

## **Tobacco Control: A Cornerstone of Prevention, Wellness, and Revenue**

*By: Alesha Osburn, American Lung Association (RT) and Ashley Lyerly, Health Action Partnership (LT)*



Tobacco use is the leading cause of preventable death in the United States, imposing a terrible toll on the health, lives and dollars of families, businesses and government. Tobacco kills more than 400,000 people annually,

which is more than HIV/AIDS, alcohol use, car accidents, illegal drugs, murders and suicides combined. Tobacco costs the U.S. more than \$193 billion in health care costs and lost productivity each year. While the United States has made major progress against tobacco use, one in five Americans still smoke, and about 4,000 kids try their first cigarette each day. Tobacco use is an epidemic, not only for Alabama, but for the country and is being addressed proactively across the nation through effective public health interventions.

The United States Department of Health and Human Services, the Center for Disease Control and Prevention, United States Surgeon General, and the World Health Organization endorse evidence-based tobacco control interventions that collectively prevent and reduce tobacco use. Effective tobacco control interventions focus on (1) youth-targeted mass-media counter marketing campaigns, (2) adoption of comprehensive smoke-free laws, (3) availability of accessible, affordable tobacco cessation options, (4) raising the retail price of tobacco products through excise tax increases, and (5) restricting advertising and promotion of tobacco products.

Of the proven tobacco control interventions, significant tobacco tax increases are the fastest way to sharply reduce tobacco use and tobacco-caused disease, death, and costs. Reports by the National Academy of Sciences' Institute of Medicine and the President's Cancer Panel have strongly recommended that states increase their tobacco tax rates to effectively reduce tobacco's toll on the nation's health. Based on more than 100 studies and experience in almost every state, raising tobacco taxes is one of the most effective measures that can be implemented to reduce smoking, especially among children.

Virtually every state in the country, including Alabama, is facing severe budget shortfalls as a result of the recession. Governors and state legislators must make tough

decisions to raise revenue or cut spending programs that are important to voters, such as health care and education. Now, more than ever, increasing tobacco taxes is a Win-Win-Win proposition for states:

**A Budget Win:** Even while reducing tobacco use, higher tobacco taxes have proven to be a reliable and predictable source of significant and immediate new revenue for states. The declines in tobacco use will also produce considerable health care savings.

**A Health Win:** Increasing tobacco prices by raising tobacco taxes is one of the most effective ways to reduce tobacco use, especially among youth. States can achieve even larger public health benefits if they use some of their new tobacco tax revenue to fund tobacco prevention and cessation programs.

**A Political Win:** Large majorities of voters of all political persuasions and demographic groups support increasing tobacco taxes. In contrast, majorities of voters oppose other options for balancing budgets, such as increasing other taxes or cutting important programs.

A report sponsored by public health groups, including the Campaign for Tobacco-Free Kids and the American Lung Association estimate that raising the tobacco tax one dollar will bring in \$213.3 million in new revenue for our state. The report, "Tobacco Taxes: A Win-Win-Win for Cash-Strapped States", demonstrates the long term health care savings that will come from higher tobacco prices. Currently, Alabama is faced with \$1.49 billion in health care costs every year due to tobacco use, including \$238 million in Medicaid payments alone.

Enacting tobacco tax increases are one of the most effective ways to sharply reduce smoking, especially among youth, pregnant women, and low-income smokers. Studies have shown that for every 10 percent increase in the price of cigarettes, youth smoking declines by approximately 6.5 percent, smoking among pregnant women falls at a similar rate, and overall consumption declines by three to five percent. Similarly, increasing the tax rate on smokeless tobacco reduces its use, particularly among young males, and increasing cigar prices through tax increase reduces adult and youth cigar smoking.

*continued on page 3*

*Articles which are included in this publication are not peer-reviewed and the content of the articles is the sole-responsibility of the author. The Jefferson County Medical Society does not assume responsibility for the accuracy or content of any articles published in Pulse.*

## New Members

Nicholas A. Cataldo, M.D.	Gynecology
Francisco J. Caycedo, M.D.	Orthopedic Surgery
Susmita Dasgupta, M.D.	Psychiatry
Randall L. DeArment, D.O.	Family Practice
Vineeta A. Estes, M.D.	Obstetrics-Gynecology
Gregory M. Flippo, M.D.	Internal Medicine
Christopher J. Guion, M.D.	Diagnostic Radiology
Gregory B. Gullung, M.D.	Orthopedics
Edwin L. Kelsey, M.D.	Physical Medicine & Rehabilitation
Nina V. Kraguljac, M.D.	Resident

