### October PGTSAC Meeting (Draft Minutes)

**Date:** 10/28/25

#### **Members**

	Present	Absent
Anne Rogers, Chairperson – Problem Gambling Prevention Coordinator, Office of	X	
Behavioral Health Wellness		
Carolyn Hawley PhD, Vice-Chair –President of the Virginia Council on Problem Gambling	X	
Khalid R. Jones – Executive Director (Ray Dunkle attended for Lottery)	X	
Michael Menefee – Program Manager of Charitable and Regulatory Programs	X	
Waqas Ahmed – Executive Secretary (Brian Wolford attended for VRC)	X	
Jim Bebeau – Executive Director of Danville Pittsylvania CSB		X
Julie Rutter – Director of Security, Hard Rock Casino Bristol		X
Rodney Miles – Director of Compliance, Colonial Downs	X	
Dean Hestermann – VP, Issues Management & Strategic Communications, Caesars Danville	X	
(Carolene Layugan attended for Caesars)		

**Others:** Dr Minal, Jill Vaughan, Keith Whyte, Lisa Cochran, Nora Gentry, Rodney Miles, Sean Fournia, T Schweimler, Tejus Patel, Willard L. Robertson, Matt Britt, Elizabeth, Emma Freeman, Azeem Majeed, Carolene Layugan, Jennifer Davis-Walton, Israel Saavedra, Katreena Lewis (VRC)

#### **Discussion topics**

#### 1. Welcome- Introductions

a. No new introductions

#### 2. Minutes of Last Meeting for Approval

a. Unable to vote due to not having quorum

#### 3. RecoverMe App

- a. Tejus Patel and Dr Minal are both primary care doctors
- b. Recover Me is clinician-led and started because of an individual who was exhibiting problem gambling behaviors because of their phone.
- c. CBT is the main form of treatment, but also incorporates mindfulness, journaling, and peer support.
  - i. This is meant to be an avenue into treatment and existing networks
  - ii. This could help reduce stigma
- d. Individualistic approach based on what solution works for the client
- e. Demo of app
  - i. Has a digital toolkit for self-help
  - ii. The users will get a notification every day that asks if they gambled.
    - 1. This will prompt further questions about what happened and what led to the behavior
    - 2. The journal helps picks up on any trends
  - iii. Therapy sessions
    - 1. Each session helps target a particular area of gambling behaviors

- 2. There is an audio file with a transcript
- 3. A reflection section shows up after the audio is completed
- 4. Feedback is gathered after the reflection if it was helpful

#### iv. Mindfulness section

- 1. Tailored for individuals with gambling issues
- 2. There is an explanation of the usefulness of mindfulness for beginners
- 3. There is an audio that plays with a summary afterwards

#### v. Progress tab

- 1. Overview includes goals, money saved, time saved, gambling free streak can all be exported to share with clinician or others who may support.
- 2. Insights put everything that was in the journal and summary of every reflection and identify any trends
- 3. Goals is a space for individuals to set SMART goals
- 4. Milestones highlights what parts of the app has been used and get rewards after reaching milestones

#### vi. Support tab

1. Includes the Wellness Hub that shares local resources

#### vii. SOS tab

1. Supports with immediate needs

#### viii. New features

- 1. Chat option in the next couple of days
- 2. In VA, this can be a connection with the Peer Support Network

#### ix. Metrics

- 1. Users
  - a. 12 K global users
  - b. 5 states with 2283 users
    - i. In Ohio, TimeOut Ohio provides the app for free
    - ii. Virginia: 6—8 months in VA and there are 70 users
      - 1. Average age is 34
      - 2. Average PGSI is 18.3
      - 3. Average gambling per day is 3 hours 35 minutes
      - 4. Average money spent gambling per day \$285
      - 5. 12-4am is the most common time when support is needed and there are signups
      - 6. This data reflects the helpline data

#### 2. App use

- a. Mindfulness is the most useful feature
- b. Users use everything equally
- c. 56% want to help stop gambling completely

#### x. Advertisements

- 1. They do not advertise
- 2. There is a QR code for individuals to download the app

xi. Questions can be sent to <a href="mailto:tejus.betonme@gmail.com">tejus.betonme@gmail.com</a> and <a href="mailto:minal.betonme@gmail.com">minal.betonme@gmail.com</a>

