



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Kirsten L. Johnson, Secretary

June 12, 2023

Mr. Michael J. Queensland
Senate Chief Clerk
Post Office Box 7882
Madison, WI 53707-7882

Mr. Edward A. Blazel
Assembly Chief Clerk
17 West Main Street, Room 401
Madison, WI 53703

Dear Mr. Queensland and Mr. Blazel:

The Wisconsin Department of Health Services (DHS) is pleased to submit the 2022 Annual Commercial Tobacco Use Cessation Report to the Governor and the Legislature per Wis. Stat. §255.15 (4). The Wisconsin Tobacco Prevention and Control Program (TPCP) acknowledges the cultural significance of traditional tobacco. Commercial tobacco differs from traditional tobacco, which has been used by American Indian communities for sacred purposes for generations. Unless otherwise noted, when “tobacco” is referenced within this report it refers to *commercial tobacco* not *traditional tobacco*. Commercial tobacco products are manufactured and sold by the commercial tobacco industry, including cigarettes, e-cigarettes, cigars, and chewing tobacco.

Everyone in Wisconsin deserves to live their best and healthiest life. TPCP strives to protect and promote the well-being and safety of all Wisconsinites by ensuring that the best practices in commercial tobacco prevention and control are applied equitably throughout the state. The COVID-19 pandemic has emphasized the necessity of this work as smoking-related chronic health conditions, like heart disease, diabetes, and lung disease, increase the risk for serious illness or death from COVID-19. Additionally, smoking and secondhand smoke exposure suppress immune system function and cause many to have a harder time recovering from COVID-19.

TPCP continues to invest in comprehensive, evidence-based strategies to prevent tobacco-related morbidity and mortality. Tobacco causes the preventable deaths of approximately 7,900 Wisconsinites annually. This costs an estimated \$3.09 billion in annual health care expenses, \$624.9 million in Medicaid claims, and \$5.6 billion in lost worker productivity. This amounts to about \$852 state and federal tax burden per household from smoking-caused government expenditures. Nearly 30% of Wisconsin’s cancer deaths are attributable to smoking. Nationally, smoking is deadlier than alcohol, AIDS, car crashes, illegal drugs, murders, and suicides combined.¹

Commercial tobacco companies perpetuate these staggering morbidity and mortality statistics by targeting youth with their products and promoting addiction, therefore ensuring a steady market to exploit for profit throughout their lifetime. The newest generation of addictive tobacco products emphasizes products that are sleek and modern and appeal to youth, like electronic nicotine delivery systems (ENDS), also known as e-cigarettes or vapes.

¹ Campaign for Tobacco-Free Kids, The Toll of Tobacco in Wisconsin, 2023

At the end of 2022, TPCP received the first payment, \$1,380,538.81, from the JUUL multi-state settlement after a two-year investigation into the e-cigarette manufacturer’s marketing and sales practices of JUUL. This first payment will be used in 2023 to support implementation and promotion of prevention and cessation programs focused on electronic nicotine delivery systems (ENDS) targeted to 13-23 year olds along with efforts to mitigate the impact of enforcing Wisconsin and federal law with respect to, disposable ENDS, synthetic-nicotine products, and companies that have not taken steps similar to those described in this Consent Judgement to limit access to or usage of nicotine and nicotine-synthetic products by Wisconsin residents who are under the age of 24.

Predatory marketing practices employed by the commercial tobacco industry are not new. As they have targeted specific communities (ex. communities of color, low-income communities, rural communities, LGBTQ+ communities, those with behavioral health conditions, and low educational attainment) to exploit them. With this in mind, TPCP commits to approaching all its work through a health equity lens to ensure that those most impacted by commercial tobacco are provided with assistance to achieve their full health potential.

This report outlines 2022 highlights and challenges related to Wisconsin’s efforts to prevent youth and young adult commercial tobacco use, promote addiction treatment, eliminate exposure to secondhand smoke, and eliminate tobacco-related disparities.

