

Public Health Benefits of a Ban on the Sale of Menthol Cigarettes in New York*

Summary Highlights

Ending the sale of menthol cigarettes in New York will reduce tobacco use initiation, lead current tobacco users to quit, improve health, save lives, and reduce health care spending, including Medicaid spending. The public health and economic benefits of these policies are substantial.

- 33,284 smokers (5.6% of menthol smokers) would quit as a result of the policy
- 7,800 premature smoking-caused deaths avoided
- Fewer youth initiating smoking
- Nearly \$283 million in long-term health care costs would be saved

The projected health care savings and public health benefits are conservative because they do not include the impact on youth who will not start to smoke as a result of this policy. Preventing New York kids from becoming addicted smokers would secure additional millions of dollars in future health care cost savings.

Public Health and Economic Burden of Tobacco Use in New York State

Tobacco use remains the leading cause of preventable death in the United States, killing more than 480,000 Americans each year, including 28,200 in New York state. Each year, 20,600 New York kids try their first cigarette; and another 1,800 additional kids become new regular, daily smokers. Flavors, including menthol, play a key role in youth use of tobacco products. Tobacco use is known to cause cancer, heart disease and respiratory diseases, among other serious health problems.

In addition to tobacco's impact on health and well-being, tobacco use imposes a considerable financial toll on the economy. The Centers for Disease Control and Prevention (CDC) estimates that in New York state, tobacco use costs an estimated \$12.07 billion in health care costs each year, including approximately \$7.12 billion in state Medicaid expenditures.

These burdens on the state highlight the need to implement evidence-based policies to reduce tobacco use.

Key Projections:

- Percent of menthol smokers who would quit: 5.6%
- Menthol cigarettes portion of total cigarettes in New York state: 30.5%
- Percent reduction in overall cigarette consumption from menthol smokers quitting: 1.7%
- Percent reduction in overall cigarette consumption from menthol smokers switching to non-menthol cigarettes or other tobacco products, policy avoidance and evasion: 10.1%

Modeling the Impact of a Comprehensive Flavor Ban Public Health

The most relevant evidence comes from Canada, where bans on the sale of menthol cigarettes were

implemented in many provinces, beginning with Nova Scotia in May 2015, and culminating with a national ban in October 2017. Research indicates that the Canadian ban on menthol cigarettes significantly increased smoking cessation among menthol smokers, with cessation rates 50 to 100 percent higher for menthol smokers than for non-menthol smokers following the implementation of the provincial and national bans. Given this range, I assume that a comprehensive flavor ban will raise the quit rate for menthol smokers by 75 percent relative to that of non-menthol smokers. Given estimates that 7.4 percent of smokers are recent quitters, this implies that almost 5.6 percent of menthol smokers would quit in the short run in response to a ban. Based on data from the 2018/19 Tobacco Use Supplement to the Current Population Survey (TUS-CPS), about one-third of smokers (33.4 percent) smoked menthol cigarettes in New York state. Based on the same TUS-CPS data, menthol smokers in New York smoke fewer cigarettes per month, on average, than non-menthol smokers – 285 cigarettes vs. 325 cigarettes, respectively. Given the prevalence of menthol smoking and lower average cigarette consumption among menthol smokers, menthol cigarettes account for approximately 30.5 percent of total cigarette consumption. Taken together, these data imply that a comprehensive flavor ban in New York state would reduce overall cigarette consumption by 1.7 percent, given increased cessation among menthol smokers.

Among menthol smokers who continue to smoke after the ban, many will switch to non-menthol cigarettes or other tobacco products, while some will continue to smoke menthol cigarettes. The Canadian data suggest that roughly 70 percent of those who continue to smoke will substitute to non-

menthol cigarettes, with the remainder purchasing menthol cigarettes from jurisdictions where they continue to be available and/or from illicit sources, or switching to other tobacco/nicotine products. These data imply a potential reduction in tax paid cigarette sales in New York due to avoidance and evasion of the ban or switching to other products of 10.5 percent. Published studies about the experience in Massachusetts, the first state to prohibit the sale of menthol cigarettes and other flavored tobacco products, found minimal or no significant impact on cross-border sales in neighboring states, while cigarette sales in Massachusetts declined considerably, showing that the policy has effectively reduced access to and use of menthol cigarettes in that state.

As described above, a comprehensive flavor ban will result in almost 5.6 percent more menthol smokers quitting smoking in the short run. Given an estimated 1.77 million adult current smokers in New York state, about one-third of whom smoke menthol cigarettes, this implies that over 33,280 adults would quit smoking in response, resulting in over 7,800 fewer deaths caused by smoking.

The existing evidence suggests that a comprehensive ban would also deter numerous young people from taking up tobacco use, adding to the public health benefits.

Finally, the reductions in tobacco use resulting from a comprehensive flavor ban would lead to significant reductions in health care spending, including Medicaid spending, with an estimated reduction in lifetime health care spending of nearly \$283 million for those induced to quit by the policy.

*For more details, see: Chaloupka FJ (2020). *Potential Effects on Tobacco Tax Revenues of a Ban on the Sale of Flavored Tobacco Products*. Chicago, IL: Tobacconomics Research Program, Institute for Health Research and Policy, University of Illinois at Chicago; www.tobacconomics.org.

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