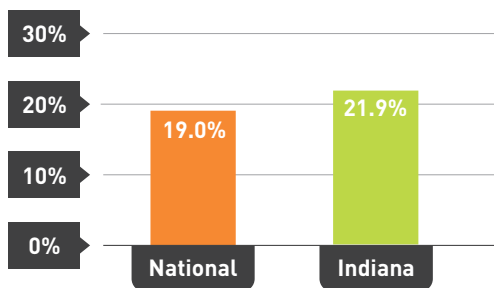


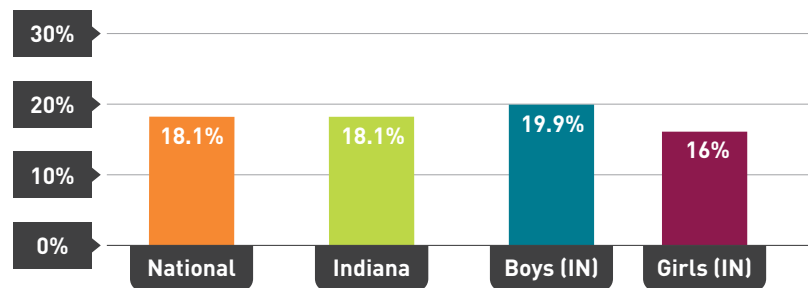
# INDIANA + TOBACCO

## CIGARETTE USE

% of Adults Who Currently Smoke<sup>1</sup>



% of High School Students Who Currently Smoke<sup>2</sup>



## OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in Indiana was 4.9% in 2013. 7.8% of adult current cigarette smokers in Indiana were also current smokeless tobacco users in 2013.<sup>3</sup>
- In 2015, 4.6% of adults in Indiana used e-cigarettes on at least one day in the past 30 days.<sup>4</sup>
- In 2011, 8.2% of high school students in Indiana used chewing tobacco, snuff, or dip on at least one day in the past 30 days. Nationally, 7.7% of high school students used smokeless tobacco on at least one day in the past 30 days.<sup>2</sup>
- In 2011, 14.6% of high school students in Indiana smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days. Nationally, 13.1% of high school students smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days.<sup>2</sup>
- In 2012, 3.5% of high school students and 1.5% of middle school students in Indiana used e-cigarettes on at least one day in the past 30 days.<sup>5</sup>

## ECONOMICS OF TOBACCO USE AND TOBACCO CONTROL

- In FY2015, Indiana allocated \$5.8 million in state funds to tobacco prevention, which is 7.8% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.<sup>6</sup>
- The health care costs in Indiana, directly caused by smoking, amount to \$2.93 billion annually.<sup>6</sup>

- State and federal Medicaid costs for Indiana total \$589.7 million annually for smoking-caused health care.<sup>7</sup>
- Indiana loses \$3.17 billion in productivity each year due to smoking.<sup>7</sup>
- Indiana received an estimated \$565 million in tobacco settlement payments and taxes in FY2015.<sup>6</sup>

## STATE TOBACCO LAWS<sup>8,10</sup>

### EXCISE TAX

- The state tax increased to \$0.995 per pack of cigarettes in July 2007. Moist snuff is taxed \$0.40 per ounce. All other tobacco products are taxed 24% of the wholesale price.

### CLEAN INDOOR AIR ORDINANCES

- Smoking is prohibited in all government workplaces, private workplaces, schools, childcare facilities, restaurants, retail stores, healthcare facilities, and recreational facilities.
- Smoking is allowed in bars and taverns that do not employ persons under age 18 and do not allow persons under age 21 to enter.

### 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.
- Establishments must not use self-service displays unless the establishment's sole purpose is to sell cigarettes and prohibits entry to those less than 18 years of age.
- The sale to minors of electronic cigarettes and possession of electronic cigarettes by minors is prohibited.

## CESSATION STATISTICS AND BENEFITS

- The CDC estimates that 49.7% of adult smokers in Indiana tried to quit smoking in 2013.<sup>9</sup>
- Indiana's Medicaid program covers all seven recommended cessation, and individual, group, and phone counseling.<sup>10\*</sup>
- The state Medicaid program's barriers to coverage include limits on duration, annual limits on quit attempts, minimal co-payments, use of some medications required before able to use others, and use of counseling required to get medications.<sup>10</sup>
- Indiana's state quitline invests \$1.28 per smoker; the national average investment per smoker is \$3.65.<sup>10</sup>
- Indiana does not have a private insurance mandate provision for cessation.<sup>10</sup>

## REFERENCES

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- <sup>1</sup> CDC, Behavioral Risk Factor Surveillance System, 2013
  - <sup>2</sup> CDC, Youth Risk Behavior Surveillance System, 2013
  - <sup>3</sup> CDC, State-Specific Prevalence of Cigarette Smoking and Smokeless Tobacco Use Among Adults—MMWR, United States, 2011-2013
  - <sup>4</sup> Indiana Adult Tobacco Survey, 2015
  - <sup>5</sup> Indiana Youth Tobacco Survey, 2013
  - <sup>6</sup> 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
  - <sup>7</sup> Campaign for Tobacco-Free Kids, State Tobacco-Related Costs and Revenues, 2014
  - <sup>8</sup> American Lung Association, SLATI State Reports, 2015
  - <sup>9</sup> CDC, Behavioral Risk Factor Surveillance System, State Tobacco Activities Tracking and Evaluation System, 2013
  - <sup>10</sup> American Lung Association, State of Tobacco Control, 2015
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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.