

ALA_MD CIAA Testimony_SB 244_2-8-24.pdf

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Position: FAV



American Lung Association Testimony Senate Bill 244
Senate Finance Committee
February 8, 2024
Support

Chair Beidle, Vice-Chair Klausmeier and Members of the Committee:

We thank you for the opportunity to provide comments on Senate Bill 244 which would include electronic smoking devices in Maryland's Clean Indoor Air Act and close an important loophole. The American Lung Association supports this legislation as an important step to protect residents from exposure to secondhand smoke including e-cigarette emissions.

The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease, through research, education and advocacy. The work of the American Lung Association is focused on four strategic imperatives: to defeat lung cancer; to improve the air we breathe; to reduce the burden of lung disease on individuals and their families; and to eliminate tobacco use and tobacco-related diseases.

The American Lung Association believes that the use of electronic smoking devices should be prohibited in all places where the smoking of other tobacco products are prohibited. We have continued to fight for strong laws and policies to make our communities in Maryland and across the country smokefree. All Americans deserve to live, work, study and play in smokefree environments. By implementing smokefree environments, all workers and patrons can be protected from the dangers of all types of secondhand smoke, including e-cigarette emissions.

The current Clean Indoor Air statute in Maryland, has a significant loophole by not currently including the use of electronic smoking devices. Under House Senate Bill 244 this loophole would be eliminated, and electronic smoking devices would not be permitted anywhere tobacco use is prohibited. The American Lung Association supports measures to require totally smokefree environments, including prohibiting the smoking or vaping and encourages lawmakers to oppose any attempts to undermine Maryland's Clean Indoor Act.

Research has clearly demonstrated that there is no safe level of exposure to toxic secondhand smoke.¹ While ventilation or air purification systems are sometimes promoted as a way to reduce exposure to secondhand smoke, ventilation cannot remove all secondhand smoke and does not purify the air at rates fast enough to protect people from harmful toxins. The U.S. Surgeon General has concluded that even separating smokers from nonsmokers, cleaning the air, and ventilating buildings cannot eliminate exposure of nonsmokers to secondhand smoke.

The only effective way to fully protect nonsmokers from exposure to secondhand smoke is to completely eliminate smoking and vaping in indoor public spaces.²

Secondhand smoke is also an occupational hazard for many workers. Job related exposure to secondhand smoke is a significant, but entirely preventable, cause of premature death among U.S. workers. The National Institute of Occupational Health and Safety (NIOSH) and the US Surgeon General found that occupational exposure to secondhand smoke increases workers' risk of lung cancer and other diseases. Patrons were also found to have significantly elevated levels of a tobacco-specific lung carcinogen after a four-hour visit to a casino that allowed smoking.^{3 4} The American Society of Heating, Refrigerating and Air-Conditioning Engineers states that the only way to eliminate indoor exposure to environmental tobacco smoke is to eliminate all indoor smoking and vaping activity.

Thank you for your continued commitment to the health and wellbeing of the residents of Maryland, we urge you to support Senate Bill 244 which would eliminate indoor use of electronic smoking devices.

Sincerely,



Aleks Casper
Director of Advocacy, Maryland
202-719-2810

¹ U.S. Department of Health and Human Services (HHS). *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006.

² HHS, 2006.

³ Anderson KE, Kliris J, Murphy L, et al (2003). Metabolites of a Tobacco-Specific Lung Carcinogen in Nonsmoking Casino Patrons. *Cancer Epidemiol Biomarkers Prev* 12(12):1544-6.

⁴ Americans for Nonsmokers' Rights. Smokefree Casinos. <https://nonsmokersrights.org/smokefree-casinos>

SB0244_FAV_MedChi, MDAAP_PH - Clean Indoor Air Act

Uploaded by: Christine Krone

Position: FAV



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TO: The Honorable Pamela Beidle, Chair
Members, Senate Finance Committee
Chair, Senate Finance Committee (Maryland Department of Health)

FROM: Christine K. Krone
Pamela Metz Kasemeyer
Steven Wise
Danna Kauffman
Andrew G. Vetter

DATE: February 8, 2024

RE: **SUPPORT** – Senate Bill 244 – *Public Health – Clean Indoor Act – Revisions*

On behalf of the Maryland State Medical Society and the Maryland Chapter of the American Academy of Pediatrics, we submit this letter of **support** for Senate Bill 244.

Maryland's Clean Indoor Air Act of 2007 was created to protect the health of Maryland residents by reducing exposure to secondhand smoke in indoor public places and workplaces. The act prohibits smoking in various indoor areas, including restaurants, bars, workplaces, and public transportation vehicles. It also mandates that certain outdoor areas near entrances to buildings be designated as smoke-free zones. Senate Bill 244 updates the Clean Indoor Act to include vaping, in addition to smoking, as prohibited in indoor places. While vaping doesn't produce traditional smoke, it does emit vapor that may contain harmful chemicals. These chemicals are generally present at lower levels than in cigarette smoke, however they can still pose health risks, especially with long-term exposure. Reducing secondhand exposure helps create healthier environments for everyone, especially children and nonsmokers who may be negatively affected by secondhand smoke.