Cheryl M. Law, M.D.	Family Medicine
Victor E. Mendoza, M.D.	Anesthesiology
Marc Alan Michelson, M.D.	Ophthalmology
Katherine A. Moore, M.D.	Family Practice
Thomas D. Nielsen, M.D.	Internal Medicine
Rajat N. Parikh, M.D.	Gastroenterology
Ashish B. Shah, M.D.	Orthopedic Surgery
James S. Spann, Jr., M.D.	Radiology
Eric M. Zavaleta, M.D.	Ophthalmology

## Save the Date

- What:** Healthcare Trends and Update  
**When:** January 19, 2012 5:30-8:00 p.m.  
**Who:** This panel discussion is Jointly Sponsored by Warren, Averett, Kimbrough and Marino; Burr For man and the Jefferson County Medical Society  
**Where:** The Club  
**Why:** Keep on top of what is going on in healthcare and earn free CME credits at the same time.

## In Memoriam

The JCMS wants to acknowledge the recent passing of the following JCMS members:

**Bobby P. LeMay, M.D.**  
June 12, 2011

**James E. Ramsey, M.D.**  
June 21, 2011

**Rodolfo R. Allarde, M.D.**  
June 24, 2011

**Wade M. Cline, M.D.**  
June 25, 2011



*Let us be your Business Partner!*

Quality collection services customized to specific client needs.

- For "fee" collections • Pre-collects
- No collections • No fees
- Accounts Receivable Specialists
- Consulting Services • Training • Seminars

  
**HEALTHCARE**  
 FINANCIAL SERVICES, LLC

643 Lakeland East Dr. • Jackson, MS 39232  
**Robin Long • (601) 420-1242**  
 Fax (601) 933-2530



## UPCOMING EVENTS

- Oct. 17 Executive Committee Meeting – 5:30 p.m.
- Oct. 18 The Wayne Finley 811 Breakfast Club Meeting – Andrew Daniel, M.D., will speak on “Prostrate Cancer Therapy–Confusion on a Higher Plane” at 8:30 a.m. in the JCMS Board Room
- Oct. 20 MASA’s Resident Fellow Section will meet at the Jefferson County Medical Society Board Room to hear Panelists, Mary Elliott, Jim Stroud, and Ronald Levitt. The meeting begins at 6:00 p.m. and includes dinner.  
\*\*Partnered with Jefferson County Medical Society
- Nov. 1 JCMS Annual Dinner Meeting – Speaker will be Governor Robert Bentley, M.D., in the Staterooms at The Club
- Nov. 14 Foundation Trust Meeting – 5:30 p.m.
- Nov. 15 The Wayne Finley 811 Breakfast Club Meeting - Wayne Finley, MD., will speak on “Moving Genetics into Clinical Medicine” at 8:30 a.m. in the JCMS Board Room
- Nov. 21 Executive Committee Meeting – 5:30 p.m.  
Board of Directors Meeting – 6:30 p.m.
- Dec. 19 Executive Committee Meeting – 5:30 p.m.

Contact Juanita Pruitt at 933-8601 or [jpruitt@jcmsalabama.org](mailto:jpruitt@jcmsalabama.org) for more information regarding any of the above events.

### *continued from page 1*

The public health win for higher tobacco taxes will be even larger if some of the new revenue is allocated to comprehensive tobacco prevention and cessation programs in the State of Alabama. The evidence is very clear that when these programs are funded adequately and implemented according to CDC guidelines, smoking declines among both kids and adults. These programs include community-based efforts, such as Gateway’s Youth Empowerment Program, to reach kids and adult smokers, media campaigns to educate about the dangers of secondhand smoke exposure as well as smoking, and encouragement for smokers to quit through promotion of the 1-800-Quit-Now free resources, which includes assistance through medication (e.g., gum, patch, prescription drugs) and counseling for smokers who want to quit.

Tobacco control interventions are critical to addressing the epidemic of tobacco use across the United States, the State of Alabama, and Jefferson County. The State of Alabama would reap revenue and health benefits through an increase in the price of tobacco products, including a \$1 per pack increase. Substantial benefits would include new revenue and declines in youth and adult smoking with resulting savings in lives and health care dollars.

