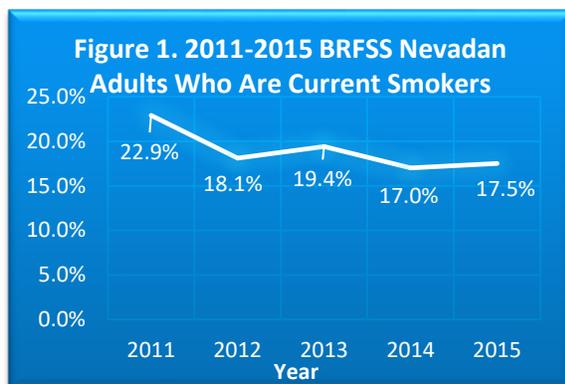




Tobacco Control in Nevada

Tobacco use is the single most preventable cause of disease, disability, and death in the United States. Approximately 4,100 deaths are attributable to smoking related disease in Nevada each year. According to the CDC, 41,000 children in Nevada will die prematurely from smoking if current smoking rates persist.ⁱ A significant portion of Nevadan adults smoke cigarettes.



TPCP Goals

- Prevent initiation among youth and young adults
- Eliminate nonsmokers' exposure to secondhand smoke
- Promote quitting among youth and young adults

To accomplish these goals, TPCP directly works with eight organizations including the local health authorities, rural coalitions, and a Quitline vendor which are awarded federal and state funding.

The Nevada Division of Public & Behavioral Health houses the TPCP the Chronic Disease

Prevention and Health Promotion (CDPHP) Section at the Bureau of Child, Family, and Community Wellness.

The TPCP is funded by the Centers for Disease Control and Prevention (CDC) and the Fund for a Healthy Nevada. The operating budget of the TPCP is approximately two million dollars per annum.

The actual cigarette tax revenue collected in Nevada was \$153 million for Fiscal Year 2016.ⁱⁱ This revenue does not fund any tobacco control activities. The CDC's recommended budget for Tobacco Prevention and Control in Nevada is \$30 million per year with recommended minimum of \$21 million per year. However, the actual state funding for Tobacco Prevention and Control in Nevada is \$1 million per year derived from the Tobacco Master Settlement Agreement (MSA) funds.

- Nevada's cigarette excise tax per pack **\$1.80**
- Best practice cigarette excise tax per pack **\$2.00+**
- Nevada's excise tax e-cigarettes **None**

How does Nevada compare to other states?

THE STATE OF UTAH (UT) is similar to Nevada in terms of both geography & population. The Utah Tobacco Control Program (UTCP) is considered its own program within the Bureau of Health Promotion at the Division of Disease Control and Prevention. The program is staffed by 12.5 FTES dedicated to Tobacco Control efforts. The UTCP receives approximately \$7 million annually from

Tax Revenue and MSA funding, meaning the state of Utah spends nearly \$2.34 per citizen on tobacco control efforts. State funding accounts for approximately 58% of the program's total funding. The priorities of the UTCP include increasing the legal age of tobacco possession to age 21, regulating e-cigarettes, and ending tobacco related disparities.

THE STATE OF MICHIGAN (MI) is a midwestern state that has a tobacco control program that is also located within the Division of Chronic Disease and Injury Control. The program receives \$1.63 million annually in state funds from general funds and tobacco excise tax revenue, equaling 16 cents per citizen spent on tobacco control efforts annually. These state dollars account for 28.6% of the total tobacco control budget. Additional funds are received from federal grants and FDA Tobacco Retail Inspections. The program is staffed by 17 FTEs dedicated to tobacco control efforts.

Currently, the program has prioritized decreasing tobacco use rates among disparately affected populations, integrating evidenced-based tobacco dependence treatment protocols into primary care and local health departments, dental care, behavioral health, and HIV care systems, creating a user-friendly, highly promoted and motivating Quitline, monitoring and enforcing the state and federal SFA law and all federal laws, keeping e-cigs and emerging products out of the hands of underage youth through public policy to regulate and tax these alternative products as tobacco products.

Utah and Michigan may be considered models for Nevada in order to achieve greater strides in

lung cancer control efforts. However, the resources and capacity of these programs must be considered. Nevada allocates far fewer resources and spends far less per citizen in attempting to decrease the lung cancer burden than comparative states.

Potential in Nevada

Annual health care costs in Nevada directly caused by smoking total \$1.08 billion. Nevada residents' state and federal tax burden from smoking-caused government expenditures average to \$541 per household. In order to continue reaching Nevadans to prevent and control tobacco use,

Though the Nevada TPCP is currently 52% state funded, The CDC recommends Nevada receive \$30 million for tobacco control efforts in the Silver Stateⁱⁱⁱ.

A fully funded program would allow for increased assistance to guide universities and colleges to establish tobacco-free policies. And further educational efforts to be made to inform stake stakeholders and decision-makers about evidence-based policies and programs to prevent initiation of tobacco use.

There is also a need to improve health systems and increase the engagement of health care providers to expand utilization of proven cessation services.

Recommended funding levels would facilitate the implementation of more tobacco-free policies to protect Nevadans in public places, at their workplaces, and within multi-unit housing from secondhand smoke exposure.

ⁱ *Campaign for Tobacco-Free Kids, Toll of Tobacco in the United States*, <http://www.tobaccofreekids.org/>

ⁱⁱ *LCB-Fiscal Analysis Division, Cigarette Tax Collections Forecast, Nevada Economic Forum held December, 6 2016.*

ⁱⁱⁱ Centers for Disease Control and Prevention. Best Practices for Comprehensive Tobacco Control Programs (2014). Retrieved from: http://www.cdc.gov/tobacco/stateandcommunity/best_practices/index.htm.