweeney moved for the approval of the PHTFEC minutes for July 11,* 2017. *Motion seconded by Rebekah Geweritz. Motion passed unanimously.*

MGC Research Agenda Quarterly Update

1:12 p.m. Mark Vander Linden provided information relating to the current status of the MGC research agenda as well as upcoming research items.

In response to the CHIA Manuscript Report update, Jennifer Queally inquired about the significance of respondents being in a PPO vs. HMO. Dr. Rachel Volberg noted that an HMO is limited in terms of how easy it is to go outside of the network to get specialist care. Bruce Cohen clarified that HMO and PPO would not affect the submission to CHIA as long as they are commercial plan, and noted that Medicaid was not included in this analysis.

Dr. Rachel Volberg reported that all eleven spaces for diagnoses were reviewed by researchers, which are provided in addition to the initial diagnosis for which the individual is treated. She noted that there are not many people who have more than four recorded diagnoses.

Co-Chair Tucker noted that data would not show up for problem gamblers that do not reach the DSM diagnostic criteria. She further inquired as to why Medicaid data was not included in the CHIA Manuscript report. Bruce Cohen stated that Medicaid data would not have been included as the research application would have been submitted before CHIA (Center for Healthcare Information and Analysis) had the ability to pull Medicaid data.

In response to the Plainridge Park Casino Operations Report, Rebekah Gewirtz inquired whether findings would be coupled with social impacts and expressed concern that publicizing only casino revenue without communicating negative social impacts would sway public perception.

Co-Chair Crosby noted that all reports are presented and made available to the public, which could result in positive and negative headlines for each type of report. Dr. Rachel Volberg added that her team had plans to produce an impact report with the range of all impacts which have been identified to date.

Having exceeded the allotted time set aside for this item, Co-Chair Tucker suggested that Mark Vander Linden update the committee on the BGPS (Baseline General Population Survey) report. Mark Vander Linden informed the group about changed weights for prevalence.

Marlene Warner indicated that the various reports do not use consistent language. Co-Chair Tucker stated that there are slight differences between the various terms used so that it would be difficult to tighten up language. Dr. Volberg stated that the BGPS report includes a glossary which defines the various terms.

Rebekah Gewirtz inquired whether the presentation of economic reports could include footnotes about the social costs of expanded gaming.

Co-Chair Tucker commended Mark Vander Linden for the clear formatting of his quarterly update.

SEIGMA In-Depth Analysis of Predictor Report and Discussion

1:38 p.m. Co-Chair Tucker explained that this item was added to the agenda because understanding gamblers across the continuum is useful for public health workers.

Dr. Rachel Volberg noted that States have the opportunity to add questions to the BRFSS (Behavioral Risk Factor Surveillance System). For this particular report, a graduate student reviewed the BRFFS data. She suggested that this type of work is important as problem gambling makes up almost all of the research within the gambling research field.

Co-Chair Crosby indicated that breaking the study group into gambling frequency levels would be worth exploring further as it would inform evaluations such as the upcoming PlayMyWay report. Dr. Volberg clarified that time, money and frequency were the same as problem gamblers however the sample did not fall into the DSM5 criteria.

Jennifer Queally questioned whether the DSM definition for problem gamblers was similar to that of substance abusers, whose frequency alone may not necessarily imply a problem. Dr. Volberg clarified that the DSM does not include frequency and that she would not include it as a proxy for problem gamblers, but is more appropriately used for risky behavior.

Co-Chair Tucker requested a reminder on the difference between recreational versus problem gambler. Dr. Volberg replied that anyone who gambles even just once a year is considered recreational. To get into a risk pool, one or two of the items that assess loss of control or evidence of harm have to be endorsed. She further clarified that gambling at a frequency that is the same as a problem gambler would also categorize somebody as a risky gambler.

Alissa Mazar acknowledged the confusion around the understanding of the presentation and stated that a review of the data visualization would be revisited. Dr. Volberg stated that she would share specific tables within the report which support detailed questions surrounding the distinguishing factors of recreational versus other types of gamblers. Jennifer Queally suggested that it would be helpful to see percentages in the presentation. Michael Sweeney noted that the difficulty which the PHTFEC has in understanding the data would suggest that it is nearly impossible for the public and press to understand.

