



## STATE CIGARETTE TAX INCREASES BENEFIT LOWER-INCOME SMOKERS AND FAMILIES

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Because smoking levels are highest among people with low incomes, the cigarette companies try to argue that cigarette tax increases are regressive taxes that fall disproportionately hard on lower-income persons. But this argument turns reality upside down. Higher smoking rates among lower-income groups means they are now suffering the most from smoking and will, consequently, benefit the most from any effective new measures to reduce smoking, including increased state tobacco taxes.

The cigarette companies also say that they oppose higher cigarette taxes because they care about low-income families. But these are the same companies that have been preying on low-income and poor communities for decades. In fact, from 1998 to 2002 the cigarette companies increased the prices they charge for their cigarettes by more than \$1.00 per pack (and by more than two cents for every cent needed to cover all of their costs from the state tobacco lawsuit settlements).<sup>1</sup> The cigarette companies have no problem with levying new charges on low-income smokers when it increases their own profits. They only oppose the new charges when someone else (like a state government) gets the new revenues, instead.

The reason the cigarette companies make their regressivity arguments and oppose cigarette tax increases is simple. Cigarette tax increases reduce current smoking and stop kids from starting, thereby shrinking the companies' profits.<sup>2</sup> The companies' anti-tax arguments also fail to account for the following facts.

***Low-income smokers are much more likely to quit because of state tobacco tax increases than higher-income smokers.*** In general, lower-income smokers are less likely to quit than higher-income smokers and they and their families are more likely to continue suffering from their smoking. But state cigarette-tax increases offer one of the best ways to fight that general trend. By raising cigarette prices, state cigarette tax increases work much more powerfully to prompt lower-income smokers to quit or cutback and to stop lower-income kids from every starting than they do among higher-income smokers and youths.<sup>3</sup> For example, smokers with family incomes at or below the national median are four times as likely to quit because of cigarette price increases as those with higher incomes.<sup>4</sup> Accordingly, cigarette tax increases offer one of the best ways to help low-income families that currently suffer from direct and secondhand smoking to escape from the smoking-caused health risks, disease, and related costs – and lower-income smokers and families will be much more likely to have those harms and costs eliminated or reduced by a cigarette tax increase than similar families with higher-incomes. Those cost reductions (including reduced family expenditures on cigarettes) will also have a more powerful, beneficial impact on the financial health of the lower-income households compared to those with higher incomes.

***State tobacco-tax increases shift the overall tobacco-tax burden more toward higher-income smokers.*** Because more lower-income smokers than higher-income smokers will quit or cutback because of cigarette tax increases, any state that significantly increases its cigarette tax rate will also end up increasing the portion of the state's total cigarette tax revenues that are paid for by higher-income smokers and reduce the portion paid by lower-income smokers.

***State cigarette tax increases give many current smokers a "tax cut."*** Many current smokers (especially those with low incomes) will completely avoid the new cigarette tax by quitting and others will reduce its impact by cutting back on their smoking or switching from premium brands to cheaper cigarettes. Those that quit because of the tax increase will end up saving all the money they used to spend on cigarettes (not just the money they used to spend on cigarette taxes), and some of those who cut back or

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\* Using data from the U.S. Centers for Disease Control and Prevention (CDC), if lower-income smokers account for 60 percent of a state's cigarette tax revenues with 40 percent from higher income smokers, a tax increase that raises the price of a pack by 25 percent will reduce the number of packs smoked by lower-income persons by about 7.25 percent and reduce the number of packs smoked by higher-income smokers by 4.25 percent. After those reductions, lower-income smokers will be paying 59 percent of all state cigarette tax revenues and higher-income smokers will be paying 41 percent. Larger cigarette tax increases would have more pronounced effects. CDC, "Response to Increases in Cigarette Prices by Race/Ethnicity, Income, and Age Groups—United States, 1976-1993," *Morbidity and Mortality Weekly Report (MMWR)* 47(29):605-609, July 31, 1998, <http://www.cdc.gov/mmwr/preview/mmwrhtml/00054047.htm>.

switch to cheaper brands will also reduce their overall expenditures on cigarettes. A study in England, for example, found that low-income smokers actually reduced their overall expenditures on cigarettes in response to increased cigarette taxes.<sup>5</sup> In the United States, every pack-a-day smoker who quits in response to a state cigarette tax increase will not only avoid the tax increase but also an average of \$2,035 per year from no longer buying cigarettes (with additional savings from also stopping other smoking-related expenditures).<sup>†</sup> Other smokers who quit or cut back would obtain similar savings. As the wife of a couple that quit smoking in response to a cigarette tax increase in Kentucky stated, “It’s easier paying the bills, and groceries. You’re not pinching pennies just to see what you can and can’t buy,” she said. “With two people not smoking now, it made a big difference.”<sup>6</sup>

