

In advance of World No Tobacco Day for 2025 (May 31, 2025), the American Lung Association is releasing this report to look at the impacts of the elimination of the Center for Disease Control and Prevention (CDC)'s Office on Smoking and Health on state tobacco prevention and reduction programs. Tobacco use¹, including exposure to secondhand smoke, continues to be the leading cause of preventable death in the U.S. causing close to half a million deaths every year and millions more people live with diseases and conditions caused by tobacco use. There is no pathway to reducing chronic disease in this country without continuing to prevent and reduce tobacco use.

On April 1, 2025, all staff at the Center for Disease Control and Prevention (CDC)'s Office on Smoking and Health that had not taken earlier retirement or other buyout offers were officially notified by the Trump administration that they were being laid off as part of a reduction in force. Around the same time period, CDC's highly successful "Tips from Former Smokers" campaign that has helped more than a million people quit smoking since it started in 2012 was also canceled for 2025 except for ads that were already in circulation. The 2025 National Youth Tobacco Survey that measures youth use of tobacco products was also pulled early from the field.

When combined with the substantial staff cuts at the U.S. Food and Drug Administration's Center for Tobacco Products announced at the same time, the federal government has virtually abandoned its role to help tobacco users quit and prevent kids from starting. It is also a substantial gift to the tobacco industry and will result in needless additional addiction, disease and death from use of tobacco products.

"Today is a good day for Big Tobacco and a bad day for anyone with lungs." — American Lung Association President and CEO Harold Wimmer, [April 1, 2025 press release](#)

It will cost rather than save the federal government money as tobacco use costs the country over \$600 billion in healthcare costs and lost productivity each year.¹ In addition, every dollar invested in strong tobacco prevention and reduction programs saves up to \$55 mostly in avoided healthcare costs.²

However, what may be less well known is that a significant amount of the CDC Office on Smoking and Health's budget was distributed to all 50 states, the District of Columbia and U.S. Territories through its National Tobacco Control Program. In a majority of states this amounted to \$1 million or more in funding for tobacco prevention and reduction activities.

On April 28, 2025, federal funding awarded to states for the previous year officially expired, and there is no indication that the Trump Administration intends to renew them at this time. However, these unnecessary cuts will still have significant impacts in many states, including:

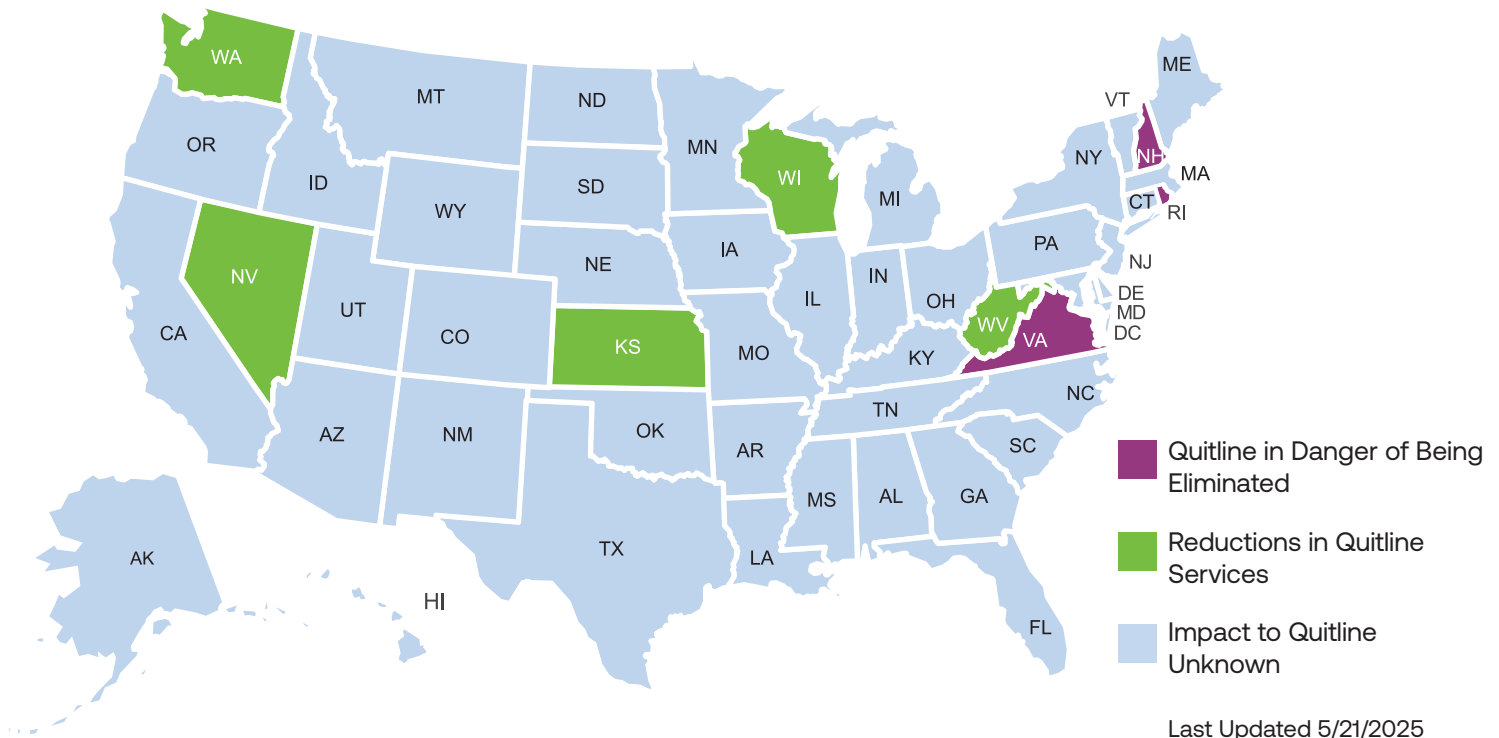
- Elimination or a significant reduction in service for tobacco quitlines in many states, a service that provides counseling by phone and in some cases by text to help tobacco users quit. See map on the next page for

¹References to tobacco in this report refer to commercial tobacco and not the sacred and traditional tobacco that may be used for ceremonial or medicinal purposes by some Tribal communities.

what is known about a reduction in service when this report was released.

- Elimination of programs that work with school kids in K-12 schools that help their peers reject tobacco use, in part by bringing to light how the tobacco industry works to target teens.
- Cuts to state tobacco control program staff, which are made worse by the sudden ending of these grants leaving states with less time to make adjustments. In some cases, states had already passed state budgets for next year and/or adjourned for the year making it even harder to adjust.
- Loss of surveillance data, making it more difficult for states and counties to target their limited resources in the most effective ways.

Reductions in Quitline Services from Federal Funding Cuts



Here are several examples of the impacts so far to specific states²:

- **Funding is Entirely Eliminated:** In New Hampshire, federal funding provides nearly two-thirds of the funding for tobacco prevention and reduction activities in the state, and the loss is expected to cause significant cuts on its own. However, the New Hampshire House of Representatives eliminated all state funding for its tobacco prevention and reduction program too, meaning there will be no proven interventions aimed at preventing and reducing tobacco use in the state if the budget is enacted as passed through the House.

²Information was updated as of May 19, 2025.

