

LENA A. GONZALEZ
SHANNON GROVE
MELISSA HURTADO
CONNIE M. LEYVA
HOLLY J. MITCHELL
WILLIAM W. MONNING
SUSAN RUBIO

California Legislature

SENATE COMMITTEE ON HEALTH

DR. RICHARD PAN
CHAIR



STATE CAPITOL, ROOM 2191
SACRAMENTO, CA 95814
TEL (916) 651-4111
FAX (916) 266-9438

STAFF DIRECTOR
MELANIE MORENO

CONSULTANTS
TERI BOUGHTON
KIMBERLY CHEN
REYES DIAZ
VINCENT D. MARCHAND

COMMITTEE ASSISTANTS
AIMEE ANSPACH
COURTNEY SKINNER

Informational Hearing The Rise in Vaping: Health Impacts and Reducing Use February 12, 2020 – 1:30 p.m. Room 4203

The Senate Health Committee will hold an informational hearing to explore the rise in electronic nicotine delivery systems (ENDS) use, or “vaping,” related health impacts, and policies that have been implemented to reduce the use of vaping products, particularly among adolescents and teens in which the steepest increase in use has occurred over the past several years. During the hearing, speakers will discuss the impact that flavored tobacco products have had in the sharp rise in vaping products use and attracting youth through the marketing of multiple flavors and product design. A representative of the California Department of Public Health (DPH) will provide updates on the health epidemic that occurred late in 2019, known as the e-cigarette or vaping product use-associated lung injury (EVALI) outbreak, and the efforts in conjunction with federal partners to address the related health impacts. And representatives from local governments will provide their perspectives on the impacts of vaping products use in their jurisdictions, as well as policies they have implemented to limit access and decrease use. While the federal Centers for Disease Control and Prevention (CDC) now reports that most of the EVALI cases are strongly linked to black-market cannabis products that contained vitamin E acetate as an additive, this hearing will focus largely on tobacco-based flavored vaping products.

Background

In July 1992, Congress enacted the Alcohol, Drug Abuse, and Mental Health Administration Reorganization Act, which includes an amendment (section 1926), known as the Synar Amendment, aimed at decreasing youth access to tobacco. It requires U.S. territories (all states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and six Pacific jurisdictions) to enact and enforce laws prohibiting the sale or distribution of tobacco products to individuals under the age of 18 (now under the age of 21¹). States must comply with the Synar Amendment in order to receive their full Substance Abuse Prevention and Treatment Block Grant (SABG)

¹ On December 20, 2019, the President signed legislation amending the federal Food, Drug, and Cosmetic Act, which raised the federal minimum age of sale of tobacco products from 18 to 21 years.

awards. Up to 40% of SABG funding can be withheld from states for not complying with the Synar Amendment. In September 1994, the Stop Tobacco Access to Kids Enforcement (STAKE) Act was signed into law in California to address the increase in tobacco sales to minors and fulfill the federal mandate. The STAKE Act created a new statewide enforcement program authorizing regulatory actions against businesses that illegally sell tobacco products to minors.

Smoking prevalence

According to the CDC, nearly 90% of smokers in the U.S. start smoking by the age of 18, and 98% start by age 26. The CDC reports that if smoking continues at the current rate in the U.S., 5.6 million of today's youth under the age of 18 (about one of every 13) will die early from a tobacco-related disease. Each day in the U.S., more than 3,200 youth aged 18 years or younger smoke their first cigarette, and an additional 2,100 youth and young adults become daily cigarette smokers. Flavorings in tobacco products can make them more appealing to youth. In 2014, 73% of high school students and 56% of middle school students who used tobacco products in the past 30 days reported using a flavored tobacco product. From 2011 to 2016, combustible cigarette smoking declined among middle and high school students. However, the use of ENDS increased among the same population during the same time: 4.3 % of middle school students reported in 2016 that they used ENDS, which was an increase from 0.6% in 2011, and 8% of high school students reported having used ENDS, which was an increase from 1.5%.

