



**2025 SESSION  
POSITION PAPER**

**BILL:** HB 1318 – Alcoholic Beverages – Premium Cigar Lounge License – Establishment (Maryland Premium Cigar Lounge Act of 2025)  
**COMMITTEE:** House Economic Matters Committee  
**POSITION:** Letter of Opposition  
**BILL ANALYSIS:** HB 1318 would establish a Class C-PCL (premium cigar lounge) alcoholic beverages license for use in conjunction with a certain tobacco products retailer license; authorizing a local licensing board to issue the license; exempting a holder of the license from the Clean Indoor Air Act; and altering a certain period during which a local alcoholic beverages license may not be issued to a certain tobaccoconist.

**POSITION RATIONALE:** The Maryland Association of County Health Officers (MACHO) submits this letter to express our strong opposition to HB 1318, which would allow cigar lounges to obtain an alcohol license. While MACHO recognizes the importance of supporting the economic potential of local businesses, the proposed bill would directly violate the Clean Indoor Air Act (CIAA) which prohibits the use of tobacco, cannabis, and electronic smoking devices in indoor public spaces except for very limited exceptions. Tobacco-related harms also carry significant economic impact. According to the Centers for Disease Control, smoking-related healthcare costs in Maryland exceed \$2.7 billion dollars annually.<sup>1</sup>

The negative impacts of secondhand smoke are well documented. Since 1964, approximately 2.5 million people who did not smoke died from health problems caused by secondhand smoke exposure.<sup>2</sup> Among adults who do not smoke, secondhand smoke causes nearly 34,000 premature deaths from heart disease in the US each year.<sup>2</sup> In addition to heart disease, adults who do not smoke have a 20- 30% higher risk of developing lung cancer or suffering a stroke.<sup>2</sup> Non-smoking workers who are regularly exposed to tobacco smoke are 50% more likely to develop lung cancer.<sup>3</sup>

Since its passage in 2007, the CIAA has helped to limit Maryland residents' exposure to secondhand smoke and reduced the risk of harm associated with tobacco use. The proposed bill would effectively gut the protections created by the CIAA and put employees and consumers at risk for tobacco-related harms. In addition to the public health impact, enforcement of the bill would largely fall to local health departments, adding an additional burden to agencies that are already significantly resource limited.

For these reasons, MACHO respectfully submits this letter of opposition. For more information, please contact Ruth Maiorana, MACHO Executive Director at [rmaiora1@jhu.edu](mailto:rmaiora1@jhu.edu) or 410-937-1433. *This communication reflects the position of MACHO.*

**References:**

1. U.S. Centers for Disease Control. Best Practices for Comprehensive Tobacco Control Programs-2014. <https://www.cdc.gov/tobacco/stateandcommunity/guides/pdfs/2014/states/maryland.pdf>
2. U.S. Dept of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. U.S. Dept of Health and Human Services; 2014.
3. Akter, S., Islam, M. R., Rahman, M. M., Rouyard, T., Nsashiyi, R. S., Hossain, F., & Nakamura, R. (2023). Evaluation of population-level tobacco control interventions and health outcomes: a systematic review and meta-analysis. JAMA Network Open, 6(7), e2322341-e2322341.