Senate Bill 244 reflects a reasonable extension of Maryland's current clean indoor air act prohibitions, and a favorable report is requested.

For more information call:

Christine K. Krone
Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Andrew G. Vetter
410-244-7000

Daffin SB244 Testimony.pdf

Uploaded by: Christopher Daffin

Position: FAV

Testimony in Support of Senate Bill 244
PUBLIC HEALTH – CLEAN INDOOR AIR ACT – REVISIONS
Before the Finance Committee: February 8, 2024

On May 17, 2007, the Clean Indoor Air Act was signed into law to preserve and improve the health, comfort, and environment of the people of Maryland by limiting exposure to environmental tobacco smoke.¹ The Clean Indoor Air Act prohibits smoking in virtually all indoor workplaces and provides statewide protection from exposure to secondhand smoke in indoor settings.²

Senate Bill 244 prohibits vaping tobacco or cannabis products in spaces where smoking is currently prohibited by the Clean Indoor Air Act, including indoor workplaces and public places and on public transportation. Specifically, it prohibits vaping in indoor areas open to the public and where meetings are open to the public, indoor places of employment, and government owned or operated public transportation.

It also requires that signs stating “No smoking or vaping” be noticeably posted and maintained in every indoor area and at each public entrance to places open to the public where smoking or vaping would be prohibited. Similarly, the bill requires that signs stating, “Smoking or vaping permitted in this room,” are noticeably posted and maintained where smoking and vaping are allowed.

As our State continues to fight against the devastating effects of tobacco addiction, vaping presents a new threat to the well-being of former smokers. The presence of vaping in public indoor spaces not only jeopardizes the progress made in lowering smoking rates, but it also poses a direct risk of triggering relapse among those who have already successfully quit.

Former smokers – having climbed a steep mountain to break the relentless grip of tobacco addiction – find solace, security, and support in Maryland’s smoke-free environments. Allowing vaping in these spaces threatens to dismantle any hard-fought progress Marylanders have made to free themselves from smoking addictions. Vaping seduces potential users with a variety of flavors and implications that it is merely water vapor, and it becomes a dangerous trigger for relapse among former smokers.³ The sensory experience, reminiscent of the very habit they fought to break free from, can bait Marylanders to undo years of resilience in a single, unsuspecting moment. The risk of a relapse not only endangers the physical health of Marylanders but also opens emotional and psychological wounds by reminding them of the struggles they thought were behind them.

¹ Maryland Department of Health, [Clean Indoor Air Act](#).

² *Id.*

³ King, Andrea et al., [Passive exposure to electronic cigarette \(e-cigarette\) use increases desire for combustible and e-cigarettes in young adult smokers](#), National Library of Medicine, May 21, 2014.

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Vape usage is on the rise. Between 2016 to 2022, the percentage of adults in Maryland who currently use e-cigarettes increased by 1.4 percentage points, compared to the study average of 3.1 percentage points.⁴ While this increase is below the national average, it is still threatening enough to our progress that it needs to be addressed.

It is imperative that Maryland – as a national leader on good public health policy – codifies SB 244 into the laws of our State. Banning vaping from public indoor spaces is not just a matter of public policy – it is an act of compassion and empathy for those who have fought tirelessly to break free from the chains of smoking addiction. In the spirit of supporting Marylanders’ journeys toward a healthier and addiction-free life, I urge a favorable report on SB 244.

This testimony is submitted on behalf of the Public Health Law Clinic at the University of Maryland Carey School of Law and not by the School of Law, the University of Maryland, Baltimore, or the University of Maryland System.

⁴ *Id.*

SB244 Letter of Support.pdf

Uploaded by: Donald Curtian

Position: FAV

An Affiliate of
The Maryland Association of Counties, Inc.



To: Members of the House Economic Matters Committee

From: Maryland Conference of Local Environmental Health Directors

Re: House Bill 238, Public Health- Clean Indoor Air Act- Revisions

The Maryland Department of Local Environmental Health Directors (Conference), an affiliate of The Maryland Association of Counties, **SUPPORTS SB244.**

This Bill revises the Clean Indoor Air Act to include vaping with the use of an electronic smoking device as the same as smoking. This Bill will now make it so a person may not smoke or vape, including any device that the user inhales aerosol containing hemp or cannabis in:

- (1) An indoor area open to the public;
- (2) An indoor place in which meetings are open to the public in accordance with Title 3 of the General Provisions Article;
- (3) A government-owned or government-operated means of mass transportation including buses, vans, trains, taxicabs, and limousines; or
- (4) An indoor place of employment.