Most recently, the 2019 National Youth Tobacco Survey conducted by the CDC and the federal Food and Drug Administration (FDA) shows even greater increases in ENDS use, particularly among high school students: 27.5% of high school students and 10.5% of middle school students now report using ENDS while 5.8% of high school students and 2.3% of middle school students report using combustible cigarettes. More than five million youth now report current use of ENDS (up from 3.6 million in 2018), with nearly one million youth reporting daily use and 1.6 million reporting frequent use (20 or more days per month). The majority of current product users reported JUUL as their usual brand.

Tobacco-related diseases

Every year, combustible cigarette smoking causes more than 480,000 deaths in the U.S. The CDC reports that smoking causes more deaths each year than the following causes combined: HIV, illegal drug and alcohol use, motor vehicle crashes, and firearm-related incidents. Smoking also causes about 90% of all lung cancer deaths and about 80% of all deaths from Chronic Obstructive Pulmonary Disease. Estimates also show that smoking increases the risk of coronary heart disease and stroke by two to four times, as well as the risk of men and women developing lung cancer by 25 times. Smoking causes diminished overall health, increased absenteeism from work, and increased health care utilization and cost. The CDC reports that just one year after quitting smoking, the risk for heart attack drops sharply, and within two to five years, the risk for stroke may reduce to about that of a nonsmoker. Within five years of quitting smoking, risks for cancers of the mouth, throat, esophagus, and bladder drop by about half. The risk for lung cancer also drops by about half after ten years of having quit smoking.

ENDS and their health effects

According to the FDA, vapes, vaporizers, vape pens, hookah pens, e-cigarettes, and e-pipes are some of the many terms used to describe ENDS, which are noncombustible tobacco products. These products use an e-liquid, or juice, that may contain nicotine, as well as varying compositions of flavorings, propylene glycol, vegetable glycerin, and other ingredients. The liquid is heated to create an aerosol that the user inhales. ENDS may be manufactured to look like conventional cigarettes, cigars, or pipes. Some resemble pens or USB flash drives. Larger devices, such as tank systems or mods, bear little or no resemblance to cigarettes.

In July 2013, a group of 12 experts in decision science, medicine, pharmacology, psychology, public health policy, and toxicology rated the relative harm of 12 nicotine-containing products by using 14 criteria addressing harms to self and others, concluding that combustible cigarettes were the most harmful and that ENDS were substantially less harmful than combustible cigarettes. The group of experts noted, however, that a limitation of the study was the lack of evidence for the harms of most products on most of the criteria.

An article in the *American Journal of Public Health* (AJPH) published in February 2020, “Invalidity of an Oft-Cited Estimate of the Relative Harms of E-Cigarettes,” notes that the 2013 study and its lack of evidence did not stop Public Health England and the Royal College of Physicians from endorsing and publicizing in 2013 that ENDS were 95% less risky and 95% less harmful than combustible cigarettes, which later was characterized and repeated in popular media.

The AJPH article now refutes and seeks to invalidate the “95% less” assertion by reiterating that the 2013 study lacked evidence and by noting that, in the years since, mounting evidence shows the negative health effects of the ENDS available in today’s market, which are vastly different than what was on the market in 2013. Today, in addition to using different materials and more numerous heating coils, many ENDS can attain power output that exceeds that of most over-the-counter 2013 models by 10 to 20 times. Greater power increases the potential harms to ENDS users because more aerosol is produced that exposes users to increased levels of nicotine and other toxicants. ENDS liquids have also changed considerably over the years, particularly the marketing of liquids with protonated nicotine (“nicotine salt”), which is made by adding an acid to free-base nicotine. Aerosolized nicotine salt is less aversive to inhale, allowing ENDS users to increase the nicotine concentration of the liquid and likely increase their own nicotine dependence, according to the article. ENDS aerosol also contains propylene glycol (PG), which is generally recognized as safe when eaten but when injected intravenously over a period of days is toxic. ENDS containing PG and vegetable glycerin cause inflammation in human lungs, suggesting different safety profiles for inhaled versus ingested constituents. The same effects were seen and noted by the CDC with the EVALI outbreak in which black-market cannabis products containing vitamin E acetate (generally safe when eaten) caused a host of health issues when it was inhaled.