**Low-income voters strongly support tobacco-tax increases.** In poll after poll, lower-income Americans (along with all other Americans) strongly support higher cigarette taxes. In state polls on cigarette taxes that have collected data on income level, at least 53 percent of voters in low income families support significant cigarette tax increases.<sup>7</sup> In a nationwide poll of African Americans, more than 73 percent said that they did not think that tobacco tax increases were unfair to African Americans and more than 57 percent said that they would not be opposed to increasing cigarette taxes even if they knew that low-income smokers would be hit the hardest.<sup>8</sup>

**State tobacco-tax increases improve the health of low-income smokers and their families and significantly reduce their related costs.** Those who stop smoking in response to cigarette tax increases will greatly improve their own health, which could significantly reduce their health costs. Smokers die younger than nonsmokers but because of their higher rates of illness and disability they still have substantially higher annual and lifetime health care costs.<sup>9</sup> Nationwide, smoking-caused health care expenditures total more than \$96 billion per year, with billions being paid directly by smokers through direct health care payments and increased health insurance premiums.<sup>10</sup> Smokers who quit or cutback will also help reduce the amount of secondhand smoke their family, friends, and coworkers are exposed to – thereby producing additional health improvements and related cost savings for their families and communities.<sup>11</sup>

- Even those low-income smokers who do not quit or cutback will still benefit because the cigarette tax increase will reduce smoking among their family members and friends. The tax increase might not get them to quit, but it might stop their kids from falling victim to tobacco use.
- Smokers who do not reduce their smoking because of a cigarette tax increase will also still benefit economically, along with every other federal or state taxpayer. Right now, smoking produces a “hidden tax” that totals more than \$40 billion per year to pay for smoking-caused state and federal healthcare costs.<sup>12</sup> Smoking declines caused by state cigarette tax increases directly reduce these smoking-caused tax burdens for all taxpayers.<sup>13</sup>

**Other benefits to low-income families and communities from state tobacco-tax increases.** Low-income smokers and their communities disproportionately benefit when any of the new revenues from cigarette tax increases are directed to new programs to help people quit and to prevent kids from starting – both because smoking is more prevalent among low-income persons and because such programs are much less available to lower-income persons than to those with higher incomes.

- New revenues from state cigarette tax increases can also prevent cuts to government programs that provide critically needed services to low-income families or communities.
- An April 2002 research study actually found that, overall, both Canadian and U.S. smokers are significantly happier when cigarette excise taxes increase, perhaps because the increases help them quit or cutback or increase their resolve to do so soon.<sup>14</sup>

As an Australian economic study of the impact of a 25 percent decrease in smoking concluded:

*“In households where smoking ceased, substantial benefits would accrue in terms of the weekly funds released for alternative purchases. Added to these would be the benefits of improved health and life*

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<sup>†</sup> The average price of a pack of cigarettes is about \$5.58 per pack, multiplying that by 365 days in a year produces cigarette expenditures of \$2,036.70 per year. For state-specific information on how much smokers can save by quitting or cutting back, see TFK factsheet, *Immediate Smoker Savings from Quitting in Each State*, <http://www.tobaccofreekids.org/research/factsheets/pdf/0337.pdf>.

expectancy resulting from smoking cessation. Relative to household income, the greatest benefits, in terms of additional available expenditure, would accrue to the poorest 20 per cent of households.”<sup>15</sup>

Given the strong support for cigarette tax increases among low-income persons and the enormous benefits those tax increases bring to low-income smokers, families, and communities, the big cigarette companies' efforts to “protect” low-income communities from higher cigarette taxes is not only patronizing and misdirected but also hostile to lower-income interests. The cigarette companies' regressivity argument should be seen for exactly what it really is: a self-serving smokescreen designed to keep smoking levels up and protect cigarette company profits.

**Campaign for Tobacco-Free Kids, June 7, 2011 / Ann Boonn**

**More information on state tobacco-tax increases is available at**

**[http://www.tobaccofreekids.org/facts issues/fact sheets/policies/tax/us state local/](http://www.tobaccofreekids.org/facts_issues/fact_sheets/policies/tax/us_state_local/)**.

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<sup>1</sup> Campaign for Tobacco-Free Kids (TFK) Factsheets, *U.S. Cigarette Companies' Settlement-Related Price Hikes Excessive*, [www.tobaccofreekids.org/research/factsheets/pdf/0071.pdf](http://www.tobaccofreekids.org/research/factsheets/pdf/0071.pdf), and *Cigarette Tax Increases vs. Cigarette Company Price Increases (1993-2007)*, <http://www.tobaccofreekids.org/research/factsheets/pdf/0210.pdf>.