Jennifer Queally inquired whether genetics should be considered a factor indicative of gambling behavior. Mark Vander Linden stated that he would distribute an executive summary from Marc Potenza (Director at the Center of Excellence in Gambling Researc) on this topic.

Rebekah Gewirtz inquired how questions regarding addictions and mental health problems were asked. Dr. Volberg stated that the questions were asked separately.

Michael Sweeney inquired whether individuals born outside of the US had difficultly answering any questions. Dr. Volberg stated that the questionnaire was written for an 8th grade reading level and further indicated that .8% of respondents answered in Spanish. She clarified that there was likely a small portion of the population that was unable to be interviewed because of limited languages however this was an agreed upon limitation.

Co-Chair Tucker ended the discussion by thanking the presenters and suggesting that data presentation be revisited for easier comprehension.

DPH Program Quarterly Update

2:48 p.m. Victor Ortiz presented the quarterly update of the Office of Problem Gambling at the Department of Public Health. Co-Chair Tucker shared the DPH approach of leveraging current contracts where appropriate.

Jennifer Queally inquired whether focusing on treatment centers would yield a large enough sample to be representative of substance abusers. Co-Chair Crosby added that he was unsure if it could be assumed that the skillset could correlate for prevention of at risk populations.

Bruce Cohen inquired about the focus of the training. Victor Ortiz explained that the model is based on an ambassador model and was selected through the regional planning process which is based on an ambassador model.

Turning to the communications campaign that is part of the FY18 programming agenda, Victor Ortiz explained that qualitative research and communications planning research would be conducted to inform the campaign which is planned for launch in FY2018.

3:08 p.m. Transitioning to an overview of the Gap Analysis, Victor Ortiz offered background information on the treatment of problem gambling as part of the DPH addiction treatment systems. Marlene Warner stated that EIM-ESM (Enterprise Invoice/Service Management) may be to blame for lower numbers as gambling treatment programs are typically found within larger agencies. She further explained that treatment providers do not benefit from logging in to the system.

Rebekah Gewirtz inquired how a baseline understanding could be established if current numbers are so low. Co-Chair Tucker stated that the data is accurate but that it is not complete.

Enrique Zuniga referenced the SEIGMA baseline study and stated that 88,000 Massachusetts residents are classified as problem gamblers, 3% of which would be expected to access the treatment system in any given year.

Voluntary Self Exclusion Overview and Discussion

3:41 p.m. Mark Vander Linden reviewed the terms of the Massachusetts Voluntary Self Exclusion program as well as those from other properties and jurisdictions. He explained that the exit session requirement is specific to Massachusetts.

Jennifer Queally inquired whether there was opportunity to appeal in other States and properties. Jacqui Krum noted that VSE term appeals have been taken to court in the past, particularly by individuals who are contesting lifetime exclusion, and that the casino typically does not win.

Jennifer Queally stated that she would be uncomfortable if State Police are involved in escorting individuals off the floor who are breaching their term as it could be classified as an unlawful escort. She noted that she would follow up with Director Karen Wells of the MGC IEB.

Public Comment

3:57 p.m. With no questions from the Public, Co-Chair Tucker requested that any agenda items for the next meeting be sent to her in advance so that it can be added to the agenda.

Other Business

3:58 p.m. Having no further business, Co-Chair Tucker ended the meeting. Jennifer Queally made the motion to adjourn, seconded by Michael Sweeney. Motion passed unanimously.

List of Documents and Other Items Used

- 1. Public Health Trust Fund Executive Committee, Notice of Meeting and Agenda dated October 4, 2017
- 2. Public Health Trust Fund Executive Committee, Meeting Minutes dated July 11, 2017
- 3. MGC Gaming Research Update Memo dated October 4, 2017
- 4. Predictors of Gambling & Problem Gambling in Massachusetts dated October 4, 2017
- 5. Recreational Gambling in Massachusetts dated October 4, 2017
- 6. DPH Office of Problem Gambling Services Program Update dated October 5, 2017
- 7. Treatment and Services Gap Analysis dated October 5, 2017