External Funding and Donations for Tobacco Prevention

Funder	Contract Totals
Centers for Disease Control and Prevention Cooperative Agreement	\$1,588,681.00
Food and Drug Administration (FDA) Contract	\$1,412,107.00
Department of Care and Treatment Services (DCTS) SAMSHA MOU	\$2,346,252.00

Tobacco Program Budget Breakdown

Fundee	Contract Totals
Cessation Services	
Center for Tobacco Research and Intervention (CTRI) (Quitline)	\$672,792
CTRI	\$194,000
CTRI (WiNTiP)	\$150,000
Wisconsin Women's Health Foundation - First Breath	\$300,000
WI Wins	
Chippewa County Health Department	\$4,466
Clark County Health Department	\$2,079
Eau Claire City/County Health Department	\$4,312
Fond du Lac County Health Department	\$9,471
Juneau County Health Department	\$ 8,701

WI Wins	
La Crosse County Health Department.	\$16,709
Lodi School District - Columbia County	\$3,619
Marathon County Health Department	\$13,398
Oneida County Health Department	\$11,088
Washington Ozaukee Health Department	\$2,618
Public Health Madison & Dane County	\$19,327
Polk County Health Department	\$19,943
City of Franklin Health Department	\$924
American Lung Association (Dodge, Jefferson, Waukesha, Milwaukee Suburban Counties)	\$32,802
American Lung Association (NW)	\$13,013
Arbor Place (Dunn County)	\$2,464
Community Action Healthy Living	\$40,040

WI Wins	
Family Services of Rock County	\$15,400
Hope Council	\$24,101
Jump At the Sun (City of Milwaukee)	\$13,706
Community Advocates (City of Milwaukee)	\$13,706
UMOS (City of Milwaukee)	\$6,853
Northeastern WI Area Health Ed Center (NEWAHEC)	\$9,933
Elevate - Washington County Agency	\$5,082
Youth Programs	
American Lung Association (N-O-T)	\$48,800
American Lung Association (FACT)	\$189,344
American Lung Association - (SPARK) 18-24 (OTP)	\$96,000
Department of Public Instruction	\$70,000

Media & Counter Marketing	
Knupp & Watson & Wallman	\$325,800
Community Interventions	
Eau Claire City/County Health Department	\$50,000
Fond du Lac County Health Department	\$121,000
Juneau County Health Department	\$121,000
LaCrosse County Health Department	\$121,000
Marathon County Health Department	\$121,000
Oneida County Health Department	\$121,000
Polk County Health Department	\$121,000
Public Health Madison & Dane County	\$121,000
American Lung Association (NW)	\$121,000
American Lung Association - FACT Menomonee Falls	\$ 3,500

Community Interventions	
Building a Safer Evansville - FACT	\$3,500
City of Franklin Health Department - FACT	\$3,500
Community Action Healthy Living	\$121,000
Family Services of Rock County	\$121,000
Community Advocates (City of Milwaukee)	\$125,000
Great Lakes Inter Tribal Council	\$250,000
Hope Council	\$121,000
Jump At the Sun (Suburban Milwaukee County) - FACT	\$250,000
Lodi School District (PARCC)	\$50,000
UMOS (City of Milwaukee)	\$125,000
Northeastern WI Area Health Ed Center (NEWAHEC)	\$50,000

Training & Technical Assistance	
American Lung Association	\$162,600
UW Population Health	\$300,000
Surveillance Evaluation & Research	
UW Milwaukee - S & E	\$432,000
Total Tobacco Program GPR Budget	\$5,468,591

Youth

Approximately 106,000 Wisconsin youth currently under 18 will die prematurely from smoking.² With the gaining popularity of new tobacco products like disposable or refillable e-cigarettes, nicotine pouches, heated tobacco, synthetic nicotine, and other devices, Wisconsin risks backsliding on its hard-won progress in youth tobacco prevention. E-cigarettes have been the most used tobacco product among U.S. youth since 2014.³ As the commercial tobacco product landscape changes, the implementation of comprehensive tobacco prevention and control strategies at the national, state, and local levels, coupled with FDA regulations, is critical to prevent and reduce youth access to and use of e-cigarettes.⁴

In 2022, current high school youth conventional cigarette use hit an all-time low of 1.8%, but current e-cigarette use remains at 10.5%.⁵ Although current e-cigarette use has decreased nearly 50% since 2018, youth remain at risk due to the commercial tobacco industry’s aggressive marketing of menthol and other flavored tobacco products toward young people in Wisconsin. The majority of high school aged youth agree the commercial tobacco industry tries to get people their age to use tobacco products, and 92% of high school youth reported that they would not use unflavored tobacco products.