Signage to add no smoking as well as no vaping shall be posted in all indoor areas open to the public.

Some Counties have passed local legislation to include vaping as the same as smoking. These changes will make it consistent across the State that vaping and smoking are prohibited in all indoor areas open to the public.

Accordingly, we ask the committee to give SB244 a **Favorable** vote.

Contact: Don Curtian, President, Maryland Conference of Local Environmental Health Directors, Phone: 410-222-7050,

hdcurti@aacounty.org

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Uploaded by: Jason Caplan

Position: FAV



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

February 8, 2024

The Honorable Pamela Beidle
Chair, Finance Committee
3 East Miller Senate Office Building
Annapolis, MD 21401-1991

RE: Senate Bill 244 – Public Health - Clean Indoor Air Act - Revisions – Letter of Support

Dear Chair Beidle and Committee Members:

The Maryland Department of Health (Department) respectfully submits this letter of support for Senate Bill (SB) 244 – Public Health - Clean Indoor Air Act - Revisions. SB 244 adds electronic smoking devices to the Clean Indoor Air Act and prohibits their use in most indoor public areas and workplaces, alongside already prohibited smoking of combustible tobacco, cannabis, and hemp.

SB 244 strengthens the Clean Indoor Air Act to protect Maryland residents from exposure to secondhand aerosol released from electronic smoking devices.

The Clean Indoor Air Act (CIAA) of 2007 was landmark legislation that prevented smoking of combustible tobacco products in virtually all indoor public places, including bars and restaurants, to eliminate public exposure to secondhand smoke (SHS). SB 244 modernizes the CIAA to include the new sources and forms of secondhand exposure that have become common since the passage of the CIAA. When the CIAA first passed, electronic smoking devices (ESDs) (i.e., electronic cigarettes, e-cigarettes, vapes, electronic nicotine delivery systems, etc.) were not widely available or used and were not included in the CIAA. ESDs currently are not regulated in the CIAA.

In recent years, vaping, or using ESDs, has become widespread and has increased dramatically, especially among Maryland youth and young adults. In 2021, 14.7 percent of Maryland high school students and 5.2 percent of Maryland middle school students currently used ESDs (i.e., within the past 30 days) compared to just 4.5 percent of Maryland adults.^{1,2} The popularity of ESDs with Maryland youth is concerning because nicotine adversely affects adolescent brain development and mental health.³ In general, youth do not perceive vaping as risky and many are

¹ Maryland Department of Health, “2021-2022 Youth Risk Behavior Survey/Youth Tobacco Survey,” IBIS Dataset Query System, Accessed 10 Jan 2024 at <<https://ibis.health.maryland.gov/ibisph-view/query/selection/yrbs2021/YRBSSelection.html>>.

² Maryland Department of Health, “2021 Behavioral Risk Factor Surveillance System,” IBIS Dataset Query System, Accessed 10 Jan 2024 at <<https://ibis.health.maryland.gov/ibisph-view/query/selection/brfss/BRFSSSelection.html>>.

³ US Department of Health and Human Services, “E-Cigarette Use Among Youth and Young Adults: A Report of the Surgeon General,” 2016, Accessed 11 Jan 2024 at <https://www.cdc.gov/tobacco/sgr/e-cigarettes/pdfs/2016_sgr_entire_report_508.pdf>.

unaware that ESDs contain nicotine.⁴ Many youth also report using ESDs because they are curious about these products, despite tobacco companies touting ESDs as tobacco cessation devices for adult consumers.⁵ Notably, while 28 percent of Maryland adults that use ESDs do so to quit smoking, the US Food and Drug Administration has never approved an ESD as a tobacco cessation device.⁶ Research suggests that youth who start using ESDs are more likely to use cigarettes at the same time or to completely transition to cigarettes, putting them at risk for a lifelong addiction to nicotine and other substances.⁷ Because the CIAA currently excludes ESDs, members of the public and employees working in indoor public places are exposed to aerosols, which threatens recent progress on protecting residents from the dangers of secondhand exposure and establishing smoke-free social norms.

