

Arkansas Report Card

Tobacco Prevention and Control Spending

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FY2010 Tobacco Control Program Funding:	\$23,318,992*
CDC Best Practices State Spending Recommendation:	\$36,400,000
Percentage of CDC Recommendation:	64.1%



Thumbs up for Arkansas for increasing funding for its state tobacco control program this year.

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

Smokefree Air

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OVERVIEW OF STATE SMOKING RESTRICTIONS:

Government Worksites:	Prohibited
Private Worksites:	Prohibited (non-public workplaces with three or fewer employees exempt)
Schools:	Prohibited
Child Care Facilities:	Prohibited
Restaurants:	Restricted*
Bars:	Restricted*
Casinos/Gaming Establishments:	Restricted
Retail Stores:	Prohibited
Recreational/Cultural Facilities:	Prohibited
Penalties:	Yes
Enforcement:	Yes
Preemption:	No
Citation:	AR CODE ANN. §§ 20-27-1801 et seq., 20-27-704 et seq., 22-3-220, 6-21-609 & 20-78-217

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

Cigarette Tax

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Tax Rate per pack of 20: \$1.15*



Thumbs up for Arkansas for increasing the state cigarette tax by 56 cents to \$1.15 per pack.

*On March 1, 2009 the cigarette tax increased from \$0.59 to \$1.15 per pack

Cessation Coverage

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OVERVIEW OF STATE CESSATION COVERAGE:

STATE MEDICAID PROGRAM:

Medications: **Covers NRT Gum, NRT Patch, Chantix and Zyban**

Counseling: **Covers Group and Individual counseling**

Barriers to Coverage: **Limits on duration, annual limit on quit attempts, prior authorization required and combination therapy required**

STATE EMPLOYEE HEALTH PLAN(S):

Medications: **Covers NRT Patch, Chantix and Zyban**

Counseling: **Covers individual, group, phone and online counseling**

Barriers to Coverage: **Lifetime Limit on Quit Attempts and co-payments required for some medications**

PRIVATE INSURANCE MANDATE: NO PROVISION

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

Arkansas Behind the Scenes



The American Lung Association in Arkansas continues to partner with a coalition of health advocates seeking to improve tobacco control policies in the state. By advocating for strong smokefree air laws, supporting stricter youth access policies and carrying on our efforts to increase the tobacco tax along with promoting tobacco prevention and cessation programs, the Lung Association remains determined to eliminate the devastating impact of tobacco use on the citizens of Arkansas.

During its 2009 session, the Arkansas legislature approved legislation increasing its cigarette tax by 56 cents, bringing the total tax to \$1.15 per pack. Taxes on tobacco products other than cigarettes were also increased in the same legislation. The legislature also approved legislation requiring fire-safety standards for cigarettes sold in Arkansas and changed the state's tax stamp to assist with tracking stolen, smuggled or counterfeit tobacco.

In fiscal year 2010, Master Settlement Agreement (MSA) revenues dedicated to tobacco control programs are over \$22 million, over 60 percent of the level recommended by the Centers for Disease Control and Prevention. Due to a constitutional amendment passed by Arkansas voters in 2000, about 31 percent of the MSA funds received by Arkansas are distributed to tobacco prevention and cessation programs.

July 2008 marked the two-year anniversary of Arkansas' adoption of a strong smokefree air law. The Lung Association will continue to work with our partners and stakeholders to advocate for extending the state law to include small workplaces and bars. Several campaigns are underway to do this at the local level too.

The Arkansas Department of Health (ADH) released new survey information in July 2009 showing there are nearly 100,000 fewer smokers in Arkansas since the beginning of the ADH's Tobacco Prevention and Cessation Program in 2002. Current data shows the number of adult smokers has decreased from 25.1 percent in 2002 to 22.3 percent in 2008. The ADH Tobacco Prevention and Cessation Program funded by MSA dollars works to reduce tobacco use in Arkansas through community and school prevention programs, a media and public relations campaign known as Stamp Out Smoking and cessation services for tobacco users who are looking to quit.

The Arkansas legislature generally meets biannually, but will convene in January 2010 for 30 to 45 days for a budget only session. During the 2010 session the Lung Association, along with our other health partners, will advocate to defend and preserve funding for tobacco prevention and cessation programs. The Lung Association will continue to build stronger grassroots efforts to reduce the grip of tobacco on the citizens of Arkansas.

Arkansas State Facts

Economic Costs Due to Smoking:	\$2,271,726,000
Adult Smoking Rate:	22.3%
High School Smoking Rate:	20.7%
Middle School Smoking Rate:	9.5%
Smoking Attributable Deaths:	4,915
Smoking Attributable Lung Cancer Deaths:	1,675
Smoking Attributable Respiratory Disease Deaths:	1,227

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 2007 Arkansas 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 Arkansas

P.O.Box 34043
 Little Rock, AR 72203-4043
 (402) 502-4950
www.lungusa.org/arkansas