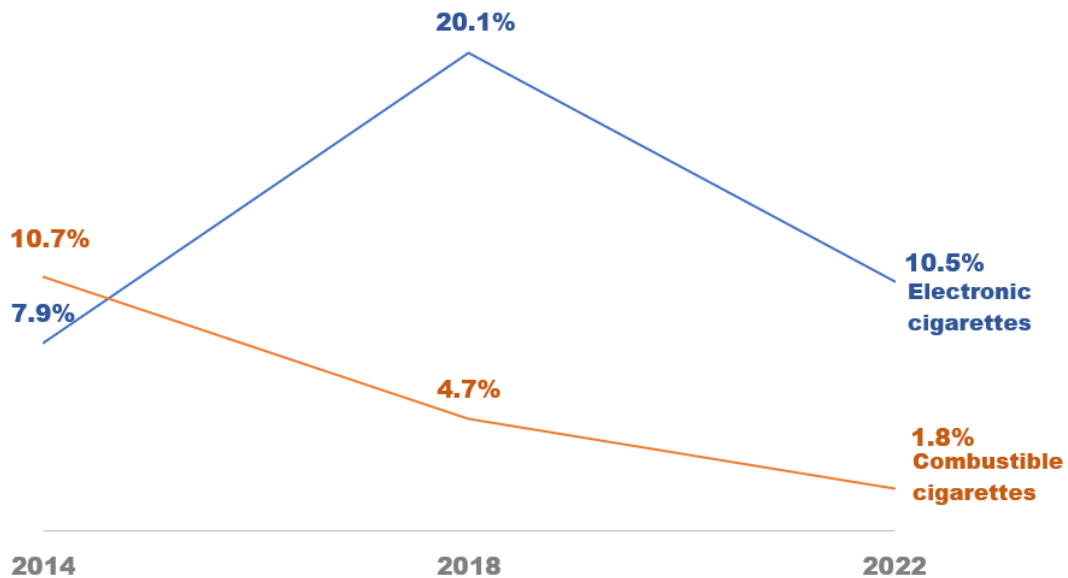
² Ibid.

³ Centers for Disease Control and Prevention, More than 2.5 Million Youth Reported E-Cigarette Use in 2022

⁴ Ibid.

⁵ Wisconsin 2022 Youth Tobacco Survey

While high school **cigarette smoking** is at an all time low, **e-cigarette use** remains much higher. Even after a nearly 50% decrease from 2018 and 2022, **e-cigarette use remains the most used tobacco product by youth.**



Schools play an important role in youth tobacco prevention efforts. As of 2022, 312 school districts (about 74%) throughout Wisconsin have comprehensive tobacco-free school policies, which also include e-cigarettes. Despite this, nearly 30% of high schoolers report having knowledge of commercial tobacco use on school property.⁶ Further, 16% of students are still exposed to secondhand smoke and 18% are exposed to secondhand aerosol while on school grounds, underscoring the importance of comprehensive clean air policies that include vaping and extend to all outdoor public spaces.⁷

Wisconsin's legal sales age for cigarettes, other tobacco products, and products containing nicotine (including e-cigarette products containing nicotine) is still 18, despite the federal age limit being raised to 21 at the end of 2019. This continues to create confusion among retailers, local leaders and the general public statewide. Current state statute prevents local municipalities from increasing the age to 21. Raising the legal tobacco purchase age to 21 is just one piece of that puzzle because we know that for each year a young person delays the onset of tobacco or nicotine use up through age 25, they significantly decrease the chance they will ever start. By implementing best practice policies that prevent smoking initiation at the source, including eliminating social connections to older tobacco purchasers, establishing clean indoor air policies, restricting flavors, and making tobacco products less affordable; Wisconsin can address the epidemic of youth tobacco use and improve the health of communities who have been disproportionately targeted by the commercial tobacco industry.

