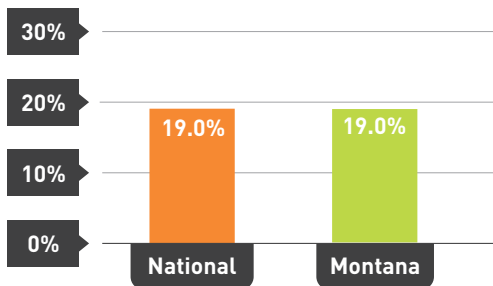


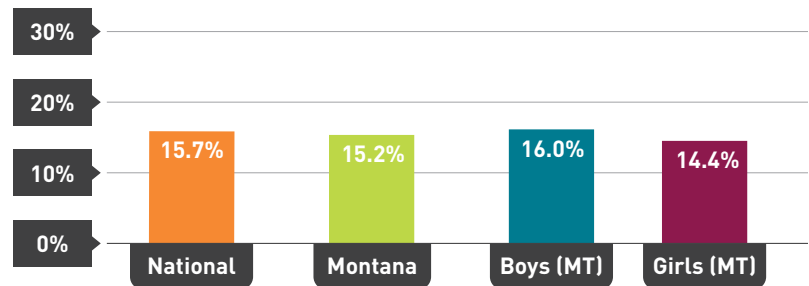
MONTANA + TOBACCO

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 Montana was 8.0% in 2013. 12.2% of adult current cigarette smokers in Montana were also current smokeless tobacco users in 2013.³
- In 2013, 1.3% of adults in Montana used an e-cigarette on at least one day in the past 30 days.⁴
- In 2013, 13.4% of high school students in Montana 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, 15.8% of high school students in Montana 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, Montana allocated \$5.4 million in state funds to tobacco prevention, which is 37% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.⁵
- The health care costs in Montana, directly caused by smoking, amount to \$440 million annually.⁵
- State and federal Medicaid costs for Montana total \$81 million annually for smoking-caused health care.⁶

- Montana loses \$368.9 million in productivity each year due to smoking.⁶
- Montana received an estimated \$115 million in tobacco settlement payments and taxes in FY2015.⁵

STATE TOBACCO LAWS^{7,8}

EXCISE TAX

- The state tax increased to \$1.70 per pack of cigarettes in January 2005. Moist snuff is taxed \$0.85 per ounce. All other tobacco products are taxed 50% of the wholesale price.

CLEAN INDOOR AIR ORDINANCES

- Smoking is prohibited in all childcare facilities, government workplaces, restaurants, bars, casinos (tribal establishments are exempt), health care facilities, schools, private workplaces, 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.

CESSATION STATISTICS AND BENEFITS

- The CDC estimates that 46.6% of adult smokers in Montana tried to quit smoking in 2013.⁹
- Montana's Medicaid program covers Nicotine Replacement Therapy (NRT) Patch, NRT Gum, NRT Lozenge, Bupropion (Zyban), Varenicline (Chantix), and individual and phone counseling.^{8*}
- The state Medicaid program's barriers to coverage include limits on duration and annual quit attempts, prior authorization requirements for some medications, and required use of certain cessation medications before being able to use others.⁸
- Montana's state quitline invests \$5.65 per smoker; the national average investment per smoker is \$3.65.⁸
- Montana does not have a private insurance mandate provision for cessation.⁸

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 Montana does not have a private insurance mandate provision for cessation.

⁵ 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

⁶ Campaign for Tobacco-Free Kids, State Tobacco-Related Costs and Revenues, 2014

⁷ American Lung Association, SLATI State Reports, 2015

⁸ American Lung Association, State of Tobacco Control, 2014

⁹ 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 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.