



Maryland  
Hospital Association

January 28, 2021

To: The Honorable Delores G. Kelley, Chair, Senate Finance Committee

Re: Letter of Support- Senate Bill 177- Business Regulation - Flavored Tobacco Products - Prohibition

Dear Chair Kelley:

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 177.

Under our unique Total Cost of Care Model, Maryland recently committed to reduce rates of severe maternal morbidity, uncontrolled asthma in children, and the impact of diabetes within the next three-to-five years. Accomplishing these goals will require a multi-disciplinary approach that extends beyond the four walls of the hospital and focuses on promoting the health of our communities.

Smoking is a leading cause of preventable disease, disability and death in the U.S.<sup>1</sup> Smokers are 30-40% more likely to develop Type 2 diabetes than nonsmokers, according to data from the Centers for Disease Control and Prevention.<sup>2</sup> Diabetic smokers have higher rates of heart and kidney disease. Smoking can harm youths' lung growth and function, which can make them susceptible to disease.<sup>3</sup> A recent study also found youth who vape were five to seven times more likely to contract COVID-19 than youth who did not use e-cigarettes.<sup>4</sup>

Senate Bill 177 targets one of the root causes of youth smoking by prohibiting manufacturing, shipping, importing, or selling flavored tobacco products in Maryland. Research shows 80% of youth who have smoked started with a flavored tobacco product, and most of the youth who use e-cigarettes do so because of the flavors.<sup>5,6</sup>

Youth and young adults are more at risk for long-term and long-lasting effects of nicotine exposure. Risks include nicotine addiction, mood disorders, and permanent diminished impulse control. Additionally, because the brain is still developing—and addiction is a learned

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<sup>1</sup> National Center for Chronic Disease Prevention and Health Promotion. (n.d.) [Tobacco Use](#).

<sup>2</sup> Centers for Disease Control and Prevention. (n.d.). [Smoking and Diabetes](#).

<sup>3</sup> Centers for Disease Control and Prevention. (n.d.). [Smoking and Youth](#).

<sup>4</sup> Stanford Medicine. (August 11, 2020). [Vaping Linked to COVID-19 Risk in Teens and Young Adults](#).

<sup>5</sup> Journal of the American Medical Association. (October 16, 2015). "Flavored Tobacco Product Use Among US Youth Aged 12-17 Years, 2013-2014."

<sup>6</sup> U.S. Food and Drug Administration. (March 14, 2019). [Guidance for Industry: Modifications to Compliance Policy for Certain Deemed Tobacco Products](#).

behavior—nicotine in e-cigarettes and other tobacco products can prime the adolescent brain, increasing the risk they'll use other drugs.<sup>7</sup>

Tobacco use carries significant health risks and causes economic harm by raising health care costs and reducing productivity. Smoking-related health care costs are roughly \$2.71 billion per year.<sup>8</sup>

Passing SB 177 is a step in the right direction to address this multi-faceted problem and improve the health of all Marylanders, especially our youth.

For these reasons, we urge *favorable* report.

For more information, please contact:

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<sup>7</sup> US Surgeon General.(n.d.). [Know the Risks](#).

<sup>8</sup> Campaign for Tobacco-Free Kids. (October 20, 2020). [The Toll of Tobacco in Maryland](#).