The WI Wins program educates retailers and the community on the federal sales law, however the program may only check compliance on the state law, since local law enforcement cannot enforce federal law. A media campaign was implemented to increase the awareness of the federal Tobacco 21 law among

⁶ Ibid.

⁷ Ibid.

tobacco retailers and consumers. This media included social and online ads. There were also ads at tobacco retail outlets to include gas pump toppers and outdoor posters.

Despite these efforts, underage tobacco sales remain very high in Wisconsin. According to the 2022 Synar Survey, the rate at which retailers sold tobacco products to underage customers was 11.9%, more than double the pre-pandemic rate of 5.5%.⁸ The 2022 rate fell slightly from 14.1% in 2021, the highest rate in over a decade. If the retailer violation rate continues on this trend and goes above 20%, the State could risk losing 10% of the federal Substance Use Prevention and Treatment Block Grant funding.

It is fairly common for 18-year-old high school students to provide their younger friends with tobacco products, an occurrence that becomes less common with a purchasing age of 21. About 66% of high schoolers agree that it would be easy for them to get tobacco products if they wanted.⁹ The confusion surrounding legal purchasing age in Wisconsin, and confusion over who enforces the legal purchase age of 21, allows youth continued access to tobacco products.

TPCP is partnering with the UW-Population Health Institute to evaluate its youth engagement strategy. Through quantitative and qualitative means, TPCP looks to gain valuable insights from both adults and youth as to how to meaningfully engage them and turn the curve of nicotine addiction in Wisconsin.

Tobacco is Changing

For four years DHS's *Tobacco is Changing* campaign has successfully educated and engaged parents and other trusted adults about the dangers of tobacco and nicotine use. Over the past four years the campaign has run robust statewide media campaigns to get in front of this audience and drive parents and caregivers to learn more and take action to talk to their children and teens. Informed by research, year four's focus was on disparities and mental health because young people are more stressed than ever coming out of a pandemic. Research showed that campaign messaging was still relevant and still resonated with the target audiences with a slight refresh to creative aspects. Campaign ads ran across a variety of media, including TV, digital streaming services, print, radio and social media.

The *Tobacco is Changing* campaign has now been in place since 2018. Below is a snapshot of how the campaign performed in 2022–2023.

- More than 7 million campaign impressions.
- More than 23,000 web page visits, with website page views increasing every year.
- Parents and caregivers who saw *Tobacco is Changing* ads over the first three years clicked through to the website 98% of the time.
- Pre and post-campaign surveys found the number of parents who said they'd talk to their children about e-cigarettes increased by 29% over the course of the campaign.

Young Adults

Current e-cigarette use among 18-24 year-olds rose from 17% in 2019 to 34% in 2021.¹⁰ This age group remains having the highest percentage of e-cigarette use among any other age group of adults in the state.¹¹ Another TPCP-funded program, SPARK, offers young adults, faculty, and staff on college and university campuses a platform and an opportunity to have a voice in tobacco-free campus policy change. Since SPARK's inception in 2011, the program has worked with 29 college campuses throughout

⁸ [Annual Synar Report FFY2022 Wisconsin](#)

⁹ Ibid.