<sup>2</sup> TFK Factsheet, *Raising Cigarette Taxes Reduces Smoking, Especially Among Kids (and the Cigarette Companies Know It)*, [www.tobaccofreekids.org/research/factsheets/pdf/0146.pdf](http://www.tobaccofreekids.org/research/factsheets/pdf/0146.pdf).

<sup>3</sup> See, e.g., U.S. Centers for Disease Control and Prevention (CDC), “Responses to Cigarette Prices By Race/Ethnicity, Income, and Age Groups—United States 1976-1993,” *Morbidity and Mortality Weekly Report (MMWR)* 47(29):605-609, July 31, 1998, <http://www.cdc.gov/mmwr/preview/mmwrhtml/00054047.htm>. Chaloupka, FJ & Pacula, R, *An Examination of Gender and Race Differences in Youth Smoking Responsiveness to Price and Tobacco Control Policies*, National Bureau of Economic Research, Working Paper 6541, April 1998. Farrelly, M, et al., “Responses to Increases in Cigarette Prices by Socioeconomic Characteristics,” *Southern Economic Journal* 68(1):156-165, 2001.

<sup>4</sup> CDC, “Responses to Cigarette Prices By Race/Ethnicity, Income, and Age Groups—United States 1976-1993,” *MMWR* 47(29):605-609, July 31, 1998, <http://www.cdc.gov/mmwr/preview/mmwrhtml/00054047.htm>

<sup>5</sup> Townsend, JL, “Cigarette Tax, Economic Welfare and Social Class Patterns of Smoking,” *Applied Economics* 19:355-365, 1987.

<sup>6</sup> Goetz, D, “Cigarette sales fall: Ky. tax increase leads some to quit,” *The Courier-Journal*, March 11, 2006.

<sup>7</sup> TFK Factsheet, *Voters in All States Support Significant Increases in State Tobacco Taxes*, <http://www.tobaccofreekids.org/research/factsheets/pdf/0309.pdf>.

<sup>8</sup> King, G, et al., “African Americans' Attitudes Toward Cigarette Excise Taxes,” *American Journal of Public Health* 93(5):828-834, May 2003.

<sup>9</sup> See, e.g., Hodgson, T, “Cigarette Smoking and Lifetime Medical Expenditures,” *The Milbank Quarterly* 70(1):81-125, 1992; Nusselder, WJ, et al., “Smoking and the Compression of Morbidity,” *Epidemiology and Community Health* 54(8):566-74, 2000.

<sup>10</sup> CDC, *Sustaining State Programs for Tobacco Control: Data Highlights 2006* [and underlying CDC data], [http://www.cdc.gov/tobacco/data\\_statistics/state\\_data/data\\_highlights/2006/index.htm](http://www.cdc.gov/tobacco/data_statistics/state_data/data_highlights/2006/index.htm).

<sup>11</sup> See, e.g., TFK Factsheet, *Secondhand Smoke*, and *Harm to Kids from Secondhand Smoke*, [www.tobaccofreekids.org/research/factsheets/index19.shtml](http://www.tobaccofreekids.org/research/factsheets/index19.shtml).

<sup>12</sup> Zhang, X, et al., “Cost of Smoking to the Medicare Program, 1993,” *Health Care Financing Review* 20(4):1-19, Summer 1999.

<sup>13</sup> Smokers have higher lifetime healthcare costs than nonsmokers, despite living shorter lives (Hodgson, 1992 & Nusselder, 2000). Roughly half of all smoking-caused health care costs are paid by the federal or states' governments, with much of that spent on treating low-income smokers through the Medicaid program (Zhang, X, et al., “Cost of Smoking to the Medicare Program, 1993,” *Health Care Financing Review* 20(4):1-19, Summer 1999; CDC, July 8, 1994.) Any new government costs caused by people living longer because they no longer smoke would be more than offset by the health care savings, other reductions to smoking-caused costs, and the work productivity increases (and related new income tax revenues) from more people living longer, healthier, smoke-free lives. For full references, citations, and more details, see TFK Factsheet, *Immortality and Inaccuracy of the Death Benefit Argument*, <http://www.tobaccofreekids.org/research/factsheets/pdf/0036.pdf>.

<sup>14</sup> Gruber, J & Mullainathan, S, “Do Cigarette Taxes Make Smokers Happier?,” National Bureau of Economic Research, Working Paper No. w8872, April 2002, <http://papers.nber.org/papers/W8872>.

<sup>15</sup> Junor, W, et al., *The Macroeconomic and Distributional Effects of Reduced Smoking Prevalence in New South Wales*, Cancer Council New South Wales, June 2004, <http://www.cancercouncil.com.au/editorial.asp?pageid=1891>.