



February 25, 2004

«Name»

«Chamber»

«Street»

«CityStateZip»

Fax: «Fax»

Dear «Salutation»:

We are writing to share with you the Partners for Effective Tobacco Policy (PARTNERS) priority issues for the second session of the 108th Congress. The PARTNERS coalition is a group of more than 60 national organizations committed to reducing death and disability caused by tobacco use. Tobacco use is the leading preventable cause of death in the United States, killing more than 400,000 people every year. More than 90 percent of all adult smokers begin while in their teens, or earlier, and more than half become regular daily smokers before they reach the age of 19. Tobacco use causes nearly one out of every three deaths from cancer, one out of every five deaths from heart disease, more than 80 percent of chronic obstructive pulmonary disease deaths, and nearly 90 percent of lung cancer cases. The cost of tobacco-caused disease is also staggering. Taxpayers pay billions of dollars each year to treat tobacco-caused disease through federally funded health programs including Medicare and Medicaid.

As a Member of Congress, you have the unique opportunity to support public policies that will help stem this epidemic. During the second session of the 108th Congress, we ask for your leadership in enacting strong policies in the areas outlined below.

Food and Drug Administration Regulatory (FDA) Authority. The PARTNERS coalition supports legislation that would grant the FDA effective authority to regulate the manufacture, distribution, and sale of tobacco products to protect the public health. FDA oversight is especially needed to crack down on illegal sales of tobacco products to children and to restrict advertising and marketing that appeal to children. The tobacco industry is aggressively marketing a new generation of products with unproven claims that they are less harmful. This continued deception of consumers makes ever more urgent the need for FDA restrictions on advertising and marketing to children.

Tobacco companies are now exempt from the most basic oversight of their products. They are not required to test additives for safety, prevent misleading or inaccurate health claims, inform consumers what is in their products, or take any other action to make their products less harmful or addictive. No other industry enjoys this degree of special protection.

Last year the efforts of a number of Members of Congress resulted in significant progress toward agreement on bipartisan FDA legislation. The PARTNERS coalition urges Congress to move quickly in the second session of the 108th Congress to enact bipartisan legislation providing FDA with meaningful and effective regulatory oversight of tobacco products. We also urge Congress to oppose any effort to enact weak, ineffective FDA legislation.

Centers for Disease Control and Prevention's Office on Smoking and Health. The CDC's Office on Smoking and Health provides considerable technical assistance to states that are using tobacco settlement dollars to develop comprehensive and effective tobacco prevention programs in addition to providing a small, yet essential, amount of federal assistance directly to state tobacco control and prevention programs. States that currently fund comprehensive programs - such as Maine and Mississippi - as well as those seeking to develop programs rely on CDC's expertise. Funds for tobacco prevention at CDC are also used to maintain a comprehensive database of smoking and health information and to conduct groundbreaking laboratory work on tobacco products. The PARTNERS coalition strongly supports a minimum level of \$130 million in FY 2005 funding for the CDC's Office on Smoking and Health.

Internet and Mail-order Tobacco Sales. We urge Congress to complete action on legislation to curtail the alarming growth of tobacco product sales over the Internet and through mail-order that make low-cost cigarettes readily available to kids and result in large state revenue losses from excise tax evasion. During the first session of the 108th Congress, the Senate unanimously passed S. 1177, Internet tobacco sales legislation supported by the public health community. The House Judiciary Committee unanimously adopted similar legislation, H.R. 2824. Concerns have been raised about the impact such legislation could have on Native American tribal sovereignty and efforts are being made to address these concerns. We encourage Congress to continue to address these concerns as the bills move through the legislative process.

It is vitally important that Congress provide effective tools for collecting state taxes on Internet and mail order tobacco product sales. Faced with increasing cigarette prices (from state cigarette tax increases and other factors), many smokers, especially kids who are especially price-sensitive, will quit or cut back, and many youth will never start smoking at all.

In addition, states lose more than \$200 million annually in uncollected tobacco taxes through Internet sales - a number that will only grow. Currently, there are more than 200 websites in the U.S. that sell tobacco products and sales of tobacco products on the Internet will account for an estimated 14 percent of the total U.S. market by 2005. Many Internet and mail-order vendors are not complying with state cigarette tax collection laws, and the U.S. General Accounting Office has reported that three-quarters of all Internet tobacco sellers explicitly say that they will not report cigarette sales to tax collection officials, thus violating Federal law.