Aerosols released from ESDs are made of “tiny particles or droplets in the air,”⁸ and are not harmless water vapor contrary to a commonly held belief. Environmental (i.e., exhaled or secondhand) ESD aerosol (often referred to as “vapor”) has documented health effects, particularly with prolonged exposure. Users inhale the aerosol and expose bystanders when they exhale secondhand vape (SHV).⁹ SHV can contain nicotine, THC (tetrahydrocannabinol) and other cannabinoids, heavy metals, tiny particles, cancer-causing chemicals, and other toxins that can cause respiratory distress and disease.¹⁰ Ventilation or air filtration may reduce toxins in SHV, but does not completely remove them.¹¹ ESDs can also be used to vape cannabis, which poses additional challenges with potential SHS and SHV exposure since Maryland legalized adult-use cannabis on July 1, 2023. Because of these risks, several public health entities, including the World Health Organization and the US Surgeon General, recommend ESDs not be used indoors or in areas covered by smoke-free laws.^{12,13}

A universal ban on indoor smoking is a proven public health strategy to reduce exposure to secondhand smoke. Similarly, adding ESDs to the CIAA will protect members of the public and employees from SHV exposure from both tobacco and cannabis aerosols and further reinforce smoke-free norms. Passing SB 244 will add Maryland to the ranks of the 24 other states and

⁴ Miech R, et al., “Trends in Use and Perceptions of Nicotine Vaping Among US Youth From 2017 to 2020,” *JAMA Pediatr*, 2021;175(2):185–190. Accessed 11 Jan 2024 at <<https://jamanetwork.com/journals/jamapediatrics/fullarticle/2774132>>.

⁵ Ibid fn 1.

⁶ US Food and Drug Administration, “E-Cigarettes, Vapes, and other Electronic Nicotine Delivery Systems (ENDS),” 1 Jul 2023, Accessed 12 Jan 2024 at <<https://www.fda.gov/tobacco-products/products-ingredients-components/e-cigarettes-vapes-and-other-electronic-nicotine-delivery-systems-ends>>.

⁷ Ibid fn 3.

⁸ Environmental Protection Agency. “Secondhand electronic-cigarette aerosol and indoor air quality,” 26 Oct 2023, Accessed 29 Dec 2023 at <<https://www.epa.gov/indoor-air-quality-iaq/secondhand-electronic-cigarette-aerosol-and-indoor-air-quality>>.

⁹ Ibid.

¹⁰ US Centers for Disease Control and Prevention, “About Electronic Cigarettes (E-Cigarettes),” 2 Nov 2023, Accessed 11 Jan 2024 at <https://www.cdc.gov/tobacco/basic_information/e-cigarettes/about-e-cigarettes.html>.

¹¹ Ibid fn 7.

¹² World Health Organization, “Electronic nicotine delivery systems,” 2014, Accessed 10 Jan 2024 at <https://apps.who.int/gb/fctc/PDF/cop6/FCTC_COP6_10-en.pdf>.

¹³ Ibid fn 3.

hundreds of municipalities, including several jurisdictions in Maryland, that have already chosen to protect public health by adding ESDs to their smoke-free laws.¹⁴

Because the 2007 CIAA was enacted before the advent of ESDs, it contained no provision for ESDs. By expanding the definition of “environmental smoke” to include aerosols from ESDs and adding the updated definition of tobacco that includes ESDs, SB 244 will help business owners and consumers alike to treat using all ESD products the same in indoor areas to the public. The revision to the CIAA will set the same standard for all businesses to remain in compliance with the CIAA.

The impact of SB 244 on small businesses and regulated industries is expected to be minimal, with nominal costs to update signage related to smoking and/or vaping prohibitions. Many businesses in Maryland, including bars and restaurants, already prohibit ESD use within their establishments. Exceptions for certain licensed tobacco retailers already exempted from the CIAA, including vape shop vendors and hookah establishments, will not change as long as businesses comply with other parts of the CIAA (i.e., their primary business is the sale of tobacco products and the sale of other products are “incidental”).

The Department strongly supports the passage of SB 244.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at sarah.case-herron@maryland.gov.

Sincerely,



Laura Herrera Scott, M.D., M.P.H.
Secretary

¹⁴ Campaign for Tobacco-Free Kids, “Electronic Cigarettes Should Be Included In Smoke-Free Laws,” 26 Oct 2023, Accessed 11 Jan 2024 at <<https://assets.tobaccofreekids.org/factsheets/0387.pdf>>.

SB244 MDDCSAM clean indoor air FAV.pdf

Uploaded by: Joseph Adams, MD

Position: FAV



MDDCSAM is the Maryland state chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

SB 244 - Public Health – Clean Indoor Air Act – Revisions

Senate Finance Committee, Feb. 8, 2024

FAVORABLE

The Maryland-DC Society of Addiction Medicine supports passage of **Senate Bill 244 - Public Health Clean Indoor Air Act – Revisions.**” This bill prohibits vaping of tobacco and cannabis products in certain indoor public areas where smoking tobacco and cannabis products is already prohibited under the Clean Indoor Air Act (CIAA). Use of electronic smoking devices (ESDs, also known as e-cigarettes, vapes, and electronic nicotine (or drug) delivery devices) is not currently prohibited under the CIAA. We believe that extending the CIAA to cover ESDs is consistent with the purpose and spirit of the CIAA by reducing exposure to potentially harmful aerosols.