DPH report and enforcement

A 2018 report by DPH, *California Tobacco Facts and Figures*, states that the smoking rate declined by 51.9% between 1988 and 2016, from 23.7% to 11.4%. California has the second lowest adult smoking rate among the 50 states plus the District of Columbia, second only to Utah. Almost 9% of adults use other tobacco products, such as cigars, little cigars, pipe, hookah, and ENDS. In California, 64% of smokers start by the age of 18, and 96% start by age 26. According to DPH, in 2010, 36.8% of high school students had smoked a whole cigarette by age 13 or 14, and in 2012, illegal tobacco sales to minors rose to 8.7% from 5.6% in 2011. Among adult users of other tobacco products (such as ENDS) in California, 70.3% reported using flavored products in the past six months, and eight out of 10 young adults 18 to 24 that currently use ENDS reported flavor usage. The report states that one of the reasons for the high rate of flavor use among young adults may be due to the popularity of ENDS. DPH states that flavored tobacco products are driving youth experimentation, as more than 80% of youth who ever used a tobacco product reported that their first product was flavored. While teen cigarette smoking in 2016 was low (4.3%), overall tobacco use among teens is stagnant: 13.6% compared to a smoking rate of 13.8% in 2010. However, the proliferation of tobacco product categories (cigarettes; chew and snus tobacco; cigarillos and little cigars; hookah; and a variety of ENDS), flavored products, and the evolution of tobacco marketing appear to be fueling teens switching from traditional cigarettes to a new generation of products. The DPH report further noted that in 1997, 21.7% of retailers sold tobacco products to minors, just above the federally mandated target of 20%. The rate in 2017 was 5.7%, a significant decrease from 10.3% in 2016. However, tobacco-only stores continue to have the highest retailer violation rate (12%) when compared to other retailers (4.9%).

DPH conducted 4,675 compliance inspections and collected \$265,100 in civil penalties in fiscal year (FY) 2018-19. DPH is required to notify the California Department of Tax and Fee Administration (CDTFA) within 60 days of the final adjudication of a retailer's third, fourth, or fifth violation within a five-year time frame; however, DPH states there were no retailers that fit these criteria in FY 2018-19. DPH received an additional \$1.9 million in local assistance funding in FY 2019-20 to allocate grants to local entities for enforcement activities. According to CDTFA, as of August 1, 2019, there are 30,685 registered cigarette and tobacco retail locations.

EVALI

Beginning late June 2019, various states, including Wisconsin, Illinois, California, Indiana, and Minnesota, reported to the CDC dozens of possible cases of severe lung illnesses associated with vaping. On August 30, 2019, the CDC issued a statement declaring it had been working with the FDA and the various states involved to investigate the incidents. One adult in Illinois who had been hospitalized after use of an ENDS product died in late August, and on September 3, 2019, the Oregon Health Authority announced it was investigating the death of an individual who had severe respiratory illness following use of an ENDS. The CDC stated at the time that while cases in each state were similar and appeared to be linked to ENDS, more information was needed to determine the cause of the illnesses, which included patients' reports of gradual symptoms, such as breathing difficulty, shortness of breath, chest pain, mild to moderate gastrointestinal illnesses like vomiting and diarrhea, fever, and fatigue. In many of the cases, patients reported using

tetrahydrocannabinol (THC)-containing ENDS products, and various states had begun to report that most of the products tested used by patients had a similar ingredient, vitamin E acetate, though the CDC at the time cautioned it was still investigating whether the illnesses were linked to specific devices, ingredients, or contaminants in the devices, or substances associated with ENDS, with the help from the FDA. In the meantime, the CDC provided states with a standardized case definition, a medical chart abstraction form, and a case review questionnaire with input from states who were conducting investigations to assist in tracking cases and information sharing between states with possible cases. The CDC had warned the public against buying products off the street and against modifying ENDS products, or adding any substances that are not intended by the manufacturer.

