



June 3, 2019

U.S. House of Representatives  
Washington, DC 20515

Dear Representative:

We are writing to express our strong support for the Tobacco to 21 Act (H.R. 2411) and the Reversing the Youth Tobacco Epidemic Act (H.R. 2339), both of which would raise the legal age for sale of tobacco products to 21. Raising the tobacco sale age to 21 is an important part of a comprehensive strategy that is needed to prevent young people from starting down a path that often leads to addiction, disease, and premature death. These bills are carefully drafted to ensure that they can be implemented quickly and effectively, and do not contain special interest provisions.

The Tobacco to 21 Act, introduced by Representative Diana DeGette (D-CO) and Representative Chris Stewart (R-UT), and the Reversing the Youth Tobacco Epidemic Act, introduced by Representative Frank Pallone (D-NJ) and Representative Donna Shalala (D-FL), will help reduce youth use of e-cigarettes, which increased by an alarming 78 percent among high school students last year, and use of other tobacco products. Tobacco use remains the leading cause of preventable death in the United States and is responsible for approximately \$170 billion in health care costs each year.

Adolescence and young adulthood are critical periods for preventing tobacco use. About 95 percent of adult smokers began smoking before they turned 21. If young people do not begin using tobacco by their early 20's, they are unlikely to ever do so. Raising the tobacco sale age to 21 will help keep tobacco out of high schools, where younger teens often obtain tobacco products from older classmates who can purchase them legally. Raising the legal age of sale to 21 will also help counter the tobacco industry's

efforts to target young people between the ages of 18 and 21, a crucial time when many move from experimenting with tobacco to regular smoking.

In 2015, the Institute of Medicine (now the National Academy of Medicine) found that raising the tobacco sale age to 21 would reduce the number of youth who start using tobacco products and, over time, reduce the smoking rate by about 12 percent and smoking-related deaths by 10 percent. This translates into 223,000 fewer premature deaths, 50,000 fewer deaths from lung cancer, and 4.2 million fewer years of life lost.

But to be effective, raising the tobacco sale age must be done right. At the state level, some bills to raise the tobacco sale age to 21 have included provisions that weaken their impact, such as exempting members of the military, and do not have effective enforcement mechanisms. Some tobacco companies have begun to support raising the tobacco sale age to 21 but have sought to add provisions that would make it harder to pass other policies that will reduce youth tobacco use, such as prohibiting local governments from restricting the sale of flavored tobacco products.

Representative Aderholt (R-AL) has introduced the Stopping Consumption of Tobacco by Teens (SCOTT) Act of 2019, (H.R. 2084) to raise the tobacco sale age to 21 but includes some provisions that raise concern. This bill includes a definition of “vapor product” that would likely include Philip Morris International’s and Altria’s new tobacco product IQOS and other heated tobacco products even though FDA currently classifies these products as cigarettes. While this definition would specifically apply to FDA’s implementation of the bill’s age restrictions for online sales, if FDA applied it more broadly IQOS and similar products could escape stronger rules that apply to cigarettes, such as prohibitions on the use of flavors and restrictions on marketing that appeals to kids.

The SCOTT Act would also take too long to fully implement the 21 tobacco sale age. It would require FDA to issue a regulation to raise the tobacco sale age to 21 within 2 years after enactment, and full implementation could take even longer if FDA does not meet this timeframe for issuing a regulation. In contrast, the Tobacco to 21 Act would take effect on January 1, 2020, and the Reversing the Youth Tobacco Epidemic Act would fully implement the 21 tobacco sale age within 180 days after enactment, even if FDA failed to issue a rule within that timeframe. Timely action is needed to address the rapid escalation in youth e-cigarette use.

Further, the SCOTT Act does not clearly limit enforcement of the 21 tobacco sale age to retailers and other commercial entities. Enforcement should focus on entities that are profiting from the sale of tobacco products, not youth who are targeted with tobacco industry marketing and who may be addicted to these products.

For these reasons, we believe the Tobacco to 21 Act and the Reversing the Youth Tobacco Epidemic Act are the best approaches for raising the tobacco sale age to 21. We urge Congress to raise the tobacco sale age to 21 and take additional steps to reduce youth use of e-cigarettes and other tobacco products.

Sincerely,

Action on Smoking & Health  
Allergy & Asthma Network  
American Academy of Family Physicians  
American Academy of Pediatrics  
American Association for Dental Research  
American Association for Respiratory Care  
American Cancer Society Cancer Action Network  
American for Nonsmokers' Rights  
American Heart Association  
American Lung Association  
American Psychological Association  
American Public Health Association  
American Society of Addiction Medicine  
American Thoracic Society  
Association of Women's Health, Obstetric and Neonatal Nurses  
Big Cities Health Coalition  
Campaign for Tobacco-Free Kids  
Cancer Prevention and Treatment Fund  
Catholic Health Association of the United States  
ClearWay Minnesota  
Community Anti-Drug Coalitions of America  
Counter Tools  
Eta Sigma Gamma - National Health Education Honorary  
Mesothelioma Applied Research Foundation  
National Association of County and City Health Officials  
National Association of Pediatric Nurse Practitioners  
National Association of School Nurses  
National Network of Public Health Institutes  
North American Quitline Consortium  
Oncology Nursing Society  
Society for Cardiovascular Angiography and Interventions  
Students Against Destructive Decisions  
The Society of State Leaders of Health and Physical Education  
The Society of Thoracic Surgeons  
Trinity Health