| (Original Signature of Member)  |
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| 115TH CONGRESS 1ST SESSION  H. R.   |
| To prohibit the sale or distribution of to<br>bacco products to individuals under the age of $21$ . |
| IN THE HOUSE OF REPRESENTATIVES   |
| Ms. DeGette introduced the following bill; which was referred to the Committee on                   |
| A BILL  |
| To prohibit the sale or distribution of tobacco products to individuals under the age of 21.        |
| 1 Be it enacted by the Senate and House of Representa   |
| 2 tives of the United States of America in Congress assembled                                       |
| 3 SECTION 1. SHORT TITLE.   |
| 4 This Act may be cited as the "Tobacco to 21 Act"  |
| 5 SEC. 2. FINDINGS.   |
| 6 Congress finds the following:   |
| 7 (1) Tobacco use has caused more than  |

20,800,000 premature deaths in the United States

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| 1  | since the Surgeon General's first report on smoking   |
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| 2  | in 1964.  |
| 3  | (2) The 1964 Surgeon General's report linked          |
| 4  | cigarette smoking to cancer, and since then, other    |
| 5  | tobacco products, including cigars, cigarillos, roll- |
| 6  | your-own products, and smokeless tobacco have been    |
| 7  | causally linked to cancer.                            |
| 8  | (3) While substantial gains have been made            |
| 9  | since 1964, tobacco use remains the leading prevent-  |
| 10 | able cause of death in the United States, responsible |
| 11 | for more than 480,000 premature deaths each year.     |
| 12 | (4) Tobacco use costs the United States ap-           |
| 13 | proximately \$170,000,000,000 in direct medical       |
| 14 | costs and \$156,000,000,000 in lost productivity      |
| 15 | every year.   |
| 16 | (5) More than 36,000,000 people in the United         |
| 17 | States still smoke, and the tobacco industry con-     |
| 18 | tinues to challenge tobacco control measures in       |
| 19 | court, manipulate products to evade existing regula-  |
| 20 | tions, introduce new and dangerous tobacco prod-      |
| 21 | ucts, and spend billions on marketing to deceive the  |
| 22 | public and addict more children.                      |
| 23 | (6) An estimated 5,600,000 youth aged 17 and          |
| 24 | under are projected to die prematurely from a to-     |

| 1  | bacco-related illness if prevalence rates do not       |
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| 2  | change.  |
| 3  | (7) Each day in the United States, nearly 2,500        |
| 4  | youth under 18 years of age smoke their first ciga-    |
| 5  | rette.   |
| 6  | (8) Use of tobacco products in any form is not         |
| 7  | safe, especially during adolescence, as such use can   |
| 8  | lead to nicotine dependence and subsequent tobacco-    |
| 9  | related diseases and death.                            |
| 10 | (9) Adolescents are especially vulnerable to the       |
| 11 | effects of nicotine and nicotine addiction and appear  |
| 12 | to show signs of nicotine addiction at lower levels of |
| 13 | exposure compared to adults.                           |
| 14 | (10) Nicotine exposure during adolescence may          |
| 15 | have lasting adverse consequences on brain develop-    |
| 16 | ment. According to the Surgeon General, the use of     |
| 17 | products containing nicotine in any form among         |
| 18 | youth, including in electronic cigarettes, is unsafe.  |
| 19 | (11) The likelihood of developing smoking-re-          |
| 20 | lated cancers increases with duration of smoking.      |
| 21 | Therefore, smokers that start at younger ages and      |
| 22 | continue to smoke are at higher risk for tobacco-re-   |
| 23 | lated disease and death.                               |
| 24 | (12) National data show that about 95 percent          |
| 25 | of adult smokers begin smoking before they turn 21.    |

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| 1  | The ages of 18 to 21 are a critical period when          |
| 2  | many smokers move from experimental smoking to           |
| 3  | regular, daily use.                                      |
| 4  | (13) Three-quarters of people of the United              |
| 5  | States favor raising the tobacco age of sale to 21       |
| 6  | years, including 7 in 10 smokers.                        |
| 7  | (14) Each year, nearly 500,000 youth aged 12             |
| 8  | to 17 use smokeless tobacco for the first time, and      |
| 9  | young adults aged 18 to 24 use smokeless products        |
| 10 | at twice the rate of older adults aged 45 to 64.         |
| 11 | (15) Electronic cigarettes are the most com-             |
| 12 | monly used tobacco product among youth. According        |
| 13 | to the Surgeon General's 2016 report on electronic       |
| 14 | cigarettes, electronic cigarette use is strongly associ- |
| 15 | ated with the use of other tobacco products among        |
| 16 | youth and young adults.                                  |
| 17 | (16) The 2015 report of the National Academy             |
| 18 | of Medicine entitled, "Public Health Implications of     |
| 19 | Raising the Minimum Age of Legal Access to To-           |
| 20 | bacco Products", concluded that raising the min-         |
| 21 | imum legal age of sale of tobacco products nation-       |
| 22 | wide will reduce tobacco initiation, particularly        |
| 23 | among adolescents aged 15 to 17, and will improve        |
| 24 | health across the lifespan and save lives. Specifically, |
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the report said that raising the minimum legal age

