



Smokers' Desire to Quit Hits Roadblocks in State Budgets

January 23, 2012 by *Patrick A. Malone*

We're well into the new year, and by now many of your resolutions may have been consigned to the "next year" bin. But if you're trying to quit smoking, no time is better than the present. Every year nearly half a million people die prematurely from smoking-related illnesses including lung cancer, heart disease and pulmonary disease. Smoking is the No. 1 cause of preventable death in the U.S.

And let's not forget, as the Centers for Disease Control and Prevention [point out](#), that it's not just about you: Approximately 88 million nonsmokers, including more than 5 in 10 children ages 3 to 11, are exposed to secondhand smoke, a [particularly ominous reality](#). Even brief exposure can be dangerous because nonsmokers inhale many of the same poisons in cigarette smoke as smokers.

Seven in 10 smokers want to quit, and as noted in a recent story on [Kaiser Health News](#), most smokers need help. That might mean counseling, support groups or a variety of nicotine-replacement products whose efficacy [we examined last week](#).

And the FDA is [convening a panel](#) to study yet another tobacco delivery system called "dissolvables"—melt-in-your-mouth tobacco products some observers believe help people quit, and others say are a gateway to greater tobacco use that pose cancer risks of their own.

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We spend nearly \$100 billion every year on health-care problems related to tobacco, yet in this country 1 in 5 adults still smokes, a ratio that hasn't changed in years. Why?

It's been known for a century how hard it is to quit smoking. As Mark Twain said with a twinkle in his eye: "Giving up smoking is the easiest thing in the world. I know because I've done it thousands of times."

Now modern life gives us another thousand reasons why quitting tobacco takes a back seat to other government priorities. KHN noted, "Scrambling to address budget problems, states this year will spend less than 2 percent of their tobacco-tax and tobacco-settlement billions on programs to help people quit smoking or prevent them from starting, according to a recent report by a coalition of public-health organization. In the past four years, state spending on tobacco prevention and cessation has declined by 36 percent, to \$457 million."

The [State of Tobacco Control](#), a recently released report by the American Lung Association, confirmed the grim news about waning public interest in anti-tobacco measures. It graded the federal government, all 50 state governments and the District of Columbia to determine if tobacco control laws are adequately protecting citizens from the enormous toll tobacco use takes on lives and the economy.

They're not. According to the ALA

- Tobacco prevention and quit-smoking programs in several states were stung by funding cuts or were virtually eliminated, including a highly successful program in Washington State.
- Higher cigarette prices keep kids from starting to smoke, but for the first year since the Lung Association began releasing the report in 2003, no state raised its tobacco tax significantly. New Hampshire actually cut its cigarette tax by a dime per pack.

"Today's report calls out states for their failures to protect children. If states completely retreat, it will bring even more tragic human consequences across America," said Charles D. Connor, president and CEO of the ALA. "A race to the bottom is not necessary, when millions of lives are at stake."

Only four states received all passing grades, while six states received straight Fs on the report card. To see how your state rated, click [here](#).

As public funding diminishes, corporate attention is growing. Last year 2 in 3 companies with more than 200 employees offered them smoking cessation programs, and so did nearly 1 in 3 smaller companies. Nearly 1 in 4 companies with more than 20,000 employees charge smokers more for health insurance premiums

That's not necessarily a good idea, some public health authorities say, because it can encourage smokers to drop their coverage. But employers say asking them to pay more for coverage is only fair. "The cost of medical care for smokers is

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considerably higher," Helen Darling, chief executive of the National Business Group on Health told KHN. "Employers are increasingly saying that if someone costs the pool more, they should pay more."

The Affordable Care Act (ACA), the federal health law passed in 2010, expanded coverage for smoking cessation. States must provide tobacco-cessation coverage for all pregnant women in their Medicaid programs at no cost. Anti-smoking activists, of course, want much broader coverage, especially for Medicaid recipients; almost 3 in 10 of adults living below the poverty line are smokers.

The ACA also requires new health plans to screen adults for tobacco use and provide free stop-smoking interventions. Specifics, though, are wanting—advocates hope federal guidelines will provide coverage for more than a single four-session counseling module, for example, or a standard 12-week round of medication.

We're determined to keep covering the toll of nicotine addiction, the companies in whose interest it is to keep you hooked and the legislative efforts to address tobacco and health care. If you're determined to quit, here are some suggestions for getting help.

- The online stop-smoking program [Legacy](#) is a nonprofit created under the settlement between the states and the tobacco industry.
- Another free program whose scientific credentials are acknowledged by the American Cancer Society is, [EX](#), is a project of the National Alliance for Tobacco Cessation.
- A national toll-free number, [\(800\) QUIT NOW](#), routes callers to free support services including medication in the handful of states that provide it.

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