#### 4. Lottery VEP (Voluntary Exclusion Program) data

- a. Timeline
  - i. 607 self-exclusion this year
  - ii. Total VEPs=2131
- b. Program demographics
  - i. Males have more SE across all three options
  - ii. 30-39 is the most common age for SE sign ups
- c. Reapplying
  - i. 67 participants reapplied
  - ii. This number is growing to more people or more time
- d. Sign-ups
  - i. Online for 2 or 5 years
  - ii. Casinos online through tablet
  - iii. Casinos have the lifetime option and must set up an appointment
  - iv. There is about a 6 to 1 ratio for online and casino sign ups
- e. National Exclusion
  - i. VA hasn't made a final decision
  - ii. Unsure how it would apply to other restrictions who are not part of the program and around data privacy
  - iii. There are 13 states that participate in the program
    - 1. This include sector, companies, and tribes
  - iv. It is an extensive application form and the user can select which states they want to be excluded from

#### 5. Racing Commission-Responsible & Safer Play

- a. Rodney attended international conferences
  - i. Youth population has difficulty controlling gaming
  - ii. I-gaming is more concerning than casinos
  - iii. AI can promote safeguards providing feedback on how much time is being spent gaming
  - iv. Illegal sites are regulating and cannot self-exclude
- b. Overview of safer play initiatives
  - i. 360 degree approached that is organized in three areas
    - 1. Regulatory foundation
      - a. Establish firm requirements pre-licensed that includes responsible gambling programs
      - b. IDs need to be scanned
        - i. Fake IDs are concern because they are sophisticated
    - 2. Oversight and enforcement
      - a. Inspections and compliance reviews that are onsite to verify responsible gambling programs
    - 3. Future direction
      - a. Expand staff for audits
      - b. Continue with partnerships
      - c. Improve data collection and reporting

#### 6. Updates on RG from members

- a. Council updates
  - i. There is a 60% increase in call volume compared to the same time last year
  - ii. 25-34 is the most common age group
  - iii. Internet, casino type gambling, sports gambling and slot machines at casinos are the most common forms of problem gambling
  - iv. Over 1300 new visitors
  - v. 100 referred to treatment
    - 1. 92% of people are able to access a provider within the week
  - vi. There are several community outreach events that are done in collaboration with CSBs and other organizations

#### b. Hotline number

- i. VA has a state number
- ii. Legislators may support the establishment of the number
- iii. The same hotline still works
- iv. Prior to NCPG taking over the number, VA took the calls and worked with New Jersey

#### 7. DBHDS-Pilot screening project, curriculum

- a. Screening pilot project
  - i. Five CSBs to do a pilot project to include screening of all their substance use and mental health clients that go into the CSBs
    - 1. Highlands, Danville-Pittsylvania, Hanover, Prince William, and MPNN
  - ii. They will do the PGSI
  - iii. If referral is needed, they will be sent over to the helpline to meet up with a peer
  - iv. Some have contracts with an individual provider in their area
  - v. This will begin December 1, 2025 and will last 1.5 years
- b. Curriculum for youth
  - i. This helps fulfil the requirement to include problem gambling information in their health curriculum
  - ii. Over half of CBS are working on implementation or working with schools to get the curriculum started
  - iii. One CSB has done the e-learning version
  - iv. If anyone is interested in having it, they should reach out to their local CSBs

#### 8. Wrap-up & adjourn

- a. Next meetings
  - i. January 27, 2026 (all virtual)
  - ii. April 28, 2026
- b. Anne adjourned the meeting at 11:27 am