As of January 21, 2020, the CDC reports a total of 2,711 hospitalized EVALI cases or deaths have been reported from all 50 states, the District of Columbia, and two U.S. territories (Puerto Rico and the U.S. Virgin Islands). Sixty deaths have been confirmed in 27 states and the District of Columbia in patients with a median age of 51 years and ranging from 15-75 years. More deaths are still under investigation. While emergency department visits have continued to decline—after seeing a sharp increase in August, and a peak in September, of 2019—new cases continue to be reported by state health departments, and samples connected to EVALI patients continue to be tested by both the CDC and the FDA. The CDC now reports that vitamin E acetate, an additive in some THC-containing ENDS products, is strongly linked to the EVALI outbreak. The CDC recommends that people not use THC-containing ENDS, particularly from informal sources, like friends, family, or in-person or online dealers. The CDC also recommends that vitamin E acetate not be added to any ENDS products, or any other substances not intended by the manufacturer. The CDC continues to recommend that ENDS products never be used by youth, young adults, or women who are pregnant, and that adults who do not currently use tobacco products should not start using ENDS products. Further, adults who choose to use ENDS as an alternative to combustible cigarettes should not go back to traditional smoking.

Federal actions

Enforcement pre-EVALI outbreak

The FDA has issued several statements over the past couple of years focusing on youth access to tobacco products. Specifically, the FDA has been concerned about youth access to ENDS, as the youth use rate has reached epidemic status, as noted in the 2019 National Youth Tobacco Survey. In various statements, the FDA commissioner signaled that most flavored tobacco products would be banned from retail locations. However, in March 2019, the FDA commissioner issued a statement announcing that manufacturers and retailers were being put on notice that they could be subject to FDA enforcement for selling certain flavored ENDS products without authorization. The FDA announced it would prioritize enforcement to focus on protecting youth from becoming addicted to nicotine, which includes the retail sale of ENDS that are offered in ways that pose a greater risk for minors' access to the products, such as retail and online sales without heightened age verification, and products that appeal to kids or that resemble non-ENDS products like USB devices. In September 2018, the FDA commissioner issued a statement stating that the FDA would not tolerate a whole generation of young people becoming addicted to nicotine as a tradeoff for enabling adults to have unfettered access to the same products. As a result, the FDA initiated a Youth Tobacco Prevention Plan that focused on

preventing youth access to tobacco products, curbing the marketing of tobacco products aimed at youth, and educating teens about the dangers of using any tobacco products. In the September 2018 statement, the FDA announced issuing 12 warning letters to companies that continued to advertise and sell products to youth. Earlier the same year the FDA had also issued 56 warning letters and six civil monetary penalties to retailers as part of its enforcement action to limit access of tobacco products to youth. The FDA also sent letters to five ENDS manufacturers whose products were sold to kids during the FDA's ramped up enforcement period. The five ENDS manufacturers collectively represent more than 97% of the current market for ENDS—JUUL, Vuse, MarkTen, blu e-cigs, and Logic. The FDA requested that these companies provide robust plans on how they will address the widespread use of their products by minors or face increased enforcement. According to one report, amid pressure from the FDA, JUUL announced in November 2018 that it was taking action to curb youth access, such as selling flavored JUUL pods on its website only, using an enhanced online age verification system, shutting down its Facebook and Instagram accounts, using its Twitter account for non-promotional communication only, and developing a next-generation device with access restrictions at the user level.