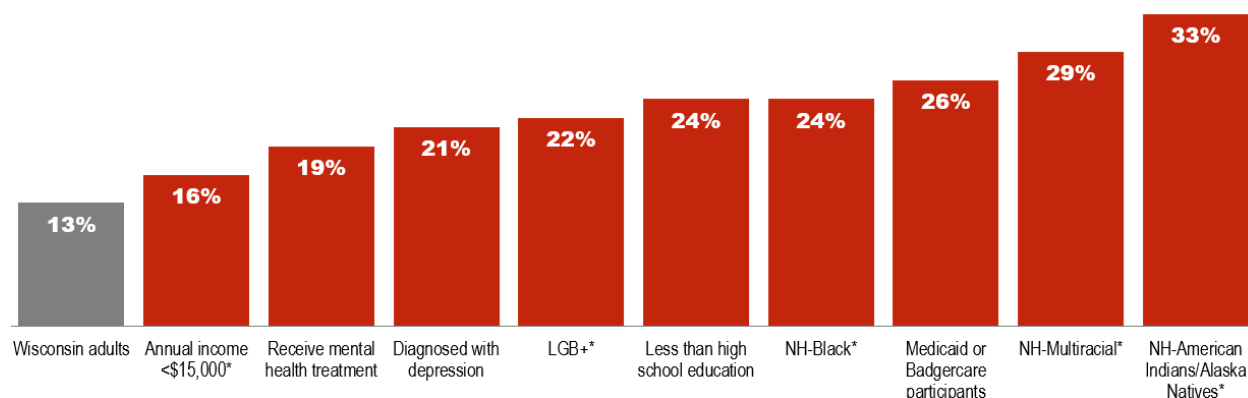
¹⁰ 2021 Wisconsin Behavioral Risk Factor Surveillance Survey (BRFSS)

¹¹ Ibid.

Wisconsin. SPARK groups have educated on the harms of secondhand smoke and other tobacco products, especially e-cigarettes, and the importance of tobacco-free campuses. Because of SPARK’s efforts, 12 Wisconsin campuses have gone tobacco-free, protecting over 80,000 students from exposure to secondhand smoke. SPARK collaborated with the Nicotine Prevention Alliance of Central Wisconsin, and the University of Wisconsin – Stevens Point at Marshfield. The collaboration resulted in the passage of a tobacco-free campus policy impacting 628 students. In addition, many other campuses are working toward or implementing similar tobacco-free policies.

Adults

- In 2021, the Wisconsin adult cigarette smoking prevalence dropped to an all-time low of 13%.¹² As of 2020, the U.S. cigarette smoking prevalence was 12.5%.



- Due to industry targeting, a lack of comprehensive tobacco-free policies, societal pressures, retail density, and other factors, specific populations have a higher smoking prevalence than the average Wisconsinite, including those who identify as¹³:
 - American Indian or Alaska Native (33%),
 - Multiracial (29%)
 - Medicaid or BadgerCare recipients (26%)
 - Black (24%)
 - Having less than a high school education (24%)
 - LGB+ (22%)
 - Being diagnosed with depression (21%)
 - Mental health treatment recipients (19%)
- Wisconsin’s smoke-free air law does not apply to sovereign Tribal land. Wisconsin is home to 11 federally recognized American Indian Tribes, one non-federally recognized Tribe, and approximately 70,000 people who identify as American Indian or Alaska Native. Due to decades of industry targeting, American Indians in Wisconsin have the highest prevalence of commercial cigarette use at 33%. This results in elevated risk of tobacco-related morbidity and mortality.¹⁴ According to data from the most recent Pregnancy Risk Assessment Monitoring System, 33% of

¹² Ibid.

¹³ Ibid.

