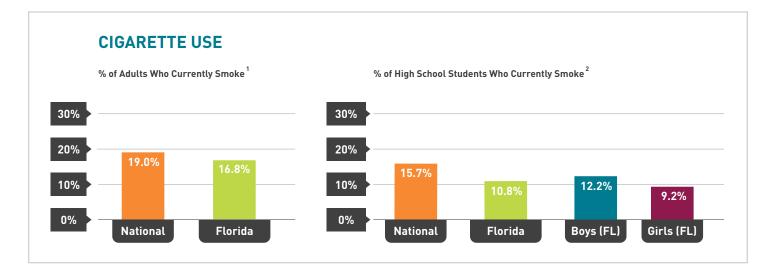




FLORIDA + TOBACCO



OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in Florida was 2.6% in 2013. 5.2% of adult current cigarette smokers in Florida were also current smokeless tobacco users in 2013. 3
- In 2009, 7.1% of high school students in Florida used chewing tobacco, snuff, or dip on at least one day in the past 30 days. Nationally, 8.9% of high school students used smokeless tobacco on at least one day in the past 30 days.²
- In 2009, 14.4% of high school students in Florida smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days. Nationally, 14.0% of high school students smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days.²
- In 2014, 4.0% of middle school students and 10.8% of high school students in Florida used an electronic cigarette on at least one day in the past 30 days. 4

ECONOMICS OF TOBACCO USE AND TOBACCO CONTROL

- In FY2015, Florida allocated \$66.6 million in state funds to tobacco prevention, which is 34.3% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.
- The health care costs in Florida, directly caused by smoking, amount to \$8.64 billion annually.

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- State and federal Medicaid costs for Florida total \$1.514 billion annually for smoking-caused health care.⁶
- Florida loses \$8.32 billion in productivity each year due to smoking.⁶
- Florida received an estimated \$1.549 billion in tobacco settlement payments and taxes in FY2015.⁵
- Florida is not part of the Master Settlement Agreement (MSA).

STATE TOBACCO LAWS^{8,9}

EXCISE TAX

• The state tax increased to \$1.339 per pack of cigarettes in July 2009. The tax on all other tobacco products, except cigars, is 85% of the wholesale price.

CLEAN INDOOR AIR ORDINANCES

- Smoking is prohibited in childcare facilities, government workplaces, health care facilities, restaurants, schools, casinos (tribal establishments are exempt), retail stores, recreational facilities, and private workplaces.
- Stand-alone bars that make no more than 10% of their gross revenue from the sales of food are exempt.

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.
- Products must be under supervision of sales clerk(s) or in sight of the sales clerk.
- The sale to minors of nicotine dispensing devices, including electronic cigarettes, is prohibited.

CESSATION STATISTICS AND BENEFITS

- ullet The CDC estimates that 52.5% of adult smokers in Florida tried to quit smoking in 2013. 10
- The state Medicaid program's coverage of the seven recommended cessation medications varies by health plan. Coverage of individual, group, and phone counseling varies by health plan. 9*
- The state Medicaid program's barriers to coverage vary by health plan. 9**
- Florida's state quitline invests \$4.37 per smoker; the national average investment per smoker is \$3.65.
- Florida does not have a private insurance mandate provision.

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REFERENCES

- ¹ CDC, Behavioral Risk Factor Surveillance System, 2013
- ² CDC, Youth Risk Behavior Surveillance System, 2011
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- ⁴ Florida Youth Tobacco Survey, 2014
- ⁵ National Association of Attorneys General, Tobacco Project, http://www.naag.org/tobacco.php. Accessed on: April 17, 2013
- ⁶ Campaign for Tobacco-Free Kids, State Tobacco-Related Costs and Revenues, 2014
- 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 American Lung Association, SLATI State Reports, 2015
- ⁹ American Lung Association, State of Tobacco Control, 2015
- CDC, Behavioral Risk Factor Surveillance System, State Tobacco Activities Tracking and Evaluation System, 2013
- * The seven recommended cessation medications are NRT Gum, NRT Patch, NRT Nasal Spray, NRT Inhaler, NRT Lozenge, Varenicline (Chantix), and Buproprion (Zyban).
 - Fiore MC, Jaen CR, Baker TB, Bailiey 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.

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