Excessive Alcohol Use

The Prevention Status Reports (PSRs) highlight—for all 50 states and the District of Columbia—the status of public health policies and practices designed to prevent or reduce important health problems. This report focuses on excessive alcohol use and briefly describes why it is a public health problem, both for Maryland and the United States as a whole. It also provides an overview of solutions (i.e., evidence-based or expert-recommended policy and practice options) for preventing or reducing excessive alcohol use and reports the status of these solutions in Maryland.

PSR Framework
The PSRs follow a simple framework:

- Describe the public health problem using public health data
- Identify potential solutions to the problem drawn from research and expert recommendations
- Report the status of those solutions for each state and the District of Columbia

Criteria for Selection of Policies and Practices
The policies and practices included in the PSRs were selected because they

- Can be monitored using state-level data that are readily available for most states and the District of Columbia
- Meet one or more of the following criteria:
  - Supported by systematic review(s) of scientific evidence of effectiveness (e.g., The Guide to Community Preventive Services)
  - Explicitly cited in a national strategy or national action plan (e.g., Healthy People 2020)
  - Recommended by a recognized expert body, panel, organization, study, or report with an evidence-based focus (e.g., Institute of Medicine)

Ratings
The PSRs use a simple, three-level rating scale to provide a practical assessment of the status of policies and practices in each state and the District of Columbia. It is important to note that the ratings reflect the status of policies and practices and do not reflect the status of efforts by state health departments, other state agencies, or other organizations to establish or strengthen those policies and practices. Strategies for improving public health vary by individual state needs, resources, and public health priorities.

More Information
For more information about public health activities in Maryland, visit the Maryland Department of Health and Mental Hygiene website (http://dhmh.maryland.gov/). For additional resources and to view reports for other health topics, visit the CDC website (http://www.cdc.gov/stltpublichealth/psr/).

Suggested Citation
Public Health Problem

⚠️ Excessive alcohol use is responsible for about 88,000 deaths and 2.5 million years of potential life lost in the United States each year (1). Binge drinking (five or more drinks per occasion for men or four or more drinks per occasion for women) is responsible for more than half the deaths and two-thirds of the years of potential life lost resulting from excessive alcohol use (2).

Excessive drinking results in 1,318 deaths and 40,075 years of potential life lost each year in Maryland (1).

In Maryland, 18.0% of adults and 18.4% of high school students reported binge drinking in 2011 (3,4).

Excessive alcohol use cost the United States $223.5 billion, or $1.90 per drink consumed, in 2006 as a result of lost workplace productivity, healthcare expenses, and crime (5). In Maryland, excessive alcohol use cost $4.1 billion, or $1.96 per drink (6).
Policy and Practice Solutions

This report focuses on policies and practices recommended by the Community Preventive Services Task Force on the basis of scientific studies supporting their effectiveness in reducing excessive alcohol consumption and related harms (8). These policies and practices include 1) increasing alcohol excise taxes (e.g., state taxes on beer, distilled spirits, and wine); 2) having commercial host (dram shop) liability laws; and 3) regulating alcohol outlet density (8–10). Other strategies supported by scientific evidence include avoiding further privatization of retail alcohol sales and providing adults (including pregnant women) with screening and brief intervention for excessive alcohol use (11,12). For information about why certain alcohol-related indicators were selected, and for links to additional data and resources, visit the CDC website (http://www.cdc.gov/stltpublichealth/psr/alcohol/).

Status of Policy and Practice Solutions in Maryland

### State beer tax

As of January 1, 2012, Maryland’s excise tax per gallon of beer was $0.09 (13).

*Task Force on Community Preventive Services recommendation:* Increase alcohol excise taxes. Studies show that a 10% increase in the price of beer would likely reduce beer consumption by approximately 5% (8).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State beer tax</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>≥$1.00 per gallon</td>
</tr>
<tr>
<td>Yellow</td>
<td>$0.50–$0.99 per gallon</td>
</tr>
<tr>
<td>Red</td>
<td>$0.00–$0.49 per gallon</td>
</tr>
</tbody>
</table>

### State distilled spirits tax

As of January 1, 2012, Maryland’s excise tax per gallon of distilled spirits was $1.50 (14).

*Task Force on Community Preventive Services recommendation:* Increase alcohol excise taxes. Studies show that a 10% increase in the price of distilled spirits would likely reduce distilled spirits consumption by approximately 8% (8).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State distilled spirits tax</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>≥$8.00 per gallon</td>
</tr>
<tr>
<td>Yellow</td>
<td>$4.00–$7.99 per gallon</td>
</tr>
<tr>
<td>Red</td>
<td>$0.00–$3.99 per gallon</td>
</tr>
</tbody>
</table>

### State wine tax

As of January 1, 2012, Maryland’s excise tax per gallon of wine was $0.40 (15).

