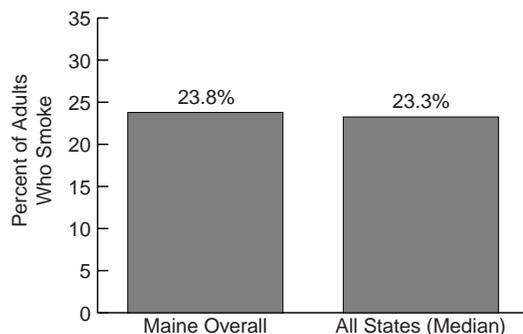


## Health Impacts

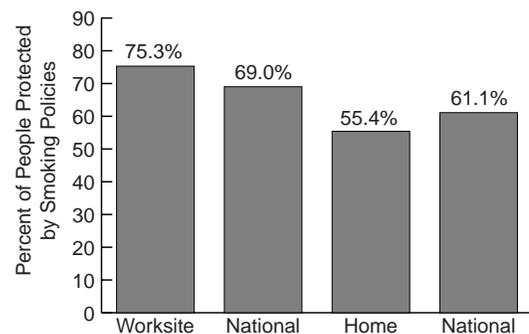
<i>SMOKING-ATTRIBUTABLE DEATHS, 1999</i>		<i>SMOKING-ATTRIBUTABLE DEATHS, 1999 DISEASE-SPECIFIC</i>		<i>YOUTH PROJECTED TO DIE FROM SMOKING, 1999-2000</i>	
Overall	2,132	State Lung Cancer	95.7/100,000	Overall	33,292
Men	1,216	All States	90.2/100,000	Projected Death	
Women	916	State CHD*	56.7/100,000	Rate	11,052/100,000
Death Rate	305.2/100,000	All States	59.7/100,000	Projected All	
All States	295.5/100,000	State COPD†	82.5/100,000	States	8,830/100,000
		All States	59.7/100,000		

\*Coronary heart disease; †chronic obstructive pulmonary disease.

## Adult Cigarette Use, 2000



## Environmental Tobacco Smoke, 1998-99



## Youth Tobacco Use

<i>GRADES 6-8</i>			<i>GRADES 9-12</i>	
	Current Cigarette Smoking	Current Any Tobacco Use	Current Cigarette Smoking	Current Any Tobacco Use
National*	11.0%	15.1%	28.0%	34.5%
ME†	11.7%	13.7%	28.6%	32.6%
Boys†	11.3%	14.4%	28.6%	35.2%
Girls†	12.3%	12.9%	28.5%	29.9%

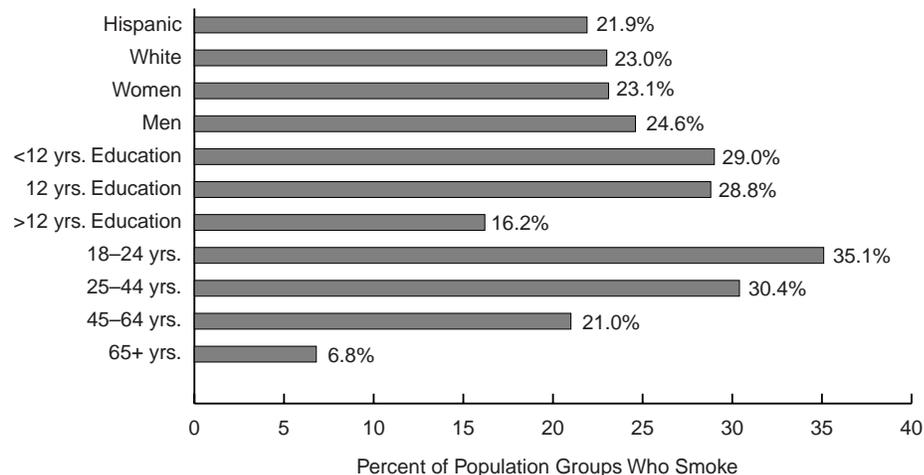
Current Cigarette Smoking = smoked cigarettes on ≥ 1 of the 30 days preceding the survey.

Current Any Tobacco Use = current use of cigarettes or smokeless tobacco or pipes or bidis or cigars or kreteks on ≥ 1 of the 30 days preceding the survey.

Sources: \*National Youth Tobacco Survey, 2000; †Maine Youth Tobacco Survey, 2000.

## Disparities Among Adult Population Groups, 2000\*

\*Calculations for racial/ethnic groups are based on combined 1999 and 2000 data.



**Economic Impacts and Investments**

Maine is investing 125% of CDC's *Best Practices* lower estimated recommended funding and 55% of the upper estimated recommended funding. Maine spent \$377 per capita on smoking-attributable direct medical expenditures. In 1998, about 16% (\$169,000,000 or \$996.71 per recipient) of all Medicaid expenditures were spent on smoking-related illnesses and diseases.

**Smoking-Attributable Direct Medical Expenditures, 1998**

Ambulatory	\$134,000,000
Hospital	\$110,000,000
Nursing Home	\$134,000,000
Prescription Drugs	\$43,000,000
Other	\$49,000,000
Annual Total	\$470,000,000
Annual Per Capita	\$377

**Smoking-Attributable Productivity Costs, 1999**

Annual Total	\$406,000,000
Annual Per Capita	\$324

**State Revenue from Tobacco Sales and Settlement**

Tobacco settlement revenue received in 2001	\$47,268,164
Gross cigarette tax revenue collected in 2000	\$77,235,000
Cigarette tax per pack was \$0.74 in 2001	
Cigarette sales were 82.9 packs per capita in 2000	

**Investment in Tobacco Control**

<i>FUNDING SOURCE</i>	<i>FY02 AMOUNT</i>	<i>FUNDING CYCLE</i>
State Appropriation—Settlement (Tobacco Only)*	\$12,655,488	7/01–6/02
State Appropriation—Excise Tax Revenue	\$0	
State Appropriation—Other	\$0	
<b>Subtotal: State Appropriation</b>	<b>\$12,655,488</b>	
Federal—CDC Office on Smoking and Health	\$1,001,691	6/01–5/02
Federal—SAMHSA	\$30,000	10/01–9/02
Non-Government Source—American Legacy Foundation	\$0	
Non-Government Source—RWJF/AMA	\$331,493	6/01–5/02
<b>Subtotal: Federal/National Sources</b>	<b>\$1,363,184</b>	
<b>FY02 Total Investment in Tobacco Control</b>		<b>\$14,018,672</b>
<b>CDC <i>Best Practices</i> Recommended Annual Total (Lower Estimate)</b>		<b>\$11,189,000</b>
<b>CDC <i>Best Practices</i> Recommended Annual Total (Upper Estimate)</b>		<b>\$25,353,000</b>
<b>FY02 Per Capita Investment in Tobacco Control</b>		<b>\$10.96</b>

\*An additional \$1,100,000 was appropriated to the Department of Health Services, Medical Care for payments to Medicaid health care providers for services that include smoking cessation and other health services.