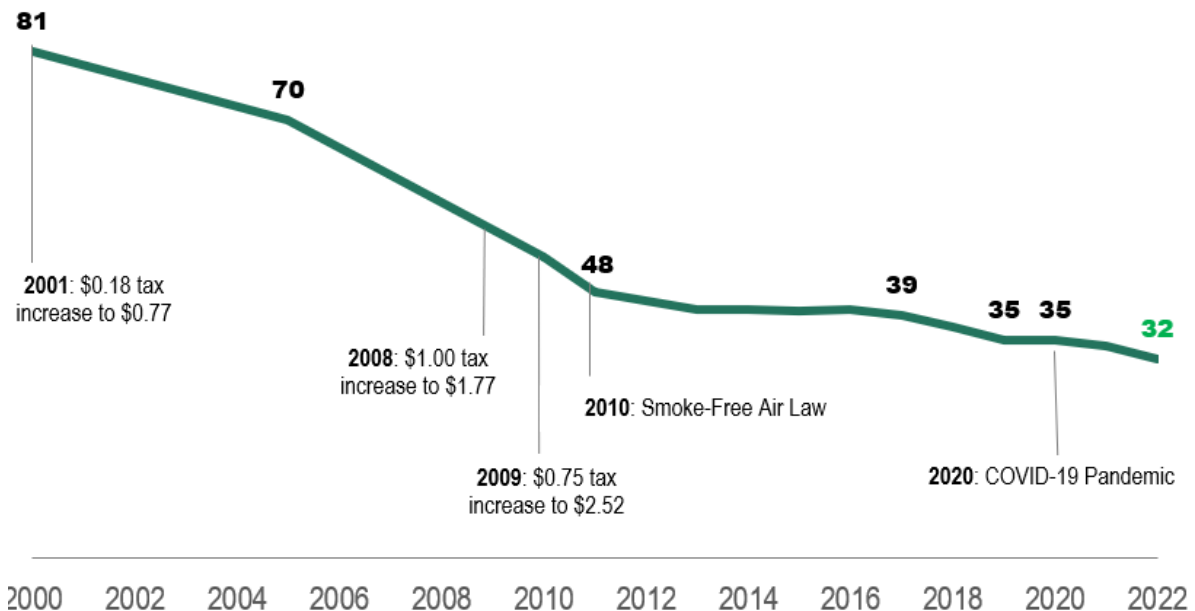
¹⁴ Ibid.

non-Hispanic American Indian or Alaska Native birthing parents reported smoking during pregnancy.¹⁵

Consumption

- Per capita cigarette consumption has declined from 80 packs in 2000 to 32.4 packs in 2022.¹⁶

Packs of **cigarettes sold per capita** have decreased over time with **increased taxes** and implementation of the **State Smoke-Free Air Law**.



- Despite this, the number of cigarettes sold in Wisconsin in 2022 (193 million packs)¹⁷ could wrap around the Earth more than six times. Cigarettes are the most littered item in the U.S. and disproportionately impact low-income neighborhoods. When not disposed of properly, these discarded commercial tobacco products make their way into the environment and pollute Wisconsin's water, air, and land with toxic chemicals.
- No Menthol Sunday, an international event, is an important opportunity to engage faith leaders and their communities in a discussion about how to improve health outcomes for African Americans. Led by the Wisconsin African American Tobacco Prevention Network, Wisconsin's No Menthol Sunday 2022 efforts were a major success and helped increase awareness about the impact of menthol and other tobacco products on the African American community. Again in 2022, the campaign engaged communities outside of Milwaukee to include Beloit, Fond du Lac, Kenosha, Madison, Racine, and Walworth County. Churches in these communities participated, reaching congregants through online sermons, Sunday school classes, church announcements,

¹⁵ Wisconsin Pregnancy Risk Assessment Monitoring System, 2022

¹⁶ [Wisconsin Department of Revenue Cigarette Tobacco Tax Report](#)

¹⁷ Ibid.

newsletters, and other activities. Some local mayors participated in the kick-off event and others recorded personal videos encouraging their constituents to support No Menthol Sunday. In total, including media and other activities, No Menthol Sunday had a reach of more than 60,000 Wisconsinites and was featured on radio interviews, newspaper and online stories, and through television news coverage.