*Task Force on Community Preventive Services recommendation:* Increase alcohol excise taxes. Studies show that a 10% increase in the price of wine would likely reduce wine consumption by approximately 6% (8).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State wine tax</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>≥$2.00 per gallon</td>
</tr>
<tr>
<td>Yellow</td>
<td>$1.00–$1.99 per gallon</td>
</tr>
<tr>
<td>Red</td>
<td>$0.00–$0.99 per gallon</td>
</tr>
</tbody>
</table>

### Commercial host (dram shop) liability laws

As of January 1, 2011, Maryland had no commercial host liability (16,17).

*Task Force on Community Preventive Services recommendation:* Presence of commercial host (dram shop) liability for sale or service to either underage patrons or intoxicated adults. Evidence shows these laws are associated with a reduction in alcohol-related harms, including a median 6.4% reduction in deaths from motor vehicle crashes (9).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State had</th>
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<tbody>
<tr>
<td>Green</td>
<td>Commercial host liability with no major limitations</td>
</tr>
<tr>
<td>Yellow</td>
<td>Commercial host liability with major limitations</td>
</tr>
<tr>
<td>Red</td>
<td>No commercial host liability</td>
</tr>
</tbody>
</table>
Local authority to regulate alcohol outlet density

As of January 1, 2012, Maryland had exclusive state alcohol retail licensing but with local zoning authority (18).

Task Force on Community Preventive Services recommendation: Use regulatory authority (e.g., through licensing and zoning) to limit alcohol outlet density. Evidence shows greater alcohol outlet density is associated with excessive drinking and related harms, including injuries and violence (10). Local control allows communities to better address density problems (18).

<table>
<thead>
<tr>
<th>Rating</th>
<th>State had</th>
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<tbody>
<tr>
<td>Green</td>
<td>Exclusive local or joint state/local alcohol retail licensing</td>
</tr>
<tr>
<td>Yellow</td>
<td>Exclusive state alcohol retail licensing with local zoning authority or other mixed policies</td>
</tr>
<tr>
<td>Red</td>
<td>Exclusive state alcohol retail licensing</td>
</tr>
</tbody>
</table>

Simplified Rating System

A more detailed explanation of the rating system for excessive alcohol use is available at [http://www.cdc.gov/stltpublichealth/psr/alcohol/](http://www.cdc.gov/stltpublichealth/psr/alcohol/).

Green
The policy or practice is established in accordance with supporting evidence and/or expert recommendations. Higher tax levels are rated green.

Yellow
The policy or practice is established in partial accordance with supporting evidence and/or expert recommendations. Intermediate tax levels are rated yellow.

Red
The policy or practice is either absent or not established in accordance with supporting evidence and/or expert recommendations. Lower tax levels are rated red.

Indicator Definitions

State beer tax: The excise tax rate, in dollars per gallon, imposed by the state on beer containing 5% alcohol by volume. State beer excise tax does not include any additional taxes, such as those based on price rather than volume (e.g., ad valorem or sales taxes) that states may have implemented at the wholesale or retail level. State beer taxes ranged from $0.02 to $1.07 across states for which excise tax data were available.

State distilled spirits tax: The excise tax rate, in dollars per gallon, imposed by the state on distilled spirits containing 40% alcohol by volume. State distilled spirits excise tax does not include any additional taxes, such as those based on price rather than volume (e.g., ad valorem or sales taxes) that states may have implemented at the wholesale or retail level. State distilled spirits taxes ranged from $1.50 to $14.25 across states for which excise tax data were available. For states with different tax rates for distilled spirits sold off-sale (e.g., at liquor stores) and on-sale (e.g., at restaurants), the off-sale tax rate has been reported.

State wine tax: The excise tax rate, in dollars per gallon, imposed by the state on wine containing 12% alcohol by volume. State wine excise tax does not include any additional taxes, such as those based on price rather than volume (e.g., ad valorem or sales taxes) that states may have implemented at the wholesale or retail level. State wine taxes ranged from $0.11 to $2.50 across states for which excise tax data were available.

Commercial host (dram shop) liability laws: Laws that hold alcohol retailers liable for alcohol-attributable harms (e.g., injuries or deaths resulting from alcohol-related motor vehicle crashes) caused by patrons who were illegally sold or served alcohol because they were either intoxicated or under the minimum legal drinking age of 21 years at the time of sale or service. State commercial host liability laws are considered to have major limitations if they 1) cover underage patrons or intoxicated adults but not both, 2) require increased evidence for finding liability, 3) set limitations on damage awards, or 4) set restrictions on who may be sued.

Local authority to regulate alcohol outlet density: The extent to which a local government can implement zoning (land use) or licensing controls over the number of alcohol retailers (e.g., bars, restaurants, liquor stores) in its geographic area.
References

2. CDC. Alcohol-attributable deaths and years of potential life lost, United States, 2001. MMWR 2004;53:866–70.