Temporary flavored ENDS policy

The FDA announced on January 2, 2020, its finalized enforcement policy against certain unauthorized flavored ENDS products that appeal to kids, including fruit and mint flavors. Under the policy, companies that do not cease manufacture, distribution, and sale of unauthorized flavored cartridge-based² ENDS (other than tobacco or menthol flavor) within 30 days of the FDA finalized policy risk enforcement actions. The FDA statement points to data from other federal surveys showing that youth are attracted to fruit and mint flavors more so than tobacco and menthol flavors as justification for the two exceptions, though many anti-tobacco advocates and public health officials have argued that youth and various underrepresented communities are also attracted to menthol flavored tobacco products. The FDA does caution that if either of the flavors not subject to its enforcement policy become favored by youth, the policy will be reevaluated and the FDA will take any additional steps to address youth use of those products.

The FDA notes that the enforcement priority policy announced on January 2 is not a “ban” on flavored or cartridge-based ENDS, as the FDA has already accepted and begun review of several premarket applications for ENDS products through the pathway that Congress established in the Tobacco Control Act, under which ENDS manufacturers have until May 2020 to provide scientific data to the FDA that their products are safe. To date, no ENDS products have been authorized by the FDA—meaning that all ENDS currently on the market are considered illegally marketed and are subject to enforcement, at any time, in the FDA's discretion, according to the agency.

National increase in age requirement for tobacco products

After 19 states (including California) and the District of Columbia had taken action to raise the smoking age, on December 20, 2019, President Trump signed legislation amending the federal

² The FDA notes that “cartridge-based” ENDS products are a type of product that consists of, includes, or involves a cartridge or pod that holds liquid that is to be aerosolized when the product is used. A cartridge or pod is any small, enclosed unit (sealed or unsealed) designed to fit within or operate as part of an ENDS product. Therefore, any flavored tobacco products that do not use cartridges or pods are not subject to the FDA policy.

Food, Drug, and Cosmetic Act to raise the federal minimum age of sale of tobacco products from 18 to 21 years, effective immediately. The President announced this change in law coupled with the temporary flavored ENDS policy as a method to address youth access to ENDS products while maintaining ENDS as a potential off-ramp for adults who use combustible tobacco, even though no current ENDS to date have been approved by the FDA as smoking cessation devices.

State and local government actions

Even before the EVALI outbreak, many local governments in California and across the nation, as well as some states, were enacting flavored ENDS bans or complete ENDS bans as response to perceived inaction on the federal and state level. To date, more than 250 local governments across the U.S. have banned the sale of flavored or any ENDS products, including more than 70 across California (including San Francisco, Los Angeles County, Sacramento, Contra Costa County, Culver City, Long Beach, Richmond, Livermore, Beverly Hills, and San Mateo County). Additionally, Massachusetts became the first state in November 2019 to enact a permanent ban on all flavored tobacco products, including ENDS and menthol cigarettes. New Jersey passed a similar ban but did not include cigarettes. Lawmakers in California, Florida, Georgia, Hawaii, Nebraska, New Hampshire, New Mexico, New York, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Vermont, Virginia, and West Virginia have either considered or are currently considering flavored tobacco products legislation.

Governor Newsom signed Executive Order (EO) N-18-19 on September 17, 2019, to confront the growing youth epidemic and health risks linked to ENDS. The EO directed DPH to launch a \$20 million statewide digital and social media public awareness campaign to educate youth, young adults, and parents about the health risks of vaping nicotine and cannabis products. DPH was also directed to develop recommendations to reduce the availability of vaping devices to persons under 21 years of age, which includes the establishment of warning signs about the health risks of vaping at retailers where any vaping products are sold and in any vaping advertisements. This includes increased enforcement regarding sales of vaping products and specifically e-liquid flavors, to youth. DPH was tasked with making recommendations regarding the establishment of standards for nicotine content and uniform packaging for purposes of including nicotine content in the calculation of the existing tax on ENDS.

