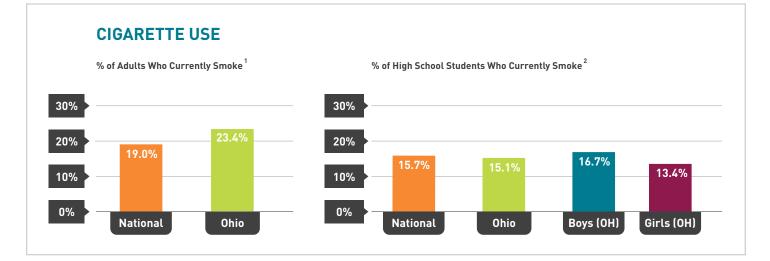




OHIO + TOBACCO



OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in Ohio was 4.2% in 2013. 6.4% of adult current cigarette smokers in Ohio were also current smokeless tobacco users in 2013.³
- In 2013, 8.6% of high school students in Ohio 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, 11.5% of high school students in Ohio 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, Ohio allocated \$7.7 million in state funds to tobacco prevention, which is 5.8% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.⁴
- The health care costs in Ohio, directly caused by smoking, amount to \$5.64 billion annually.⁴
- State and federal Medicaid costs for Ohio total \$1.725 billion annually for smoking-caused health care. $^{\rm 5}$
- Ohio loses \$5.88 billion in productivity each year due to smoking.⁵

• Ohio received an estimated \$1.095 billion in tobacco settlement payments and taxes in FY2015.⁴

STATE TOBACCO LAWS^{4,7}

EXCISE TAX

• The state tax increased to \$1.25 per pack of cigarettes in July 2005. All other tobacco products are taxed 17% of the wholesale price.

CLEAN INDOOR AIR ORDINANCES

• Smoking is prohibited in all childcare facilities, government workplaces, private workplaces, health facilities, recreational facilities, retail stores, schools, restaurants, bars, and casinos.

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 the sale or distribution of tobacco products to minors is prohibited.
- The sale to minors of alternative nicotine products, including electronic cigarettes, is prohibited.

CESSATION STATISTICS AND BENEFITS

- The CDC estimates that 53% of adult smokers in Ohio tried to quit smoking in 2013.[®]
- Ohio's Medicaid program covers all seven recommended cessation medications, and all plans cover individual and group counseling. Some plans cover phone counseling.^{7*}
- The state Medicaid program's barriers to coverage include prior authorization requirements, copayments, or use of one medication before using others.⁷
- Ohio's state quitline invests \$0.73 per smoker; the national average investment per smoker is \$3.65.7
- Ohio 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
- * 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.