While vaping was relatively rare when the CIAA was first adopted in 2007, it is now growing in popularity, especially among young adults 18-25 years old. In 2022, an estimated one-third of US young adults and 13.8% of adolescents (12-17 years old) vaped tobacco products that year and one-fifth of young adults and 6.8% of adolescents vaped cannabis products.¹ Among Maryland high school students in 2021, almost one-quarter (23.9%) of 9th graders and two-fifths of 12th graders had ever vaped tobacco products; 6.3% of 9th graders and one-fifth of 12 graders had ever vaped cannabis products.² Among US 9th-12th graders who use ESDs, an estimated one-third to one-half vape both nicotine and cannabis.³ Prohibition of indoor vaping may reduce opportunities for adolescents and young adults to initiate or continue vaping.

Vaping of tobacco and cannabis products generates second-hand vapor (actually an aerosol), analogous to second-hand smoke.^{4,5} Second-hand ESD aerosol is not water vapor but a chemical mixture that contains nicotine or cannabinoids, depending on the product, as well as other potentially harmful chemicals such as solvents and flavorings.^{4,5} Aerosolized chemicals are deposited on environmental surfaces such as furniture and window coverings, leading to third-hand exposure.^{6,7} Few studies have been published on the harms of second- or third-hand exposure to ESD aerosols, but there is little reason to think that these chemicals are safer when generated by ESD use than they would be from other exposures. The US Environmental Protection Agency recommends banning e-cigarette use inside buildings as the only way to eliminate second-hand exposure to their aerosol and the potential associated harms.⁴ Ventilation and air filtration may reduce some exposure but is unlikely to eliminate exposure completely. As of January 1, 2023, 23 states and territories prohibited cannabis vaping and smoking in at least some public indoor venues.⁸

Youth seeing others vaping indoors may encourage them to also vape, due to social norms and social modeling. Youth with friends who use cannabis are more likely themselves to use cannabis than are youth without cannabis-using friends.⁹

(continued . . .)

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In summary, MDDCSAM supports the passage of SB244 in order to reduce the health risks from exposure to second- and third-hand EDS aerosol and to reduce the exposure of youth to others using EDS.

References

1. Center for Behavioral Health Statistics and Quality. (2023). *Results from the 2022 National Survey on Drug Use and Health: Detailed tables*. Substance Abuse and Mental Health Services Administration. <https://www.samhsa.gov/data/report/2022-nsduh-detailed-tables>
2. Maryland Department of Health, “2021-2022 Youth Risk Behavior Survey/Youth Tobacco Survey,” IBIS Dataset Query System, <https://ibis.health.maryland.gov/ibisph-view/query/selection/yrbs2021/YRBSSelection.html>.
3. Selya A, Kim S, Shiffman S, et al. (2024) What substances are adolescents vaping? Estimating nicotine-specific and cannabis-specific vaping from us national youth surveys. *Substance Use & Misuse*. 59(2):218–224.
4. Environmental Protection Agency. “Secondhand electronic-cigarette aerosol and indoor air quality,” (26 Oct 2023), <https://www.epa.gov/indoor-air-quality-iaq/secondhand-electronic-cigarette-aerosol-and-indoor-air-quality>.
5. Almeida-da-Silva CLC, Dakafay HM, O’Brien K, et al. (2021) Effects of electronic cigarette aerosol exposure on oral and systemic health. *Biomedical Journal*. 44:252-259.
6. Khachatorian C, Jacob III P, Benowitz NL, et al. (2019) Electronic cigarette chemicals transfer from a vape shop to a nearby business in a multiple-tenant retail building *Tobacco Control* 28:519–525.
7. Son Y, Giovenco DP, Delnevo C, et al. (2020) Indoor air quality and passive e-cigarette aerosol exposures in vape-shops. *Nicotine & Tobacco Research* 22(10):1772–1779.
8. Truth Initiative, “The Link Between Cannabis and Tobacco,” 28 Sep 2023, <https://truthinitiative.org/research-resources/substance-use/link-between-cannabis-and-tobacco>.
9. Buckner JD (2013) College cannabis use: The unique roles of social norms, motives, and expectancies. *Journal of Studies on Alcohol and Drugs*, 74:720–726.

Support Clean Indoor Air Update Senate .pdf

Uploaded by: Laura Hale

Position: FAV



February 7, 2024

Testimony of Laura Hale
American Heart Association
Support SB 244 Public Health - Clean Indoor Air Act - Revisions

Dear Chair Beidle and Honorable Members of the Finance Committee,

Thank you for your time and consideration on this important legislation for heart health. My name is Laura Hale and I am the Director of Government Relations for the American Heart Association. The American Heart Association extends its support for SB 244 updating the Clean Indoor Air Act to include new tobacco products (Electronic Smoking Devices) and cannabis.

