

**Tobacco Use Prevention and Control (TUPAC) Program  
Tobacco Settlement Revenue Oversight Committee (TSROC)  
Estimated Outcomes of Additional Investments**  
*Updated November 30, 2017*

**Question:** What kind of outcomes might we see in New Mexico with additional investments in tobacco use prevention and control? For example, what would we see for every additional million dollars?

**Answer:** One of the best-studied areas is that of impact of investment on adult smoking prevalence and related smoking-attributable healthcare expenses. Below is a table of several funding scenarios for New Mexico tobacco prevention and cessation efforts. For an initial **million-dollar** additional investment, we estimate the following after **five** years:

- A decrease of adult smoking of one-half percentage point from 16.6% baseline in 2016 to 16.1% in 2021
- 8,000 fewer adult smokers in 2021 than in 2016
- \$7.6 million in savings in smoking-attributable healthcare expenses
- Additional outcomes specific to youth smoking and reduced exposure to secondhand smoke are included in the second document that accompanies this analysis on youth tobacco prevention activities.

Funding Scenarios for Comprehensive Tobacco Use Prevention and Control in New Mexico	Additional Annual Investment	Total Investment	Adult Smoking Prevalence 2016 (baseline)	Adult Smoking Prevalence 2021 (forecast)	Estimated # of Adult Smokers 2021 (forecast)	Estimated Additional Savings in Smoking-Attributable Healthcare Expenses after 5 years
1: Level Funding* (\$6.6 million, baseline)	\$0	\$6.6 million	16.6%	17.3%	278,400	\$0
2: \$1 million additional annual investment	\$1 million	\$7.6 million	16.6%	16.1%	259,100	\$7.6 million
3: Half of CDC Recommended Annual Investment (\$11.4 million)	\$4.8 million	\$11.4 million	16.6%	15.6%	251,000	\$34.5 million
4: Full CDC Recommended Annual Investment (\$22.8 million)	\$16.2 million	\$22.8 million	16.6%	15.0%	241,400	\$123.1 million

\*Current funding = \$6.6 million total (\$5.4 million from MSA to TUPAC; \$250,000 from MSA to Dept Indian Affairs; and \$0.9 million from CDC to TUPAC). Current smoking-attributable healthcare expenses amount to \$844 million annually).

Reference: Max W, Sung HY, & Lightwood, J. The impact of changes in tobacco control funding on healthcare expenditures in California, 2012-2016. *Tob Control* 2013, 22: e10-e15, January 17, 2012. In consultation with CDC, NM-specific adult smoking prevalence and healthcare expenses were used to forecast and extrapolate from CA's findings.