

# CAMPAIGN For TOBACCO-FREE Kids®

## FEDERAL TAXES PAID BY STATE RESIDENTS TO COVER THE U.S. GOVERNMENT'S SMOKING-CAUSED EXPENDITURES (In Millions of Dollars)

Alabama	\$796.0
Alaska	\$104.7
Arizona	\$935.5
Arkansas	\$491.2
California	\$5,413.2
Colorado	\$831.5
Connecticut	\$604.2
Delaware	\$138.7
Washington, DC	\$112.6
Florida	\$3,030.6
Georgia	\$1,439.4
Hawaii	\$191.5
Idaho	\$229.7
Illinois	\$2,111.4
Indiana	\$1,073.2
Iowa	\$528.7
Kansas	\$483.3
Kentucky	\$733.8
Louisiana	\$763.7
Maine	\$244.3
Maryland	\$935.1
Massachusetts	\$1,112.2
Michigan	\$1,773.3
Minnesota	\$918.6
Mississippi	\$481.9
Missouri	\$1,043.1

Montana	\$167.0
Nebraska	\$308.4
Nevada	\$380.6
New Hampshire	\$225.1
New Jersey	\$1,425.6
New Mexico	\$318.7
New York	\$3,250.1
North Carolina	\$1,493.3
North Dakota	\$116.2
Ohio	\$2,045.6
Oklahoma	\$612.4
Oregon	\$643.5
Pennsylvania	\$2,192.0
Rhode Island	\$187.9
South Carolina	\$715.8
South Dakota	\$136.6
Tennessee	\$1,048.1
Texas	\$3,485.7
Utah	\$343.3
Vermont	\$110.5
Virginia	\$1,273.9
Washington	\$1,087.7
West Virginia	\$334.1
Wisconsin	\$985.8
Wyoming	\$90.8

These state-by-state totals reflect U.S. government's smoking-caused expenditures of approximately \$49.5 billion per year, which averages \$456 per U.S. household, allocated to each state based on its portion of all U.S. households. Federal programs and organizational units with smoking-caused health care costs include Medicare, Medicaid, the Veterans Affairs health care system, U.S. military hospitals, the Indian Health Service, and the Federal Employees Health Benefits Program. Non-healthcare smoking-caused U.S. Government costs include the Social Security Administration payments of more than \$2.0 billion per year in Survivors Insurance (SSSI) to support kids with one or both parents who have died from smoking.

**Sources:** CDC, "Annual Smoking-Attributable Mortality, Years of Potential Life Lose, and Economic Costs -- United States 1995-1999," *MMWR*, April 11, 2002, [www.cdc.gov/mmwr/preview/mmwrhtml/mm5114a2.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5114a2.htm); CDC, *Sustaining State Programs for Tobacco Control: Data Highlights 2004*, <http://www.cdc.gov/tobacco/datahighlights/index.htm>; See, also, U.S. General Accounting Office (GAO), "CDC's April 2002 Report on Smoking: Estimates of Selected Health Consequences of Cigarette Smoking Were Reasonable," letter to U.S. Rep. Richard Burr, July 16, 2003, <http://www.gao.gov/new.items/d03942r.pdf>; Zhang, X. et al., "Cost of Smoking to the Medicare Program, 1993," *Health Care Financing Review* 20(4): 1-19, Summer 1999; Office of Management and Budget, *The Budget for the United States Government - Fiscal Year 2000*, Table S-8, "Tobacco Legislation," page 378; Leisticow, B.N., et al., "Estimates of Smoking-Attributable Deaths at Ages 15-54, Motherless or Fatherless Youths, and Resulting Social Security Costs in the United States in 1994," *Preventive Medicine* 30: 353-60 (2000); CDC, "Medical Care Expenditures Attributable to Smoking -- United States, 1993," *MMWR* 43(26): 1-4, July 8, 1994. U.S. Bureau of the Census, [www.census.gov/population/www/estimates/housing.html](http://www.census.gov/population/www/estimates/housing.html). Economic Research Service, U.S. Department of Agriculture, Tobacco Briefing Room, [www.econ.ag.gov/Briefing/tobacco](http://www.econ.ag.gov/Briefing/tobacco).

*The Campaign for Tobacco-Free Kids, February 25, 2005 / Eric Lindblom*