





OTHER TOBACCO PRODUCT USE

- The prevalence of smokeless tobacco use among adults in South Dakota was 6.6% in 2013. 9.1% of adult current cigarette smokers in South Dakota were also current smokeless tobacco users in 2013.³
- In 2013, 11.5% of high school students in South Dakota 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

ECONOMICS OF TOBACCO USE AND TOBACCO CONTROL

- In FY2015, South Dakota allocated \$4.5 million in state funds to tobacco prevention, which is 38.5% of the Centers for Disease Control and Prevention's (CDC) Annual Spending Target.⁴
- The health care costs in South Dakota, directly caused by smoking, amount to \$373 million annually.⁴
- State and federal Medicaid costs for South Dakota total \$70.1 million annually for smoking-caused health care.
- South Dakota loses \$282.5 million in productivity each year due to smoking.
- South Dakota received an estimated \$85 million in tobacco settlement payments and taxes in

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STATE TOBACCO LAWS^{6,7}

EXCISE TAX

• The state tax increased to \$1.53 per pack of cigarettes in January 2007. All other tobacco products are taxed 35% of the wholesale price.

CLEAN INDOOR AIR ORDINANCES

Smoking is prohibited in all childcare facilities, government workplaces, casinos, health care
facilities, schools, private workplaces, restaurants, retail stores, recreational facilities, and bars
(smoking of certain tobacco products is allowed in certain bars).

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.
- The sale to minors of electronic cigarettes is prohibited.

CESSATION STATISTICS AND BENEFITS

- The CDC estimates that 48.9% of adult smokers in South Dakota tried to quit smoking in 2013.
- South Dakota's Medicaid program covers Varenicline (Chantix) and Bupropion (Zyban). Nicotine Replacement Therapy (NRT) Patch, NRT Gum, NRT Lozenge, and individual counseling are covered for pregnant women only.^{7*}
- The state Medicaid program's barriers to coverage include co-payments for brand name prescriptions.
- South Dakota's state quitline invests \$15.88 per smoker; the national average investment per smoker is \$3.65.
- South Dakota does not have a private insurance mandate provision for cessation.

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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
- 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.

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