Protecting the Clean Indoor Air Act is key to maintaining the health of Marylanders. Since the Act was passed families and workers have been protected from secondhand smoke where they eat, live, and play. However, we see new threats from secondhand smoke from electronic smoking devices and cannabis. It is essential that we protect all Marylanders from secondhand smoke.

It is key that in updating that we do not weaken this vital legislation. Setting the stage that alcohol and smoking are no longer synonymous. We must keep an equal playing field for our restaurants and not allow for carve outs for cigars or cannabis. No matter what format, secondhand smoke is dangerous for people's health.

The American Heart Association is committed to making a world of longer healthier lives. The Clean Indoor Air Act does just that. The American Heart Association urges a favorable report on this legislation.

Sincerely,

Laura Hale
Director of Government Relations
American Heart Association

SB0244-FIN-SUPP.pdf

Uploaded by: Nina Themelis

Position: FAV



BRANDON M. SCOTT
MAYOR

*Office of Government Relations
88 State Circle
Annapolis, Maryland 21401*

SB0244

February 8, 2024

TO: Members of the Senate Finance Committee

FROM: Nina Themelis, Director of Mayor's Office of Government Relations

RE: Senate Bill 244 – Public Health - Clean Indoor Air Act - Revisions

POSITION: FAVORABLE

Chair Beidle, Vice Chair Klausmeier, and Members of the Committee, please be advised that the Baltimore City Administration (BCA) **supports** Senate Bill (SB) 244.

SB 244 expands the state's "Clean Indoor Air Act," which prohibits smoking indoors in most locations, to include the smoking of electronic smoking devices ("e-cigarettes" or "vapes"), cannabis, and hemp. Smoking and second-hand vapor from electronic smoking devices have significant negative health implications, especially for children and pregnant people. Updating the Clean Indoor Air Act to prohibit vaping and smoking cannabis in public indoor spaces will help reduce exposure to harmful substances including nicotine, cancer causing chemicals, and ultrafine particles that can cause lung irritation and worsen asthma symptoms.

As of 2021 (the most recent year for which data is available), nearly 15% of Maryland high schoolers reported regularly using e-cigarettes.ⁱ This has concerning implications not only for the young smokers, but also for those around them: like tobacco and cannabis smoke, exhaled vapor from e-cigarettes can linger in an enclosed space, thereby exposing others to harmful chemicals and particulate matter.ⁱⁱ Research shows that exposure to secondhand cannabis and tobacco smoke, as well as aerosols from vapes, plays a critical role in the development and severity of asthma in children.ⁱⁱⁱ Asthma is a significant health burden for Maryland residents, with almost a quarter of state high schoolers diagnosed with the condition.^{iv} This number is even higher in Baltimore City, where one-third of City high schoolers have asthma.ⁱⁱ Baltimore City residents also have an alarming rate of asthma-related emergency department visits, at 173 per 10,000 people, compared to a national average of 42 per 10,000 people.^{v,vi} Exacerbated or poorly controlled asthma can greatly hamper children's lives, causing them to miss out on school attendance, sports and physical activity, and more.

Pregnant people and infants are also disproportionately harmed by secondhand cannabis and tobacco smoke and vape aerosol exposure. According to the CDC, infants exposed to secondhand

tobacco smoke are more likely to die from sudden infant death syndrome (SIDS). Exposure to smoke for pregnant people increases the likelihood of giving birth prematurely and giving birth to babies with lower birth weights, both of which increases newborns' risk of additional health complications and even death.^{vii,viii} This is important to note because cannabis smoke contains the many of the toxic chemicals found in tobacco smoke.^{ix} Additionally, research shows that THC, the mind-altering component of cannabis, may be passed to infants through secondhand smoke.^x

Protecting the lives and health of residents is of critical importance to Baltimore City government. By updating the Clean Air Act, this bill will help protect public health by reducing Marylanders' exposure to harmful chemicals and particles that can lead to serious health concerns. For these reasons, the BCA respectfully requests a **favorable** report on SB 244.

ⁱ Maryland Department of Health. (2022). 2021 Youth Risk Behavior Survey Results. Retrieved from <https://health.maryland.gov/phpa/ccdpc/Documents/2021MDH%20Summary%20Tables.pdf>

ⁱⁱ Shearston, J. A., Eazor, J., Lee, L., Vilcassim, M. J. R., Reed, T. A., Ort, D., Weitzman, M., & Gordon, T. (2023). Effects of electronic cigarettes and hookah (waterpipe) use on home air quality. *Tobacco control*, 32(1), 36–41. <https://doi.org/10.1136/tobaccocontrol-2020-056437>

ⁱⁱⁱ Ogbu CE, Ogbu SC, Khadka D, Kirby RS. Childhood Asthma and Smoking: Moderating Effect of Preterm Status and Birth Weight. *Cureus*. 2021 Apr 17;13(4):e14536. doi: 10.7759/cureus.14536. PMID: 34017652; PMCID: PMC8128281.