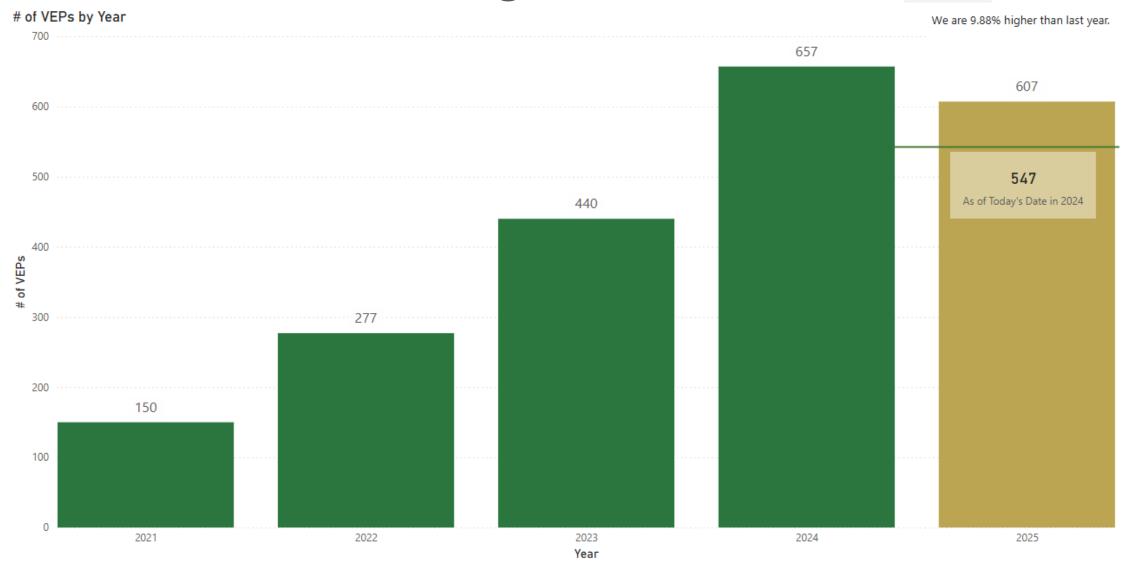
Responsible Gaming Update

PROBLEM GAMBLING TREATMENT & SUPPORT ADVISORY COMMITTEE (PGTSAC)