Treating Tobacco Dependence

Wisconsin Tobacco Quit Lines

- The Wisconsin Tobacco Quit Line (1-800-Quit-Now) received 12,841 inbound calls in 2022. Total registered callers were 5,173. Callers who are trying to quit receive a two-week supply of no-cost nicotine replacement therapy (NRT) and free counseling. The University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) coordinates the program with funding and administrative support from TPCP.¹⁸
- In 2021 the new Wisconsin American Indian Quitline (AIQL) was implemented to provide free commercial tobacco cessation services. Red Venture Optum Health, the Wisconsin Tobacco Quitline Provider, collaborated with the American Indian Cancer Foundation (AICAF) to gather Tribal input on building a culturally supportive program that balances support for quitting commercial tobacco products while respecting traditional tobacco use. The University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) manages the AIQL which is accessible by dialing 1-888-7AI-QUIT. Funded by TPCP, the AIQL provides seven free phone calls with dedicated American Indian Quit Coaches who are trained to provide culturally tailored and specific interventions. Also included at no cost are 12 weeks of nicotine replacement therapy such as patches, gum, and lozenges. To increase Tribal awareness of this new service, the Wisconsin Native American Tobacco Network (WNATN) Program Director formed a workgroup that developed and implemented paid and earned media campaigns featuring cultural imagery/messaging. TPCP funded strategically placed billboards, advertisements (tv, radio, newspaper, social media, movie theater, gas pumps), promotional materials (flyer, matchbook, keychain, stress balls), and letters to the editor were designed to promote community health through traditional tobacco preservation and commercial tobacco cessation. Tribal outreach strategies also included in-person cultural events and inclusion in Tribal health services; in order to increase community-awareness and service access and build relationships and trust. In 2022, the AIQL enrollment increased to 60 people of American Indian descent.
- **First Breath**
First Breath is a free, statewide program that helps people make positive changes to their tobacco, alcohol, and other substance use during pregnancy and beyond. First Breath is operated by the Wisconsin Women's Health Foundation and funded, in part, by TPCP and other DHS programs. First Breath partners with local agencies such as OB/GYN clinics, WIC sites, PNCC programs, local health departments, Tribal health centers, and federally qualified health centers that provide direct services to perinatal populations. Providers at these agencies are trained by First Breath to use the Ask-Advise-Refer model to assess and address perinatal substance use as part of existing

¹⁸ Wisconsin Tobacco Quitline Demographic Report, 2022

perinatal care. In 2022, First Breath partnered with 277 sites and maintained 99% county coverage with at least one site in 71 of the 72 counties. These sites referred 908 individuals to First Breath in 2022, 94% were pregnant or postpartum and 6% were caregivers. Approximately half of First Breath participants were BIPOC, 86% were Medicaid members, and 66% had a diagnosed mental or behavioral health disorder.

Of these groups, 695 people enrolled in low-intensity services (texting) and 243 enrolled in intensive, one-to-one coaching services. By the end of their pregnancies, 77% of participants made positive changes to their tobacco use; 35% quit and 42% cut down. By six months postpartum 67% made positive changes; 47% quit and 20% cut down. Additionally, 75% of participants achieved fully smoke-free homes and 78% achieved zero infant exposure to tobacco smoke. Participants made positive changes to their alcohol and cannabis use during pregnancy as well. Of participants, 97% who completed a satisfaction survey would recommend First Breath to others.

Behavioral and Mental Health

- People with behavioral health conditions, including mental illness and substance use disorders, are at high risk for tobacco use and its associated morbidity and mortality. In Wisconsin, 21% of current smokers have been told, at some time during their life, that they had/have a depressive disorder, and 18% are currently taking medication or receiving treatment for some type of mental health or emotional condition.¹⁹ Of those having been told they had or have a depressive disorder, 55% have tried a cigarette and 40% have tried an e-cigarette. Of people who are currently taking medication or receiving treatment for some type of mental health or emotional condition, 56% have tried a cigarette and 40% have tried an e-cigarette.²⁰ Unfortunately, Wisconsin also has the highest prevalence of binge drinking in the nation at 26%, and it has been shown that drinking alcohol and smoking work in tandem to harm health more than the use of either one substance alone, leaving these Wisconsinites at an even higher risk for cancers.
- The Wisconsin Nicotine Treatment Integration Project (WiNTiP) is coordinated by the University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI) and is funded by and receives support from TPCP. WiNTiP works with behavioral health systems and providers across Wisconsin to adopt evidence-based tobacco prevention and control policies to help behavioral health patients and staff quit using tobacco and help these facilities make their organizations and campuses tobacco-free. WiNTiP has had great success in helping several behavioral health facilities in Wisconsin implement these policies. Notable examples include Journey Mental Health Center in Madison, Wisconsin, the Beacon House in Fond du Lac, Wisconsin, and residential substance use treatment programs under contract with Milwaukee County. In 2022, WiNTiP was involved in increasing awareness about language in the newly revised Wisconsin Department of Health Services (DHS) Administrative Code ch. DHS 75 that requires substance use facilities to formulate plans to assess and treat tobacco use and have a policy about their smoke free environment. UW-CTRI staff provided training and technical assistance to these facilities as they implemented the new standards. WiNTiP continues to promote the Bucket Approach Training, which was developed by WiNTiP and UW-CTRI staff in 2019. The Bucket

¹⁹ Ibid.