On September 24, 2019, DPH issued a health warning urging everyone to quit vaping altogether, no matter the substance or source, until the EVALI investigations are complete. For those who continue, DPH urged to avoid buying any vaping products on the street and never to modify a store-bought ENDS. DPH warned that if anyone or their child had vaped at all in the past few months and were having new problems with breathing or other symptoms to seek medical care immediately and tell a health care provider about the person's history of ENDS use. DPH further stated that if one decided to stop vaping not to replace vaping with smoking combustible cigarettes and to ask a doctor for FDA-approved quitting treatments.

California's recent tobacco control legislation

SB 793 (Hill, Glazer, McGuire, Pan, and Wiener of 2020) prohibits a tobacco retailer from selling, offering for sale, or possessing with the intent to sell or offer for sale, a flavored tobacco

product, as defined, and makes a violation of this prohibition an infraction punishable by a fine of \$250 for each violation. *SB 793 is pending in this Committee.*

AB 1625 (Robert Rivas of 2019) would require the Attorney General to establish and maintain a list of tobacco product brand styles that lack a characterizing flavor, as defined. *AB 1625 died in the Assembly Governmental Organization Committee.*

AB 1639 (Gray of 2019) makes various changes to existing law regarding DPH's authority to conduct sting inspections of tobacco retailers; increases civil penalties and changes thresholds for tobacco retail license suspensions; changes age verification procedures; and creates various advertising, promoting, packaging, and selling prohibitions on ENDS, as specified. *AB 1639 is pending in the Senate Rules Committee.*

SB 8 (Glazer, Chapter 761, Statutes of 2019) makes it an infraction punishable by a fine of up to \$25 for a person to smoke, as defined, on a state coastal beach or in a unit of the state park system, as defined, or to dispose of used cigar or cigarette waste on a state coastal beach or in a unit of the state park system unless the disposal is made in an appropriate waste receptacle. *AB 1718 (Levine of 2019) was an identical measure, which was vetoed by Governor Newsom who stated SB 8 was already enacted and AB 1718 would be duplicative.*

SB 38 (Hill, Glazer, McGuire, and Portantino of 2019) and AB 739 (McCarty and Wood of 2019) were substantially similar to SB 793. *SB 38 was amended to a new purpose. AB 739 died in the Assembly Governmental Organization Committee.*

SB 39 (Hill, Glazer, and Portantino, Chapter 295, Statutes of 2019) requires sellers, distributors, and nonsale distributors to deliver tobacco products only in conspicuously marked containers, as specified, and to obtain the signature of a person 21 years of age or older before delivering a tobacco product.

SB 424 (Jackson) prohibits a person or entity from selling, giving, or in any way furnishing to another person of any age in the state any single-use filters, plastic devices, and ENDS, as specified. Requires the manufacturer of these components to use materials eligible for recycling under state or local recycling programs to make multiuse, reusable components, and to offer methods for recycling those components, as specified. *SB 424 is pending in the Assembly Governmental Organization Committee.*

SB 538 (Rubio of 2019) would have required a manufacturer of ENDS to submit specified information to DPH about ENDS sold in the state; required DPH to post the information on its website and to conduct a public outreach campaign to notify specified entities about the information on ENDS to address the increase in youth usage; and contained an urgency clause that would have made this bill effective upon enactment. *SB 538 was vetoed by Governor Newsom who stated, in part, that his administration is confronting the public health crisis from the increasing use and dangers associated with ENDS, including how best to increase enforcement, and launching a digital and social media campaign aimed at educating youth, young adults, and parents about the health risks of vaping nicotine and cannabis products.*

AB 2308 (Stone of 2018), AB 48 (Stone of 2015), and AB 1504 (Stone of 2014) would have prohibited the sale of cigarettes utilizing single-use filters. *AB 2308 failed passage in the Assembly Governmental Organization Committee. AB 48 was never heard in the Assembly Governmental Organization Committee. AB 1504 failed passage in the Assembly Governmental Organization Committee.*