^{iv} Maryland Department of Health. (n.d.) Youth Risk Behavior Survey/Youth Tobacco Survey (YRBS/YTS) 2018-2019. Retrieved from <https://health.maryland.gov/phpa/ccdpc/Reports/Pages/YRBS2018.aspx>

^v Maryland Department of Health. (2023). Emergency Department (ED) Visits for Asthma. Retrieved from <https://maps.health.maryland.gov/ephtportal/asthma/status/EDRates#close/>

^{vi} Centers for Disease Control and Prevention. (2021). Asthma Emergency Department Visits 2010–2018. Retrieved from [https://www.cdc.gov/asthma/asthma_stats/asthma-ed-visits_2010-2018.html#:~:text=Asthma%20emergency%20department%20\(ED\)%20visits%20rate*%20\(per%2010%2C000,than%20among%20men%20\(31.1\).](https://www.cdc.gov/asthma/asthma_stats/asthma-ed-visits_2010-2018.html#:~:text=Asthma%20emergency%20department%20(ED)%20visits%20rate*%20(per%2010%2C000,than%20among%20men%20(31.1).)

^{vii} Rang, N. N., Hien, T. Q., Chanh, T. Q., & Thuyen, T. K. (2020). Preterm birth and secondhand smoking during pregnancy: A case-control study from Vietnam. *PloS one*, 15(10), e0240289. <https://doi.org/10.1371/journal.pone.0240289>

^{viii} Centers for Disease Control and Prevention. (2022). Health Problems Caused by Secondhand Smoke. Retrieved from <https://www.cdc.gov/tobacco/secondhand-smoke/health.html>

^{ix} Centers for Disease Control and Prevention. (2020). Marijuana and Public Health: Lung Health. Retrieved from <https://www.cdc.gov/marijuana/health-effects/lung-health.html>

^x Centers for Disease Control and Prevention. (2020). Marijuana and Public Health: Pregnancy. Retrieved from <https://www.cdc.gov/marijuana/health-effects/pregnancy.html>

SB244_RonaldWard_UNF

Uploaded by: Ronald A. Ward, Jr., Esq.

Position: UNF

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Written Testimony

To: Maryland Senate Finance Committee
From: Ronald A. Ward Jr.
Date: February 8, 2024
Re: Opposition to Maryland Senate Bill 244

I. Introduction

My name is Ronald Ward and I am a life-long resident of Maryland. I have been an Electronic Smoking Device (hereinafter “ESD”) user for over 14 years, a smoke free alternatives activist for over 12 years and have owned an ESD store in Baltimore County, MD for the past 10 years.

While I fully support reasonable regulation such as keeping these devices out of the hands of minors, this bill is contrary to the very intent of the Maryland Tobacco Control Act. I ask that you issue an unfavorable report for Senate Bill 244 as it is written.

II. What We Know So Far

Numerous studies point to ESDs being up to 99% less harmful than smoking traditional cigarettes. Even the FDA’s own study of obsolete vaping devices found no more particular carcinogens than other FDA-approved nicotine products.

There seems to be no issue with “second hand vape” as there is with cigarettes since 99% of nicotine is absorbed primarily by the user. Additionally, the vapor leaves no odor on your body, hair or clothes, and the smell does not linger in a room because it is not smoke.

The most recent studies and publications show ESDs to be over 95% safer than traditional cigarettes. Upon request, I would be more than happy to supply you with credible scientific evidence to support my argument. Also, independent research should uncover a plethora of positive studies and publications. But, according to the studies, they are far safer than traditional combustible cigarettes. Furthermore, unlike actual secondhand smoke, there is no evidence to suggest that secondhand vapor is harmful to others, especially not to the extent of actual smoke which prompted the passage of the Tobacco Control Act.

III. The Industry, Regulation and Maryland Legislative History

The State of Maryland first introduced legislation that would ban the indoor use of these products in 2010 and in 2014. The bill in 2010 died in committee and the bill in 2014 was voted down handily in committee.

(http://mgaleg.maryland.gov/2014RS/votes_comm/hb1291_ecm.pdf).

In 2010, the first bill attempting to ban the indoor use of ESDs was SB 989 (<http://mgaleg.maryland.gov/2010rs/bills/sb/sb0989f.pdf>). No action was taken on this bill as it never got past a first reading.