²⁰ Ibid.

Approach Training is a free on-line training that provides the skills behavioral health clinicians need to engage in interventions to effectively help their patients quit using tobacco. Through December 2022, a total of 1,398 people had enrolled in the training, including 733 people from Wisconsin.

Secondhand Smoke Exposure

- Exposure to secondhand smoke continues to be high in homes for middle school (19.4%) and high school (19.3%) students. Exposure to secondhand smoke in vehicles is even higher for middle school (20.4%) and high school (24.2%) students.²¹
- As of 2022, 65 municipalities in Wisconsin have passed local smoke-free air ordinances to include e-cigarettes.
- The number of complaints of noncompliance with the statewide smoke-free workplaces law decreased from 39 in 2021 to 33 in 2022.

Cigarette Smoking Among Medicaid Beneficiaries

- The current cigarette smoking rate for Wisconsin Medicaid members is 26% and nearly 50% have ever tried smoking.²²
- TPCP worked with the Wisconsin Department of Health Services Division of Medicaid Services and the UW-Center for Tobacco Research and Intervention to promote the Medicaid cessation benefit. The benefit is also promoted by Medicaid providers and TPCP state and local partners through advertising and promotional materials. Of note, in 2021-2022 two marketing campaigns targeted low-income neighborhoods and zip codes in Wisconsin to promote awareness and utilization of the free tobacco cessation services provided by the Wisconsin Tobacco Quit Line (800-QUIT-NOW).

Looking Ahead

TPCP is proactively strategizing how best to address the unique needs of Wisconsinites. This is continually done by partnering with local and state partners to reduce the significant impact that tobacco use has on the people of Wisconsin. It also involves incorporating tobacco prevention (best practices, data, health equity experience, etc.) into intersecting spaces.

- A five-year tobacco prevention and control movement state plan was developed with statewide partners to ensure that strategic and measurable efforts are made to decrease tobacco-related disparities related to secondhand smoke, youth prevention, and cessation and treatment services.
- TPCP funds 16 local Alliances, 13 Tobacco Prevention and Control Alliances and 3 Catalyst Alliances. The Alliances are groups of individuals and organizations that implement tobacco prevention and control best and promising practices. Each Alliance has a lead agency that serves as the fiscal agent and supports the capacity of the group to achieve contract objectives. TPC Alliances focus solely on tobacco prevention and control activities to decrease tobacco-related

²¹ Ibid.

²² Ibid.

disparities, while Catalyst Alliances integrate tobacco prevention and control activities into established public health coalitions in communities across Wisconsin to decrease tobacco-related disparities.

In addition to the above strategies, TPCP is committed to promoting best practice policy options that reduce tobacco and e-cigarette use, initiation, dependence, and disparities. These recommended policy options include:

- Restricting flavors, including menthol
- Licensing e-cigarette retailers
- Including e-cigarette in the smoke-free air law
- Moving all tobacco products behind the counter (or in a locked case)
- Making all Wisconsin schools tobacco-free, including e-cigarette use
- Making all Wisconsin state-funded college campuses (two-year, four-year, and tech colleges) tobacco-free, including e-cigarette use
- Restricting sales to those under 21
- Increasing the tax on e-cigarette
- Closing the tax loophole on little cigars
- Increasing Wisconsin's overall tax on all tobacco products

TPCP is committed to continuing all efforts mentioned throughout this report to decrease tobacco use prevalence rates in Wisconsin, reduce exposure to secondhand smoke, and educate Wisconsinites on prevention and intervention best practice initiatives.

Sincerely,



Kirsten L. Johnson
Secretary-designee