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| 1  | of sale of tobacco products nationwide to age 21           |
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| 2  | would, over time, lead to a 12-percent decrease in         |
| 3  | smoking prevalence.  |
| 4  | (17) The National Academy of Medicine report               |
| 5  | also predicts that raising the minimum legal age of        |
| 6  | sale of tobacco products nationwide to age 21 would        |
| 7  | result in 223,000 fewer premature deaths, 50,000           |
| 8  | fewer deaths from lung cancer, and 4,200,000 fewer         |
| 9  | years of life lost for those born between 2000 and         |
| 10 | 2019. In addition, the report concluded that raising       |
| 11 | the minimum legal age of sale would result in near         |
| 12 | immediate reductions in preterm birth, low birth           |
| 13 | weight, and sudden infant death syndrome.                  |
| 14 | (18) Regulating the retail environment, actively           |
| 15 | enforcing laws, and educating retailers are strategies     |
| 16 | that Federal, State, and local governments can take        |
| 17 | to restrict the availability of tobacco products to        |
| 18 | youth.   |
| 19 | (19) Five States, the District of Columbia, and            |
| 20 | more than 230 localities in an additional 13 States        |
| 21 | have raised the minimum legal tobacco sale age to          |
| 22 | 21.  |
| 23 | SEC. 3. PROHIBITION AND ENFORCEMENT.                       |
| 24 | (a) In General.—Notwithstanding any other provi-           |
| 25 | sion of law, including any Federal regulation, it shall be |

| 1  | unlawful to sell or distribute a tobacco product to anyone |
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| 2  | under the age of 21.                                       |
| 3  | (b) Enforcement.—  |
| 4  | (1) IN GENERAL.—The Secretary of Health and                |
| 5  | Human Services is authorized to enforce the prohibi-       |
| 6  | tion under subsection (a) and shall take necessary         |
| 7  | action to enforce such prohibition, including, as ap-      |
| 8  | propriate—   |
| 9  | (A) conducting undercover compliance                       |
| 10 | checks, performing retailer inspections, initi-            |
| 11 | ating enforcement actions for noncompliance,               |
| 12 | and taking any other measures appropriate to               |
| 13 | help ensure nationwide compliance with such                |
| 14 | prohibition; and   |
| 15 | (B) establishing requirements that retailers               |
| 16 | check identification or use other methods to en-           |
| 17 | sure compliance with subsection (a), or issuing            |
| 18 | guidance concerning the responsibility of retail-          |
| 19 | ers to ensure such compliance.                             |
| 20 | (2) Enforcement authority.—In the case of                  |
| 21 | a violation of subsection (a), the Secretary of Health     |
| 22 | and Human Services may apply the penalties under           |
| 23 | section 303 of the Federal Food, Drug, and Cos-            |
| 24 | metic Act (21 U.S.C. 333), as though such sub-             |
| 25 | section (a) were a regulation promulgated under sec-       |

- tion 906(d)(1) of the Federal Food, Drug, and Cos-
- 2 metic Act (21 U.S.C. 387f(d)(1)), notwithstanding
- 3 paragraph (3)(A)(ii) of such section 906(d).
- 4 (c) Definition.—In this Act, the term "tobacco
- 5 product" has the meaning given such term in section
- 6 201(rr) of the Federal Food, Drug, and Cosmetic Act (21
- 7 U.S.C. 321(rr)).

## 8 SEC. 4. NON-PREEMPTION.

- 9 Nothing in this Act shall be construed to prevent a
- 10 State or local governmental entity from establishing, en-
- 11 forcing, or maintaining a law with respect to sales of to-
- 12 bacco to individuals below a minimum age, provided that
- 13 such State or local law is at least as restrictive as the
- 14 Federal law.