October 28, 2025

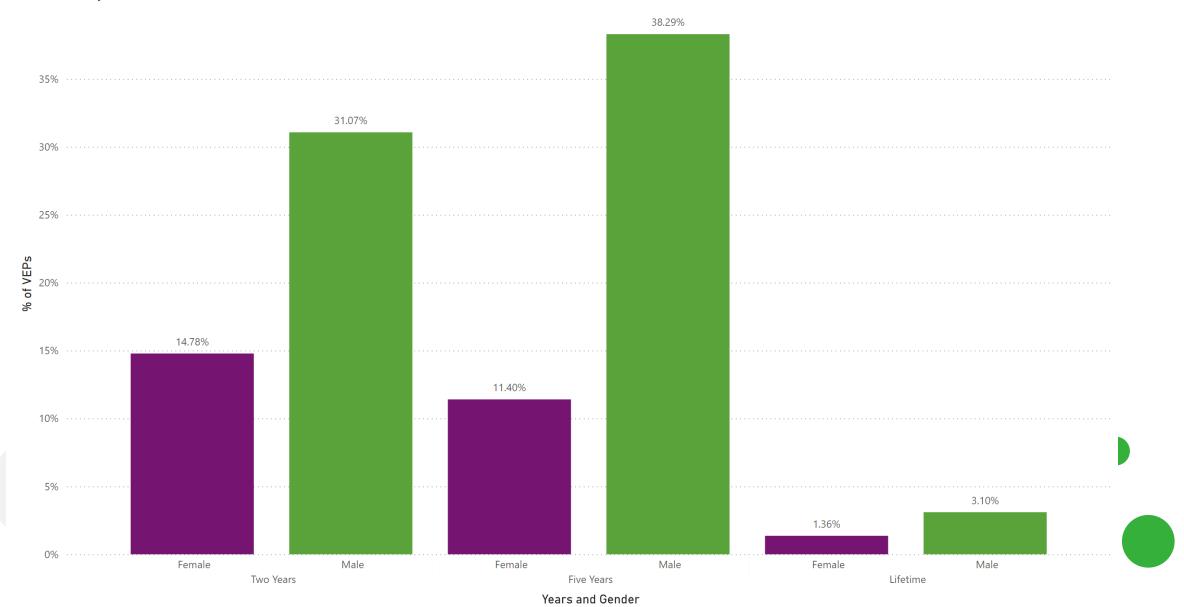


### **VEP Program Timeline**



## **VEPs by Gender**

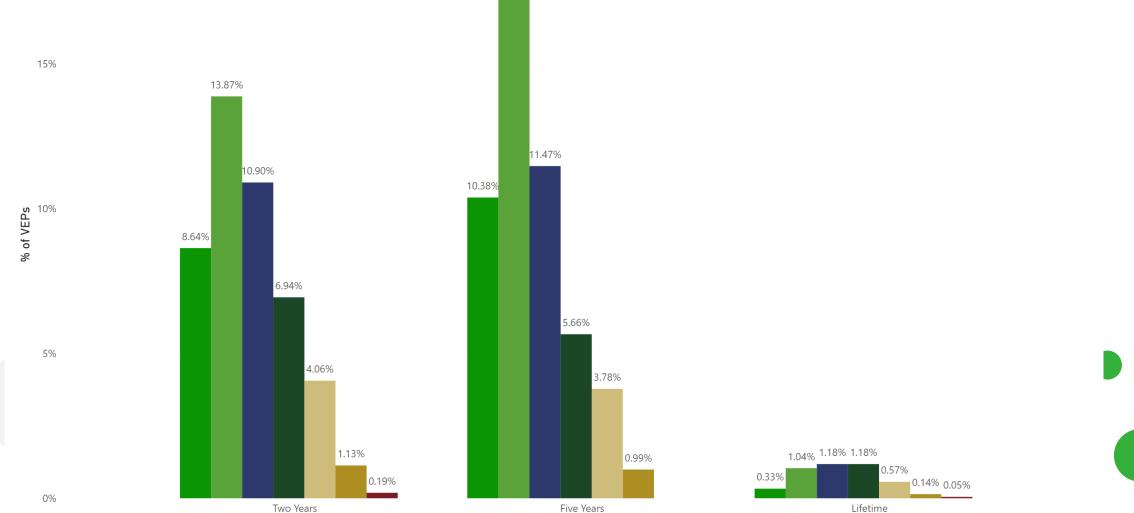
% of VEPs by Exclusion Period and Years and Gender