Tobacco Use Cessation: The PARTNERS coalition urges the Congress to enact into law the recommendations of the Administration's Interagency Committee on Smoking and Health of the U.S. Department of Health and Human Services. The Committee's recommendations are based upon sound science and if adopted would result in a substantial decrease in the number of smokers. Ten action steps are recommended through a series of Federal initiatives and public-private partnership opportunities including providing cessation medication and counseling under Medicaid, Medicare and other federally-funded health care programs to all who want them, funding a national quitline offering cessation medication and counseling, a national media

campaign to help people quit tobacco use, and encouraging private health insurers to provide coverage for cessation therapies. One of the recommendations--to increase the federal cigarette tax by \$2 per pack-- would provide the revenue for tobacco use cessation initiatives.

Federally financed health care programs currently do not adequately reimburse cost-effective tobacco cessation treatments recommended by the U.S. Department of Health and Human Services such as counseling services or pharmaceuticals to treat nicotine dependence. Under Medicare, tobacco cessation products are covered only if they are prescriptions, and then only minimally. Under the Medicaid Program, coverage of cessation services is optional, with few states providing the full range of necessary services.

Secretary Tommy Thompson's announcement on February 3, 2004 of federal assistance to states in developing a national network of smoking cessation quitlines to provide access to the support and information to help them successfully quit is an important first step in recognizing the recommendations of the Interagency Committee report and the role the federal government can play. The current plans for a national network propose using existing funds within the Department of Health and Human Services to pay for the cost of expanding smoking cessation quitlines. We applaud the Secretary for his efforts to develop a national network of smoking cessation quitlines; however, we are concerned that any federal effort to create a national quitline network be sufficiently funded and does not come at the expense of either existing tobacco control programs or other government-supported efforts to help people quit smoking.

Research consistently shows that tobacco cessation saves lives, reduces tobacco-caused health care costs, and is one of the most cost-effective health interventions available. The Centers for Disease Control and Prevention (CDC) estimates that for every dollar spent on prenatal smoking cessation, up to six dollars in health care expenditures are saved.

In addition, Representatives Steven LaTourette (R-OH), Todd Platts (R-PA) and Marty Meehan (D-MA) have introduced the bi-partisan "Quit Smoking Incentive and Opportunity Act of 2003," a cessation bill endorsed by the public health community. This legislation would allow all individuals a refundable tax credit of up to \$300 per year for FDA-approved tobacco cessation products and \$100 annually for counseling. We urge Congress to enact this legislation which seeks to provide assistance to the 70 percent of American smokers who wish to quit.

Department of Justice (DOJ) Tobacco Lawsuit. The DOJ lawsuit against the major tobacco companies is scheduled to go to trial in September. Both the Justice Department and the tobacco industry believe billions of dollars are potentially recoverable, but perhaps most importantly, the possible remedies include enjoining the industry from taking actions in the future, such as marketing to our children. Congress has squelched several attempts in the past to kill the lawsuit by blocking funding. We urge Congress to continue to support vigorous prosecution of this important lawsuit to hold the tobacco industry accountable for decades of damage to public health.

Tobacco Smuggling. Tobacco product smuggling undermines public health and robs states of needed revenue. Concerns about the threat of increased smuggling of tobacco products have grown domestically as more web sites sell tobacco over the Internet and as more states look to tobacco taxes as a way to reduce tobacco use and as a source of revenue. There is increasing concern, as well, about international smuggling of tobacco products based on evidence that

approximately one-quarter of all legally exported cigarettes end up smuggled across international borders. Federal laws to stop tobacco smugglers are badly outdated and do not provide law enforcement officials with the tools they need. There is broad consensus among experts on the changes needed to bring these laws up to date. We urge Congress to address this important bipartisan law enforcement issue this year.

As organizations committed to reducing the death and disease caused by tobacco use, we stand ready to work with you to assure that this Congress adequately addresses the issues outlined above and fulfills its responsibility to protect the nation's children from a lifetime of preventable addiction and disease. Should you have any questions or would like additional information, please do not hesitate to contact any of the undersigned organizations.

Sincerely,

Action on Smoking and Health
Allergy and Asthma Network - Mothers of Asthmatics, Inc
American Academy of Family Physicians
American Academy of Otolaryngology - Head and Neck Surgery
American Academy of Pediatrics
American Cancer Society
American College of Cardiology
American College of Chest Physicians
American College of Occupational and Environmental Medicine
American College of Physicians
American College of Preventive Medicine
American Dental Association
American Heart Association
American Lung Association
American Psychological Association
American Public Health Association
American Society of Addiction Medicine
American Society of Clinical Oncology
American Thoracic Society
Association of Maternal and Child Health Programs
Association of Teachers of Preventive Medicine
Campaign for Tobacco-Free Kids
Center for Tobacco Cessation
General Board of Church and Society of the United Methodist Church
Interreligious Coalition on Smoking OR Health
Mautner Project
National Association of County & City Health Officials
National Association of Local Boards of Health
National Center for Policy Research for Women & Families
National Women's Law Center
Oncology Nursing Society
Oral Health America
Society for Public Health Education