Organizations within Jefferson County and members of the Health Action Partnership are proactively engaged in tobacco prevention and control initiatives across the county. If you are interested or want more information, please contact Alesha Osburn with the American Lung Association at [aosburn@breathehealthy.org](mailto:aosburn@breathehealthy.org).

## Resident Fellows Mark Your Calendar!!!

The final meeting of the 2011 Going Alone After Residency Series will be on **Thursday, October 20, at 6 p.m.** at the Jefferson County Medical Society in Birmingham. Mary Elliott and Jim Stroud with Warren, Averett, Kimbrough & Marino, LLC, along with Ronald Levitt, PC, will present on contract negotiations for residents transitioning into full time employment.

Please RSVP to [Jennifer Hancock](mailto:Jennifer.Hancock@jcmsalabama.org) or call (334) 954-2513 for more information.

## Improving Patient Health One Prescription and Referral at a Time

Physicians are community stakeholders that are highly respected by their patients and are therefore more likely to connect with them regarding healthful behaviors like physical activity. In addition physicians have a unique opportunity to increase health awareness in patients that do not understand the connection between their health behaviors and their physical state. Lastly, they have an opportunity to encourage patients that are indeed aware of their physical state and are working through their health challenges to achieve a higher quality of life. This targeted encouragement can stimulate action.

Action for obese individuals and others suffering from chronic diseases requires that patients become consistently physically active. Physicians can initiate this action by prescribing prescriptions and making patient referrals to wellness facilities. This physical activity focused prescription and patient referral concept, which is part of the Exercise is Medicine (EIM) initiative, was developed by the American College of Sports Medicine and the American Medical Society in 2007.

EIM encourages physicians to connect with their patients to address obesity and other associated chronic conditions, in addition to writing patient physical activity prescriptions and making referrals. EIM also acknowledges and respects that today's modern health care provider has very little time for extensive exercise-counseling during a routine office visit. Therefore the following three steps were developed to assist physicians in efficiently incorporating EIM into their practices:

1. Ask – Initiate a vital sign related conversation with each patient and ask about his or her current physical activity level, utilizing the last 24 to 48 hours as a sample.
2. Write – If physical activity is low, write an EIM prescription detailing the type of exercise recommended to the patient; whether cardiovascular, strength training, flexibility or any combination thereof.
3. Refer – Refer the patient to one of four area wellness facilities currently partnering through EIM as resources for physical activity; the YMCA of Birmingham, Lakeshore Foundation, the Levite Jewish Community Center and the UAB Recreation Facility.

Not only has EIM spread globally and nationally, but also locally. In fact, during the past year, over 100 Jefferson County physicians have formally joined this chronic disease mitigation movement. These physicians have agreed to write physical activity prescriptions and make patient referrals in an effort to encourage increased activity and health awareness. Like others across the globe

## Save the Date

**Save the Date of Tuesday, November 1, 2011, for the Jefferson County Medical Society's Annual Dinner Meeting. This year's event will be held in the State-rooms at The Club.**

**The social hour will begin at 6:00 p.m. and dinner will be served at 7:00 p.m. Our speaker for the evening will be Governor Robert Bentley, M.D.**

**Watch your e-mail or mail for the invitation coming in October!! Space will be limited so make your reservations early.**

