D.C. Cigarette Tax Amendment and Tobacco Use Reduction Funding

The DC Tobacco Free Coalition appreciates and is grateful for Chairman Alexander's leadership and Council's support for tobacco cessation programs this year. However, we are concerned that delaying full implementation of this Fund until 2018 will impede the Amendment's intent. Given the District's high rates of tobacco use, particularly among African-American and low-income populations, investments in cessation are necessary now, not in 2018.

As drafted, starting in FY 2015, cigarette tax revenues collected in excess of the amount projected for 2013 will go toward smoking cessation efforts, including the tobacco “quit-line.” Beginning in 2018, 10 percent of the cigarette tax revenues collected will be dedicated to smoking cessation.

Currently, cessation and prevention efforts are funded at a total of $1,362,698, a combination of federal and city funds that covers costs for staffing, some local programs, and the DC Quitline. The Center for Disease Control recommends $10.5 million in annual funding for the District for comprehensive program. The amendment’s dedicated revenues will only raise DC’s funding level to potentially 30 percent of the recommended level, and not until 2018. With the annual medical cost incurred in DC from smoking being $243 million, a 14.6 percent adult smoking rate, and a 12.6 percent youth smoking rate, tobacco use is an economic and social issue that must be addressed. Tobacco cessation and prevention programs at the CDC recommended funding level would be a cost effective solution to improve the well-being of DC residents.

The amendment is potentially problematic to the District’s overall smoking cessation goals, because:

**Funding is not guaranteed until 2018.** Cigarette tax revenues are relatively stable, unlikely to experience growth in the near term. This means that smoking cessation programs will receive little, if any funds before FY 2018. Starting in 2015, cigarette tax revenues collected in excess of the amount projected for 2013 will go toward smoking cessation efforts, including the tobacco “quit-line.” Beginning in 2018, 10 percent of the cigarette tax revenues collected will be dedicated to smoking cessation. Though a positive first step, this Act does not adequately address the need for tobacco control funding in the District.

**The 10 percent dedicated tax will only produce one-third of the CDC recommended funding level for cessation programs.** If tax revenues remain consistent, the dedicated tax would result in $3.5 million annually for tobacco cessation as compared to the recommended amount of $10.5 million. CDC recommends a multi-faceted program approach to achieve the most success in tobacco prevention and cessation. Allocating funds for state and community interventions, health communication interventions, cessation interventions, surveillance and evaluation, and administration and management costs are key in establishing long-term success.

**The DC Tobacco Free Coalition urges you to establish sustainable funding for tobacco prevention and cessation programs that meet or exceed Centers for Disease Control and Prevention (CDC) recommendations of $10.5 million annually.**