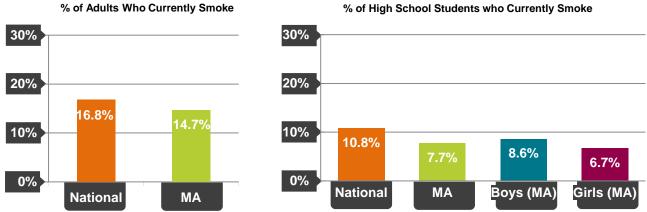




CIGARETTE USE^{1-2*}



% of High School Students who Currently Smoke

OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in Massachusetts was 1.5% in 2013. 4% of adult current cigarette smokers in Massachusetts were also current smokeless tobacco users in 2013.³
- In 2015, 5.5% of high school students in Massachusetts used chewing tobacco, snuff, or dip • on at least one day in the past 30 days. Nationally, 7.3% of high school students used smokeless tobacco on at least one day in the past 30 days.²
- In 2015, 10.4% of high school students in Massachusetts smoked cigars, cigarillos, or little • cigars on at least one day in the past 30 days. Nationally, 10.3% of high school students smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days.²
- In 2015, 23.7% of high school students in Massachusetts used electronic vapor products on at least one day in the past 30 days. Nationally, 24.1% of high school students used electronic vapor products on at least one day in the past 30 days.²

truthinitiative.org

^{*} National and state-level prevalence numbers reflect the most recent data available. This may differ across state fact sheets.

ECONOMICS OF TOBACCO USE AND TOBACCO CONTROL

- In FY2016, Massachusetts allocated \$3.9 million in state funds to tobacco prevention, which is 5.8% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.⁴
- Massachusetts received an estimated \$880 million in tobacco settlement payments and taxes in FY2016.⁴
- The health care costs in Massachusetts, directly caused by smoking, amount to \$4.08 billion annually.⁴
- Massachusetts loses \$2.4 billion in productivity each year due to smoking.⁵

STATE TOBACCO LAWS⁶⁻⁷

EXCISE TAX

• The state tax increased to \$3.51 per pack of cigarettes in July 2013. Little cigars are taxed \$3.51 per twenty cigars, chewing tobacco and snuff are taxed 210% of the wholesale price, and cigars and smoking tobacco are taxed 40% of the wholesale price.

CLEAN INDOOR AIR ORDINANCES

 Smoking is prohibited in all government workplaces, private workplaces, schools, childcare facilities, restaurants, bars (allowed in smoking bars), casinos/gaming establishments, retail stores, and recreational/cultural facilities.

YOUTH ACCESS LAWS

- The minimum age requirement for the purchase of tobacco products is 18.
- Establishments are required to post signs stating that sales to minors are prohibited.
- Self-service tobacco product displays are prohibited except in adult-only retail stores.

LOCAL TOBACCO LAWS

- Over 110 cities in Massachusetts have banned the sale of tobacco products to those under 21 years old.⁸
- Over 46 cities and local municipalities in Massachusetts have passed flavored tobacco bans. All of these flavor bans exempt menthol and mint flavors.⁹
- In Boston:
 - The sale of flavored tobacco and nicotine delivery products other than menthol in all retail outlets other than adult-only retail tobacco stores and smoking bars is banned.¹⁰
 - The minimum age requirement for the purchase of tobacco products, including electronic cigarettes, is 21.¹⁰
 - The use of smokeless tobacco and other tobacco products at baseball parks, including Fenway Park, and other professional and amateur sports venues is prohibited.¹¹

CESSATION STATISTICS AND BENEFITS

• The CDC estimates that 57.6% of adult every day smokers in Massachusetts quit smoking for one or more days in 2014.¹²

- Massachusetts's Medicaid program covers all seven recommended cessation medications and individual, phone and group counseling.^{7†}
- The state's Medicaid program's barriers to coverage include required prior authorization and minimal copayments.⁷
- Massachusetts' state quitline invests \$1.35 per smoker; the national average investment per smoker is \$3.37.⁷
- Massachusetts does not have a private insurance mandate provision for cessation.⁷

[†] The seven recommended cessation medications are NRT Gum, NRT Patch, NRT Nasal Spray, NRT Inhaler, NRT Lozenge, Varenicline (Chantix), and Bupropion (Zyban). Fiore MC, et al. Treating Tobacco Use and Dependence: 2008 Update. Clinical Practice Guideline. Rockville, MD: US Department of Health and Human Services. Public Health Service: May 2008.

REFERENCES

- ¹ CDC, Behavioral Risk Factor Surveillance System, 2014
- ² CDC, Youth Risk Behavior Surveillance System, 2015
- ³ CDC, State-Specific Prevalence of Cigarette Smoking and Smokeless Tobacco Use Among Adults—MMWR, United States, 2011-2013
- ⁴ Campaign for Tobacco-Free Kids, Broken Promises to Our Children: a State-by-State Look at the 1998 State Tobacco Settlement 17 Years Later FY2016, 2015
- ⁵ Campaign for Tobacco-Free Kids, Toll of Tobacco in the United States, 2015
- ⁶ American Lung Association, SLATI State Reports, 2015
- ⁷ American Lung Association, State of Tobacco Control, 2016
- ⁸ Tobacco21. www.tobacco21.org
- ⁹ http://www.sentinelandenterprise.com/news/ci_29605413/twin-cities-poised-get-tough-flavored-tobacco ¹⁰ Boston Public Health Commission, Tobacco Regulations. <u>http://www.bphc.org/whatwedo/tobacco-free-living/Pages/TOBACCO-REGULATIONS.aspx</u>.
- ¹¹ Knock Tobacco Out of the Park. www.tobaccofreebaseball.org
- ¹² CDC, Behavioral Risk Factor Surveillance System, State Tobacco Activities Tracking and Evaluation System, 2014