---

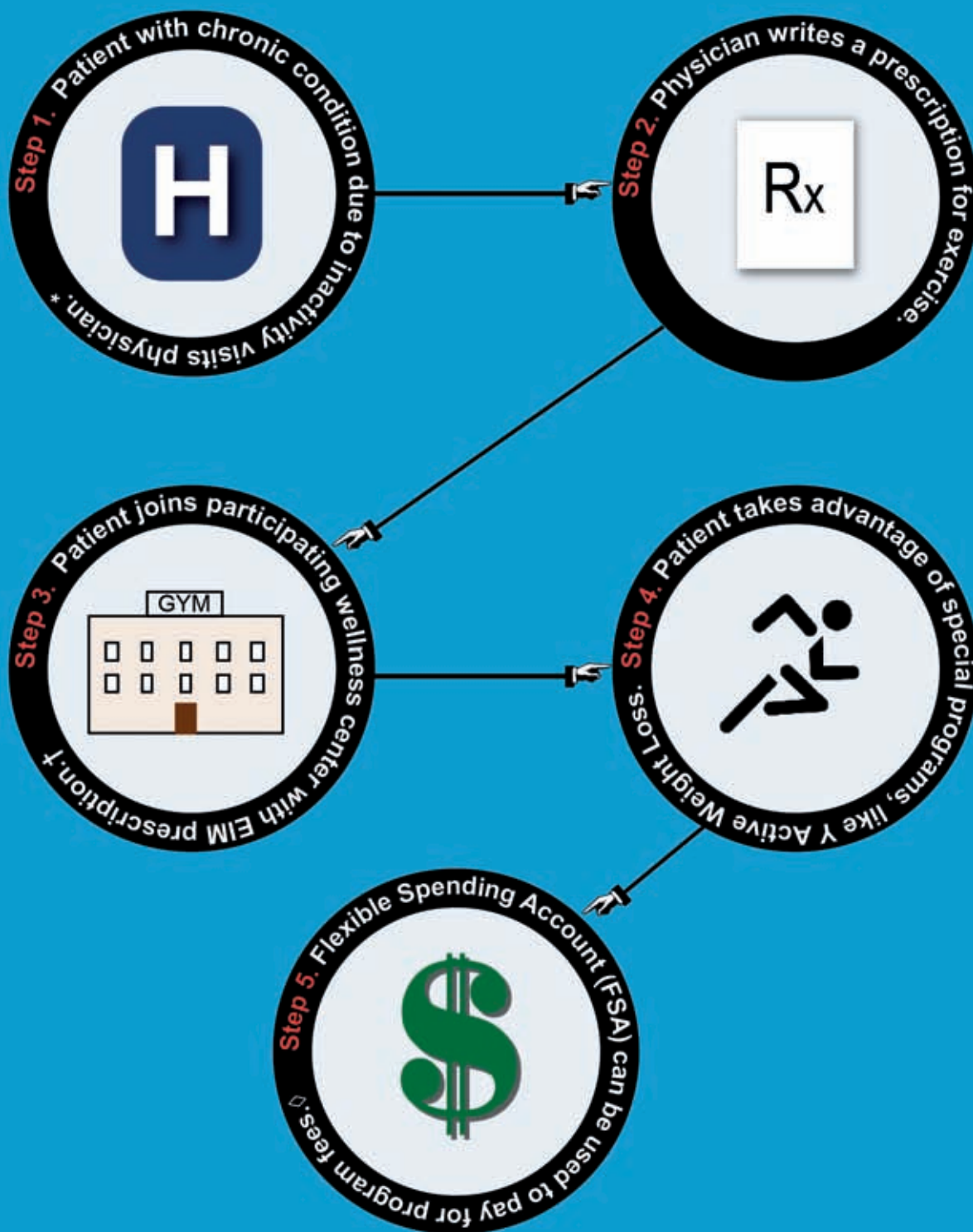
## Classified

**Office space available** in St. Vincent's POB 1 to sublease with approximately 3,468 square feet. Please contact Philip Yost with Colonial Properties for further information. (205) 262-4701

---

and throughout the 50 states, Jefferson County physicians are changing patient's health one prescription and referral at a time. For more information about Exercise is Medicine in the Jefferson County area, please contact: Felecia Young Fish at the YMCA of Birmingham 2101 Fourth Avenue North, Birmingham, AL 35203, (205) 801-7223 or [ffish@ymcabham.org](mailto:ffish@ymcabham.org)

# How Exercise is Medicine Works



\* A list of physicians who prescribe exercise can be found online at [www.ymcabham.org](http://www.ymcabham.org).

† Participating wellness centers in the Birmingham area are: YMCA of Birmingham, Lakeshore Foundation, Levite Jewish Community Center and UAB Campus Recreation Center.

♦ Ask your HR manager if you are eligible for a Flexible Spending Account (FSA).



**“As physicians, we have so many unknowns coming our way...**

**One thing I am certain about is my malpractice protection.”**

Medicine is feeling the effects of regulatory and legislative changes, increasing risk, and profitability demands—all contributing to uncertainty and lack of control.

What we do control as physicians: *our choice of a liability partner.*

I selected ProAssurance because they stand behind my good medicine. In spite of the maelstrom, I am protected, respected, and heard.

**I believe in fair treatment—and I get it.**



To learn how you can benefit from our Treated Fairly® pledge, scan the code with your smartphone camera. \*Requires a QR code reader. Download any QR code reader to your smartphone to view information.



**Professional Liability Insurance & Risk Management Services**

ProAssurance Group is rated **A (Excellent)** by A.M. Best.  
For individual company ratings, visit [www.ProAssurance.com](http://www.ProAssurance.com) • 800.282.6242

