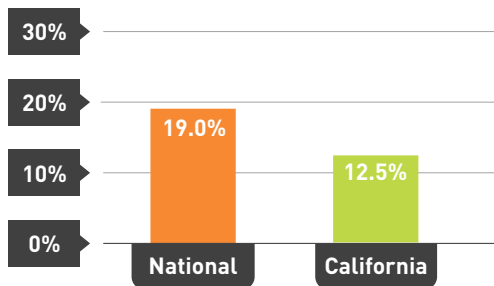


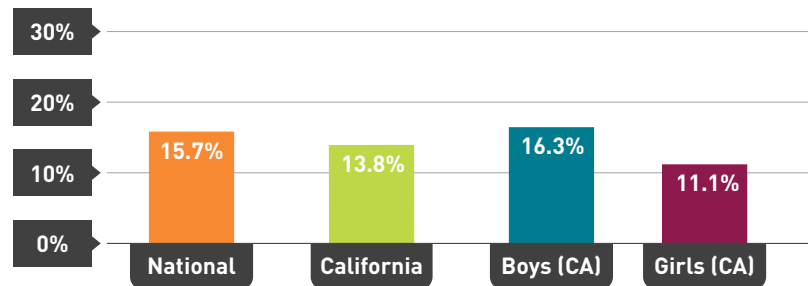
CALIFORNIA + TOBACCO

CIGARETTE USE

% of Adults Who Currently Smoke ¹



% of High School Students Who Currently Smoke ²



OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in California was 1.6% in 2013. 3.6% of adult current cigarette smokers in California were also current smokeless tobacco users in 2013.³
- In 2013, 3.5% of adults in California used e-cigarettes on at least one day in the past 30 days. 7.6% of young adults in California, ages 19 to 29, used e-cigarettes on at least one day in the past 30 days.⁴
- In 2010, 3.9% of high school students in California used chewing tobacco, snuff, or dip on at least one day in the past 30 days.⁵
- In 2013, a total of 2.1% of high school students in Los Angeles, 2.8% of high school students in San Bernadino, 2.9% of high school students in San Diego, and 3.3% of high school students in San Francisco used smokeless tobacco on at least one day in the past 30 days.²
- In 2013, 6.3% of 7th graders, 12.4% of 9th graders, and 14.3% of 11th graders in California used e-cigarettes on at least one day in the past 30 days.⁶

ECONOMICS OF TOBACCO USE AND TOBACCO CONTROL

- In FY2015, California allocated \$58.9 million in state funds to tobacco prevention, which is 16.9% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.⁷

- The health care costs in California, directly caused by smoking, amount to \$13.29 billion annually.⁷
- State and federal Medicaid costs for California total \$3.58 billion annually for smoking-caused health care.⁸
- California loses \$10.35 billion in productivity each year due to smoking.⁸
- California received an estimated \$1.559 billion in tobacco settlement payments and taxes in FY2015.⁷

STATE TOBACCO LAWS^{9,10}

EXCISE TAX

- The state tax increased to \$.087 per pack of cigarettes in January 1999. All other products are taxed 33.02% of the manufacturers list price.

CLEAN INDOOR AIR ORDINANCES

- Smoking is prohibited in government workplaces, childcare facilities, and public schools.
- Smoking restrictions are required in private workplaces, restaurants, bars, casinos (tribal establishments are exempt), retail stores, and recreational facilities.

YOUTH ACCESS LAWS

- The minimum age requirement for the purchase of tobacco products is 18, and penalties exist for both minors and merchants who violate this law.
- Establishments are required to post signs stating that sales to minors are prohibited.
- The sale of bidis is prohibited, except in establishments where minors are prohibited to enter by law.
- The sale to minors of electronic cigarettes is prohibited.

TOBACCO LAWS

- In 2015, San Francisco banned the use of smokeless tobacco in stadiums, sports arenas, and playing fields.
- In 2014, San Francisco prohibited the use electronic cigarettes wherever smoking of tobacco products is prohibited by law.
- In 2013, San Francisco prohibited smoking at public events on City & County property that require City & County permits, except for neighborhood block parties. Event organizers are required to notify the public that the event is smoke-free.

CESSATION STATISTICS AND BENEFITS

- The CDC estimates that 54.4% of adult smokers in California tried to quit smoking in 2013.¹¹
- California Medicaid program covers all seven recommended cessation medications. Coverage of group, phone, and individual counseling varies by health plan.^{10*}

- The limitation of coverage for the state's Medicaid program varies by health plan^{10**}
- California's state quitline invests \$2.03 per smoker; the national average investment per smoker is \$3.65.⁷
- California does not have a private insurance mandate provision for cessation.¹⁰

REFERENCES

- ¹ CDC, Behavioral Risk Factor Surveillance System, 2013
 - ² CDC, Youth Risk Behavior Surveillance System, 2013
 - ³ CDC, State-Specific Prevalence of Cigarette Smoking and Smokeless Tobacco Use Among Adults—MMWR, United States, 2011-2013
 - ⁴ California Department of Public Health, Behavioral Risk Factor Surveillance System, 2012-2013
 - ⁵ California Department of Public Health, California Student Tobacco Survey, 2010
 - ⁶ California Healthy Kids Survey, 2013
 - ⁷ Campaign for Tobacco-Free Kids, Broken Promises to Our Children: a State-by-State Look at the 1998 State Tobacco Settlement 16 Years Later FY2015, 2014
 - ⁸ Campaign for Tobacco-Free Kids, State Tobacco-Related Costs and Revenues, 2014
 - ⁹ American Lung Association, SLATI State Reports, 2015
 - ¹⁰ American Lung Association, State of Tobacco Control, 2015
 - ¹¹ CDC, Behavioral Risk Factor Surveillance System, State Tobacco Activities Tracking and Evaluation System, 2013
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* The seven recommended cessation medications are NRT Gum, NRT Patch, NRT Nasal Spray, NRT Inhaler, NRT Lozenge, Varenicline (Chantix), and Bupropion (Zyban).

Fiore MC, Jaen CR, Baker TB, Bailey WC, Benowitz NL, Curry SJ, 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.

** Barriers could include: Duration limits, annual limits on quit attempts, prior authorization requirements, co-payments, requiring using one cessation treatment before using another and/or requiring counseling to get medications.