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## Tennessee Report Card

### Tobacco Prevention and Control Spending **F**

FY2010 Tobacco Control Program Funding:	\$1,490,398*
CDC Best Practices State Spending Recommendation:	\$71,700,000
Percentage of CDC Recommendation:	2.1%



Thumbs down for Tennessee for providing virtually no state dollars for its state tobacco control program this year.

\*Includes FY2010 funding from the Centers for Disease Control and Prevention

### Smokefree Air **C**

#### OVERVIEW OF STATE SMOKING RESTRICTIONS:

Government Worksites:	<b>Prohibited</b>
Private Worksites:	<b>Prohibited (non-public workplaces with three or fewer employees exempt)</b>
Schools:	<b>Prohibited</b>
Child Care Facilities:	<b>Prohibited</b>
Restaurants:	<b>Restricted*</b>
Bars:	<b>Restricted*</b>
Casinos/Gaming Establishments:	<b>N/A</b>
Retail Stores:	<b>Prohibited</b>
Recreational/Cultural Facilities:	<b>Prohibited</b>
Penalties:	<b>Yes</b>
Enforcement:	<b>Yes</b>
Preemption:	<b>Yes</b>
Citation:	TN CODE ANN. §§ 39-17-1801 to 39-17-1810 & 4-4-121

\* Smoking is allowed in restaurants and bars that do not allow persons under 21 to enter at any time.

### Cigarette Tax **F**

Tax Rate per pack of 20:	\$0.62
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### Cessation Coverage **F**

#### OVERVIEW OF STATE CESSATION COVERAGE:

##### STATE MEDICAID PROGRAM:

Medications:	<b>No coverage</b>
Counseling:	<b>No coverage</b>
Barriers to Coverage:	<b>N/A</b>

##### STATE EMPLOYEE HEALTH PLAN(S):

Medications:	<b>Covers all 7 recommended cessation medications*</b>
Counseling:	<b>Covers group counseling</b>
Barriers to Coverage:	<b>Limits on duration, annual and lifetime limit on quit attempts and co-payments required for medications</b>

##### PRIVATE INSURANCE MANDATE: NO PROVISION

Citation: See [Tennessee Tobacco Cessation Coverage](#) page for specific sources



Thumbs down for Tennessee for providing no coverage for tobacco cessation services for its Medicaid population.

\*The 7 recommended cessation medications are: NRT Gum, NRT Patch, NRT Nasal spray, NRT inhaler, NRT lozenge, Chantix and Zyban

## Tennessee Behind the Scenes



Although no major tobacco control measures were introduced during the 2009 legislative session, the American Lung Association in Tennessee, along with our partners in the Coalition for a Healthy and Responsible Tennessee (CHART), were successful once again in defending the integrity of the Non-Smoker's Protection Act, allowing no weakening amendments to the law.

Approved in 2007, the law prohibits smoking in most public places and workplaces, including almost all restaurants. It is one of the strongest laws amongst tobacco-producing states.

As in many states, the downturn in the economy contributed to a massive deficit in the state budget in 2009, causing many programs and services to be eliminated—including almost all funding for tobacco prevention and cessation programs. The American Lung Association in Tennessee and CHART view this as a temporary loss, which will be corrected as soon as an economic recovery in Tennessee is underway. However, it is very disappointing to see virtual elimination of a vital, public health program that was funded at \$10 million just two years ago.

Legislation was passed that prohibits state employee health insurance plans from putting a surcharge on employees that use tobacco products until January 2011. This was in response to a proposal by the Tennessee Benefits Administration to put such a surcharge on tobacco products on state employee health plans starting in January 2010.

The American Lung Association in Tennessee along with its partners in CHART will continue to defend the Non-Smoker's Protection Act in 2010, and will look for opportunities to strengthen the law. The Lung Association will also work to get some funding restored for tobacco prevention and cessation programs.

### Tennessee State Facts

Economic Costs Due to Smoking:	\$5,135,105,000
Adult Smoking Rate:	23.1%
High School Smoking Rate:	25.5%
Middle School Smoking Rate:	9.7%
Smoking Attributable Deaths:	9,709
Smoking Attributable Lung Cancer Deaths:	3,285
Smoking Attributable Respiratory Disease Deaths:	2,505

Adult smoking rate is taken from CDC's Behavioral Risk Factor Surveillance System, 2008 Prevalence Data. High school smoking rate is taken from the 2007 Youth Risk Behavioral Surveillance System. Middle school smoking rate is taken from the 2004 Youth Tobacco Survey.

Health impact information is taken from the Smoking Attributable Mortality, Morbidity and Economic Costs (SAMMEC) software. Smoking attributable deaths reflect average annual estimates for the period 2000-2004 and are calculated for persons aged 35 years and older. They do not take into account deaths from burns or secondhand smoke. Respiratory diseases include pneumonia, influenza, bronchitis, emphysema and chronic airway obstruction. The estimated economic impact of smoking is based on smoking-attributable health care expenditures in 2004 and the average annual productivity losses for the period 2000-2004.

To get involved with your American Lung Association, please contact:

#### American Lung Association in Tennessee

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