



14 May 2019

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Substitute HB 166 - Interested Party Testimony –
Ohio Senate Finance: Health & Medicaid Subcommittee

Chairman Hackett, Vice Chair Huffman, Ranking Member Thomas, and members of the Senate Finance Subcommittee on Health and Medicaid, thank you for the opportunity to testify today on Substitute HB 166, the State's Operating Budget. Tobacco 21 laws are impactful because people between the ages of 16 to 21 who experiment with tobacco, often because their friends do it, will often progress to daily users. These years are a time when the developing brain is highly vulnerable to one of nicotine's most powerful effects, addiction. Exposure to nicotine during this period may result in permanent neurological receptor changes that can lead to a lifetime addiction and its resultant illnesses. Research shows that 95% of adult smokers began before the age of 21 and 80% of new smokers are under age 21. By delaying initial use, Tobacco 21 laws increase the chance that individuals will not become daily users thereby decreasing their disease risk.

The American Heart Association applauds the Governor and Department of Health for their interest in increasing the legal age of sale for these products, and the Ohio House for retaining the provision within their version of the Budget Bill. While we obviously support the intent of the legal age of sale increase for tobacco and electronic cigarette products, we cannot support the language as drafted unless this Committee and its colleagues in the Ohio Senate strengthen the language. Specifically, to ensure the language is effective, we are asking that the Committee amend the language to remove youth penalties – ensuring those penalties for underage sale are placed on the retailer; ensure that enforcement mechanisms are in place by adding the retailers of these “electronic cigarettes” to the same set of licensure standards as traditional retailers of combustible tobacco; and empower municipalities to pass stronger laws on this issue if they choose to do so.

We know the national smoking rate is decreasing (Centers for Disease Control and Prevention estimates that nationwide **14 percent** of adults smoke), Ohio's rate is currently at **21.1 percent of adults** and **15.1 percent of high schoolers** – a higher rate than most surrounding states, according to the Ohio Department of Health. With the nation's 8th highest smoking rate, Ohio is on the wrong path. Alarming, 11,900 more Ohioans will become daily smokers this year.

Additionally, vaping, or e-cigarette use, is as much of an epidemic among Ohio youth as it is across the country. The national average of high schoolers that use e-cigarettes sits at 20.1 percent! E-cigarettes entered the market in 2007, from 2011 to 2015 there was a 900 percent increase among middle and high school students; and between 2015 and 2017, we saw an increase of 78 percent in high schooler use and 48 percent among middle schoolers. The Federal Drug Administration recently referred to the trend of e-cigarette use by young people as “simply not tolerable,” and it undertook its largest enforcement effort in history by working to ban flavored products and the use of animated characters to curtail marketing strategies targeted at youth. In JUUL's testimony in the House Finance Committee, they stated that they “only sell these products through our e-commerce platform.” Interestingly, when I was at a gas station in my hometown of Springfield the other night, they had a giant display behind the counter featuring all sorts of flavors and options. These are not cessation tools and the FDA has not approved them as such. While they may not be as toxic as cigarettes, they do contain glycerin, flavoring, formaldehyde and other carcinogens, as well as lead, nickel, tin, and copper. In fact, 1 JUUL cartridge contains as much nicotine as 1 pack of 20 cigarettes.

We hope the State of Ohio will join the 23 communities here, 12 other states, hundreds of municipalities across the country, and major corporations – including Walmart, Wal-Greens, and Rite Aid in supporting this important initiative.



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We also ask that you attempt support for the Healthy Food Financing Initiative, a program intended to support healthy food access in underserved communities in urban and rural low- and moderate-income areas. This program is currently funded at \$300,000 across the biennium. We are requesting that the funding level for this important program be set to \$3M over the biennium to be truly viable. Studies have shown that people who are food insecure suffer from more illnesses and poor health, have a higher stroke risk and increased rates of diabetes and high blood pressure. This effort, in collaboration with the Finance Fund, promotes healthy food financing and corner store programs in Ohio. These funds will provide direct loans, in addition to grants, and/or forgivable loans to establish, renovate, and expand permanent facilities for the sale of healthy foods in communities currently underserved by these facilities.

Thank you for your time and consideration of our policy requests. I will now be happy to answer any questions you might have.