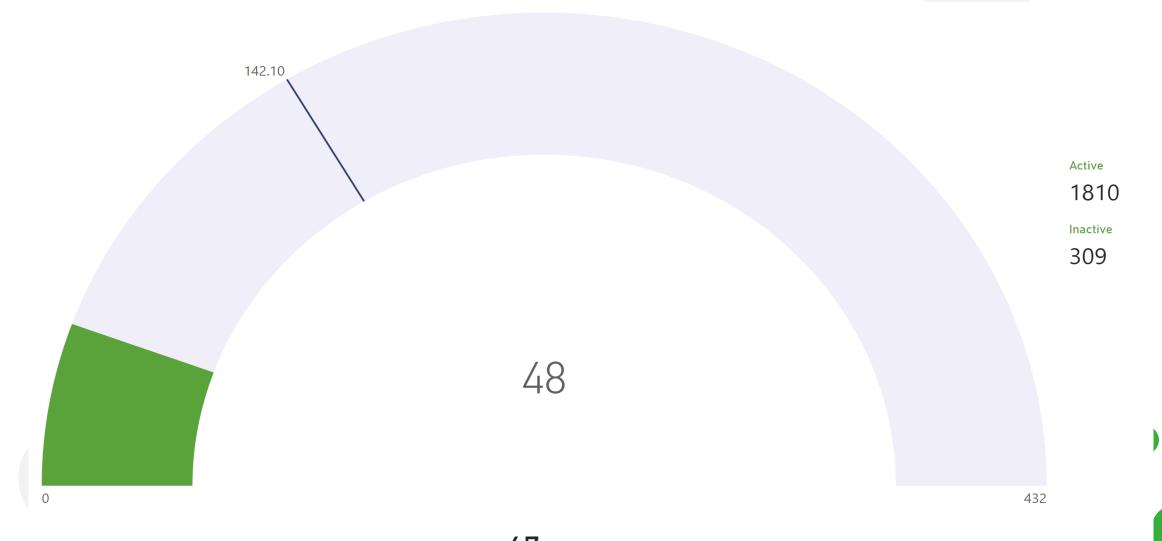
# VEPs by Age

% of VEPs by Count.Exclusion\_Period and Age Group





### Median number of days for patrons to reapply



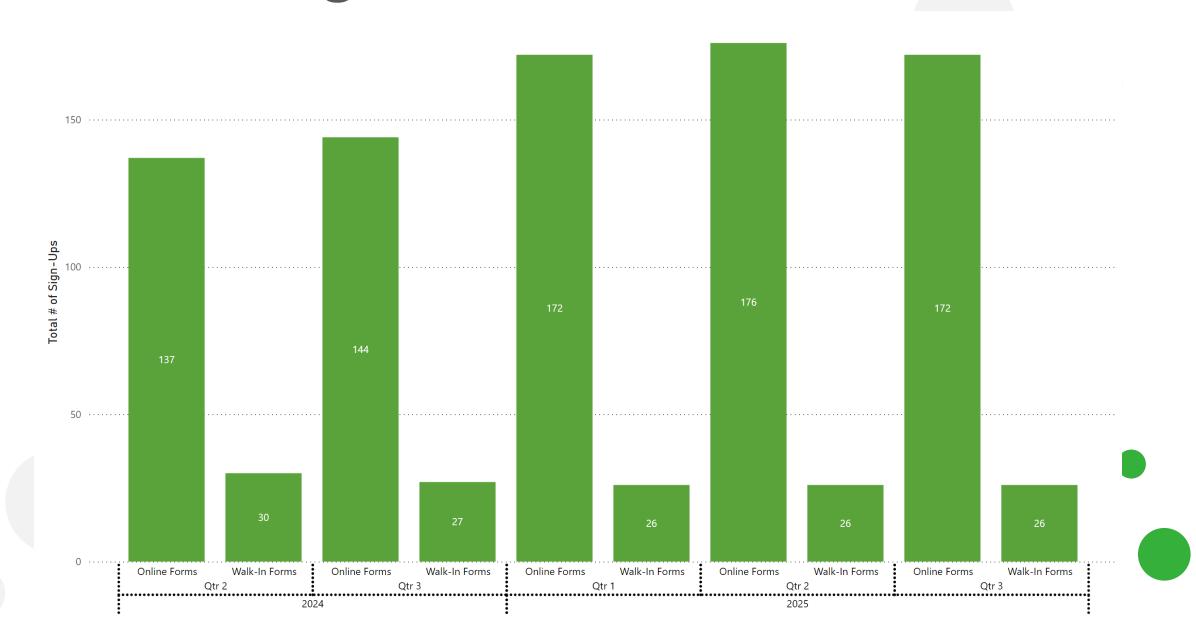
24 Reapplied Two Years change to Five Years 9 Reapplied Five Years change to Lifetime **O** /
Total Number of Reapplied

### Ways to Sign up for the VEP

- Apply or Reapply Online for 2 or 5 years- Voluntary Exclusion Program | Virginia Lottery
- Sign up at a Casino Facility for 2, 5, or Lifetime exclusions
- Lottery's Onsite Compliance Office or Call the VEP hotline (804)692-7185 to make an appointment to sign up for Lifetime exclusion
- Apply through your Sports Betting App
  - Operators with Self-Excluded Options
    - Bally's
    - Bet365
    - BetMGM
    - Caesars
    - Fan Duel
    - Hard Rock Digital
    - ESPN (Penn Sports)
    - RSI
    - Sporttrade



## VEP Form Registration – Online vs. Walk-In





Voluntary Exclusion Program - Questions





### **Responsible & Safer Play**

**VRC Initiatives Overview** 

#### 1. REGULATORY FOUNDATION (PRE-LICENSING)

VRC requires applicants to demonstrate a comprehensive Responsible Gambling Program.

- Self-exclusion procedures (statewide & multijurisdictional)
- Enforceable deposit, time, and wagering limits
- Clear access to problem gambling helplines and player tools
- Annual staff training on responsible gambling awareness

#### 2. OVERSIGHT & ENFORCEMENT (POST-LICENSING)

VRC actively verifies that licensed operators maintain responsible gaming standards.

- O Regular on-site inspections and compliance reviews
- Verification of required signage and helpline visibility
- Strategic partnerships to promote awareness campaigns

#### **Problem Gambling Treatment & Support Fund**

Funded by 0.01% of all HHR wagers.

\$511,067

\$470,406

CALENDAR YEAR 2024 (TOTAL)

3. FUTURE DIRECTION & NEXT STEPS

#### **Expanded Staffing**

- Code (Markdown)
- Additional Audit & Compliance Staff to increase field presence

#### **Next Steps**

- Continue collaboration with DBHDS and prevention partners
- Assess opportunities for improved data tracking
- Identify future initiatives aligned with Support Fund priorities