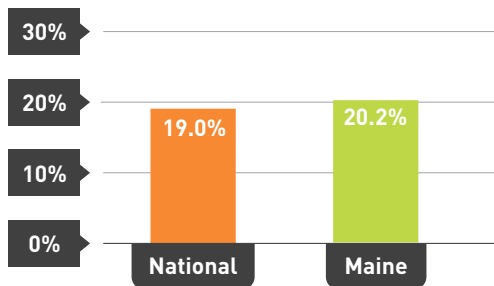


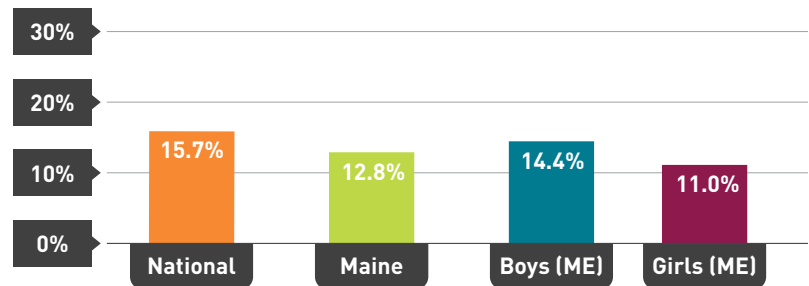
MAINE + TOBACCO

CIGARETTE USE

% of Adults Who Currently Smoke¹



% of High School Students Who Currently Smoke²



OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in Maine was 2.0% in 2013. 3.9% of adult current cigarette smokers in Maine were also current smokeless tobacco users in 2013.³
- In 2013, 6.0% of high school students in Maine used chewing tobacco, snuff, or dip on at least one day in the past 30 days. Nationally, 8.8% of high school students used smokeless tobacco on at least one day in the past 30 days.²
- In 2013, 10.6% of high school students in Maine smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days. Nationally, 12.6% of high school students smoked cigars, cigarillos, or little cigars on at least one day in the past 30 days.²

ECONOMICS OF TOBACCO USE AND TOBACCO CONTROL

- In FY2015, Maine allocated \$8.2 million in state funds to tobacco prevention, which is 51.4% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.⁴
- The health care costs in Maine, directly caused by smoking, amount to \$811 million annually.⁴
- State and federal Medicaid costs for Maine total \$261.5 million annually for smoking-caused health care.⁵
- Maine loses \$647 million in productivity each year due to smoking.⁵

- Maine received an estimated \$186 million in tobacco settlement payments and taxes in FY2015.⁴

STATE TOBACCO LAWS^{6,7}

EXCISE TAX

- The state tax increased to \$2.00 per pack of cigarettes in September 2005. Smokeless tobacco, including chewing tobacco and snuff, is taxed a minimum of \$2.02 per ounce. Cigars, pipe tobacco, and other smoking tobacco are taxed 20% of the wholesale price.

CLEAN INDOOR AIR ORDINANCES

- Smoking is prohibited in all childcare facilities, schools, government workplaces, restaurants, bars, private workplaces, retail stores, recreational facilities, and health care facilities.
- Smoking is restricted in casinos (tribal establishments 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.

CESSATION STATISTICS AND BENEFITS

- The CDC estimates that 51.2% of adult smokers in Maine tried to quit smoking in 2013.⁸
- Maine's Medicaid program covers all seven recommended cessation medications, and individual and group counseling.^{7*}
- The state Medicaid program's barriers to coverage include prior authorization requirements for some medications and requirements to use some medications before using others.⁷
- Maine's state quitline invests \$12.66 per smoker; the national average investment per smoker is \$3.65.⁷
- Maine does not have a private insurance mandate provision for cessation.⁷

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 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
 - ⁵ Campaign for Tobacco-Free Kids, State Tobacco-Related Costs and Revenues, 2014
 - ⁶ American Lung Association, SLATI State Reports, 2015
 - ⁷ American Lung Association, State of Tobacco Control, 2015
 - ⁸ 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.