SB 835 (Glazer of 2018) and AB 1097 (Levine of 2018) would have implemented a ban on smoking and disposing of tobacco products, as defined, at state parks and establishes an infraction punishable by a fine of up to \$25 for a violation. *SB 835 and AB 1097 were vetoed by Governor Brown who stated that he had vetoed similar measures in each of the last two years, and the third time is not always a charm. Governor Brown stated his opinion on the matter had not changed, and we have many rules telling us what we can't do and these are wide open spaces.*

SB 836 (Glazer of 2018) would have prohibited smoking of cigarettes, cigars, pipes, and other tobacco-products in state coastal beaches, as specified, and established that a violation is an infraction with a fine of up to \$25. *SB 836 was vetoed by Governor Brown, who issued the same veto message as for SB 835.*

SCR 143 (Pan of 2018) would have encouraged major motion picture studios to give a Restricted (R) rating to any new film designed for viewing by children and adolescents that shows or implies smoking or tobacco use. *SCR 143 failed passage in the Assembly Health Committee.*

SB 386 (Glazer of 2017) would have prohibited the smoking of cigarettes, cigars, pipes, and other tobacco products at state parks and state coastal beaches, as specified, and established that a violation is an infraction with a fine of up to \$100. *SB 386 was vetoed by Governor Brown who stated that such a far-reaching prohibition in every state park and on every state beach is too broad. In addition, the fine prescribed in SB 386 for lighting one cigarette is excessive. If people can't smoke even on a deserted beach, where can they? There must be some limit to the coercive power of government.*

AB 725 (Levine of 2017) would have prohibited smoking of tobacco products on state coastal beaches and at state parks, as specified, and established that a violation is an infraction with a fine of up to \$50. *AB 725 was vetoed by Governor Brown, who issued the same veto message as SB 386.*

SB 1333 (Block of 2016) and AB 1142 (Bloom of 2013) would have prohibited the smoking of tobacco products on state coastal beaches and at state parks, as specified, and established that a violation is an infraction with a fine of up to \$250. *SB 1333 was vetoed by Governor Brown who stated the complete prohibition in all parks and beaches is too broad, and a more measured and less punitive approach might be warranted. AB 1142 failed passage in the Assembly Governmental Organization Committee.*

SBX2 5 (Leno, Chapter 7, Statutes of 2016) recasts and broadens the definition of “tobacco product” to include ENDS, and extends current restrictions and prohibitions against the use of tobacco products to ENDS.

SBX2 7 (Hernandez, Chapter 8, Statutes of 2016) increases the minimum legal age to purchase or consume tobacco products from 18 to 21. Removes penalty provisions for those under 21 in possession of tobacco products, and exempts military personnel from the age increase.

ABX2 7 (Stone, Chapter 4, Statutes of 2016) extends the workplace smoking ban and closes loopholes, among other things, to address secondhand smoke.

SB 977 (Pan, Chapter 537, Statutes of 2016) prohibits a person from smoking a tobacco product, as defined, within 250 feet of a youth sports event, as defined. Broadens the definition of “smoke or smoking” in existing law.

SB 591 (Pan of 2015) and SB 768 (De León of 2013) would have imposed an additional cigarette tax at a rate of \$2.00 per package of 20 cigarettes, and a corresponding rate for a cigarette tax stamp. *SB 591 was placed on the Senate Floor inactive file, and no further action was taken. SB 768 was held on the Senate Appropriations suspense file.*

AB 768 (Thurmond, Chapter 779, Statutes of 2015) prohibits the use or possession of smokeless tobacco products, as defined, on the playing field of a baseball stadium during a professional baseball game or practice.

SB 648 (Corbett of 2013) would have extended the restrictions and prohibitions against the smoking of tobacco products to include restrictions or prohibitions against ENDS in various places, including, but not limited to, places of employment, school campuses, public buildings, day care facilities, retail food facilities, and health facilities. *SB 648 failed passage in the Assembly Appropriations Committee.*