



TO: House Finance Committee

FROM: Ken Fletcher, Director of Advocacy

DATE: March 10, 2021

RE: HB 110- Tobacco Cessation Funding in FY2022-23 Appropriation

I am Ken Fletcher, Director of Advocacy for Ohio, and I thank you for the opportunity to submit testimony on behalf of the American Lung Association regarding HB 110 - the state appropriation for FY 2022-23.

The American Lung Association is the oldest voluntary public health organization in the United States and is committed to eliminating tobacco use and tobacco-related disease. Tobacco use is the leading cause of preventable death and disease in the United States, killing nearly half a million Americans each year.

The American Lung Association strongly supports funding state tobacco prevention and cessation programs at levels recommended by the Centers for Disease Control and Prevention (CDC). Sustained investment in these vital public health programs over the long term will prevent thousands of illnesses and deaths from tobacco use and save billions of dollars in medical expenses.

Why Fully Funding Tobacco Prevention and Cessation Programs is Important:

- Tobacco prevention and cessation programs are very cost effective. A 2013 study found that California's tobacco control program saved over \$55 in health care cost savings for every \$1 invested from 1989 to 2008¹. A 2011 study showed that Washington's program saved the state \$5 in just tobacco-related hospitalization costs for every \$1 spent from 2000 to 2009².
- Fewer young people would smoke. One study concluded that if states spent just the minimum amount recommended by the CDC, youth smoking rates would be 3 percent to 14 percent lower nationwide³.

¹ Lightwood J, Glantz (2003) The Effect of the California Tobacco Control Program on Smoking Prevalence, Cigarette Consumption, and Healthcare Costs: 1989-2008. PloS ONE 8(2): e47145

² Diley JA, Harris JR, Boysun MJ, Reid TR. Program, Policy and Price Interventions for Tobacco Control: Quantifying the Return on Investment of a State Tobacco Control Program. Am J Public Health. Published online ahead of print December 15, 2011: e1-e7.

³ Taurus JA, Chaloupka FJ, Farrelly MC, Giovino GA, Wakefield M, Johnson LD, O'Malley PM, Kloska DD, Pechacek TF. State Tobacco Control Spending and Youth Smoking. Am. J. Public Health 2005 Feb.: 95(2): 338-44

- Fewer adults would smoke. A study concluded that if states had spent just the minimum amount recommended by the CDC between 1995 and 2003, there would have been between 2.2 million and 7.1 million fewer smokers⁴.

Ohio currently spends only 11.1% of what is recommended by the CDC. That's why the American Lung Association strongly supports the governor's proposed increase in the **Tobacco Use Prevention Fund** line item by \$2.5 million in each fiscal year. This program works to lower the smoking rate in Ohio, which remains significantly higher than the national average. The proposed funding level of \$14.5 million in each fiscal year would amount to a 20.8% increase in funding for tobacco use prevention.

The Lung Association also supports the budget provision that adds vapor products to the Smoke-Free Workplace Act, which prohibits smoking in public places and places of employment in Ohio. The proposed budget adds "the use of electronic smoking device and vapor product" to the prohibitions.

In December 2016, the U.S. Surgeon General released a report concluding that e-cigarette aerosol is not harmless and can contain nicotine and other harmful and potentially harmful chemicals. Sixteen states and the District of Columbia have added e-cigarettes to their smokefree laws and the American Lung Association urges Ohio to do the same by keeping this section in the budget bill.

Thank you for this opportunity to comment on the FY 2022-23 Budget. The American Lung Association in Ohio looks forward to working with the legislature as HB 110 continues to move through the process.

Sincerely,



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⁴ Farrelly MC, Pechacek TF, Thomas KY, Nelson D. The Impact of Tobacco Control Programs on Adult Smoking. Am. J Public Health. 2008 Feb.: 98(2): 304-9.