In the 2014 legislative session, one bill was proposed that directly affected e-cigarettes and two that dealt with smokeless tobacco. The Bill was HB 1291 (<http://mgaleg.maryland.gov/webmga/frmMain.aspx?id=hb1291&stab=01&pid=billpage&tab=subject3&ys=2014RS>) (<http://blog.casaa.org/2014/02/call-to-action-maryland-e-cigarette.html>) which would have redefined vaping as smoking for purposes of the Clean Indoor Air Act. This very committee handily rejected that bill, which is almost identical to the subject bill, by a vote of 15-3.

Yet, the sponsor of the bill reintroduced it again in 2015. That bill (HB 26) was just as flawed in its language and rationale as was HB 1291 and, again, this committee issued an unfavorable report.

<http://mgaleg.maryland.gov/webmga/frmMain.aspx?id=hb0026&stab=01&pid=billpage&tab=subject3&ys=2015RS>.

In 2017, HB 354 yet again attempted to reintroduce this legislation. Again, the bill never made it out of Committee.

In 2019, the legislation was reintroduced in the form of House Bill 27 and, yet again, died in Committee.

Of course, in most cases regarding the aforementioned House Bills, companion bills were filed in the Senate before this Committee.

As you can see, over 14 years of proposed indoor use bans of ESDs at the State level were handily rejected or tabled pending further research. The only jurisdictions to ban the indoor use of electronic cigarettes in MD without any hard evidence of second hand (or even first hand) harm, are Montgomery County, Prince George's County and Howard County. In 2014, Baltimore City came to a landmark compromise allowing the use of ESDs in places where adults congregate. These areas were exempt from the indoor use ban if they prominently displayed signs alerting their patrons that the use of electronic cigarettes is allowed in their establishments (Bill 14-0371) <http://legistar.baltimorecitycouncil.com/attachments/11532.pdf>.

But, despite no new evidence of the potential secondhand dangers of ESDs, here we are again. Actually, as stated previously, there is actually more evidence now to the contrary showing electronic cigarettes to be tremendously safer than smoking. Actually, as stated previously, there is actually more evidence now to the contrary showing electronic cigarettes to be tremendously safer than smoking. But this time, it is another attempt at this legislation targeting ESDs while lumping these devices in with cannabis products. For reasons stated in this testimony and, specifically, Section 5 of this testimony, these products are distinguishably different and should not be in the same Bill.

IV. Proposed legislation

I respectfully request that this Committee issue an unfavorable report for SB 244 because the bill treats ESDs as if they were traditional cigarettes or cannabis vaporizers. Furthermore, this bill is contrary to the legislative intent of the Clean Indoor Air Act itself (see sections 24-502 and 24-503 of the Act). They state “It is the intent of the General Assembly that the State protect the public and employees from involuntary exposure to environmental tobacco smoke” and “the purpose is to preserve and improve the health, comfort and environment of the people of the State by limiting exposure to environmental tobacco smoke”. ESDs do not emit any smoke.

The Clean Indoor Air Act was enacted to protect citizens of Maryland from the very real and scientifically proven dangers of secondhand smoke. This bill attempts to ban the use of electronic cigarettes based upon the mere possibility that they may be dangerous to bystanders while ignoring evidence to the contrary. Therefore, the evidence is woefully insufficient to justify a ban on the public usage of ESDs. That is the reason why this bill has failed over the past decade. The proponents of this bill are still no closer to producing the evidence necessary to prove the second-hand harm of electronic cigarettes.

V. ESDs Are Easily Distinguishable from Cannabis Vaporizers

This issue is complicated by the recent legalization of cannabis. I wholly agree that people should not vape cannabis in public places. That is why it is already unlawful to consume cannabis in public places.

There is also no confusing a nicotine vaporizer from a cannabis vaporizer. Cannabis vaporizers are in the form of a recognizable tank that is easily distinguishable from ESDs. There is no ESD product on the market that has the unique look of the cannabis liquid filled tank. It is hard to describe the distinct difference in words but I would be glad to discuss this matter with members of this Committee and provide images to illustrate this point.

VI. Conclusion

I recommend that the Senate Finance Committee issue an unfavorable report for Senate Bill 244. It makes absolutely no sense to pass legislation based upon the mere possibility of

harm despite very promising and positive research data to date regarding ESDs. Cigarettes were banned in public places based upon irrefutable scientific data that confirmed the dangers of secondhand smoke. No such data exists to begin to establish irrefutable proof that secondhand vapor is harmful to anyone. Actually, the evidence to date indicates that secondhand vapor poses little to no risk to bystanders. In the alternative, if this Committee were to decide to issue a favorable report, I would ask for exceptions to the law such as places where, primarily or exclusively, adults congregate like bars, restaurants, taverns and casinos. Again, I am not opposed to this Bill if it only bans the use of cannabis vaporizers.