- **Virtually All Funding Gone:** Georgia, Rhode Island and West Virginia provided little state funding to their tobacco prevention and reduction programs making the loss of federal funding very damaging. The Tobacco Free Rhode Island Network in Rhode Island and the Raze program in West Virginia that worked with youth in schools to help prevent their peers from starting to use tobacco products both had all funding completely eliminated. The part of Georgia's tobacco use prevention program supported by federal funding is set to be eliminated later this week on May 30th.
- **State Tobacco Funding Only Used for Specific Tobacco Reduction Activities:** Virginia had a unique set-up where all state tobacco prevention and reduction funding went to a separate state foundation focused on preventing youth tobacco use and federal funding was used for everything else. This means that the state tobacco quitline will be shut down and all other efforts to help tobacco users quit will stop unless the state legislature is able to act.
- **Funding for Many Tobacco Control Program Staff Tied to Federal Funding:** – Many state tobacco prevention and reduction staff in New York and North Carolina and all state tobacco prevention and reduction staff in Texas were funded using federal dollars. Unless state legislatures in all of these states are able to intervene and re-direct state dollars to fund at least some staff, this will cripple these programs' ability to prevent and reduce tobacco use. The federal funding cuts occurring soon after the state's new fiscal year started makes this problem more severe in New York.

On World No Tobacco Day, the American Lung Association calls on Congress to act to reverse these reckless cuts to the country's tobacco prevention and reduction activities.

While adult cigarette smoking has been steadily declining over the past decade and is at historic lows at 10.8% or 27 million people, according to the 2023 National Health Interview Survey,³ 490,000 people continue to die each year from a tobacco-caused disease.⁴ The country has also been making progress in reducing youth tobacco use, including e-cigarette use with 5.9% or 2.25 million middle and high school students currently using tobacco products.⁵ However, sharp spikes in youth tobacco use can occur as they did during the youth vaping epidemic from 2017 to 2019. Our nation cannot afford to reverse course now on its efforts to reduce tobacco use and the chronic disease it causes.

¹U.S. Department of Health and Human Services. *The Health Consequences of Smoking — 50 Years of Progress: A Report of the Surgeon General*. U.S. Department of Health and Human Services; 2014.

²CDC. OSH Partners with States. Available at: <https://www.cdc.gov/tobacco/programs/osh-partners-with-states.html>.

³CDC. National Center for Health Statistics. National Health Interview Survey, 2023. Analysis by the American Lung Association Epidemiology and Statistics Unit using SPSS software.

⁴U.S. Department of Health and Human Services. *Eliminating Tobacco-Related Disease and Death: Addressing Disparities—A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, 2024.

⁵Jamal A, Park-Lee E, Birdsey J, et al. [Tobacco Product Use Among Middle and High School Students — National Youth Tobacco Survey, United States, 2024](#). MMWR Morb Mortal Wkly Rep 2024;73:917–924.

Appendix: How Much of Overall State Tobacco Prevention and Reduction Budgets Does Federal Funding Make Up

State	FY2025 CDC/OSH Funding to States	FY2025 Overall Tobacco Control Program Funding	Federal Funding as a Percentage of Overall State Tobacco Control Program Funding
Alabama	\$1,682,740	\$3,492,857	48.2%
Alaska	\$1,284,919	\$7,711,719	16.7%
Arizona	\$1,708,792	\$20,308,792	8.4%
Arkansas	\$1,522,930	\$12,802,045	11.9%
California	\$3,552,129	\$225,065,462	1.6%
Colorado	\$1,692,350	\$41,293,191	4.1%
Connecticut	\$1,177,808	\$2,677,808	44.0%
Delaware	\$991,511	\$10,933,191	9.1%
District of Columbia	\$1,031,660	\$4,556,555	22.6%
Florida	\$2,883,131	\$90,269,652	3.2%
Georgia	\$2,127,823	\$4,261,263	49.9%
Hawaii	\$1,156,607	\$9,332,793	12.4%
Idaho	\$1,171,888	\$5,816,588	20.1%
Illinois	\$2,241,976	\$12,491,976	17.9%
Indiana	\$1,832,809	\$10,944,961	16.7%
Iowa	\$1,137,971	\$5,408,142	21.0%
Kansas	\$1,516,090	\$3,456,806	43.9%
Kentucky	\$1,656,354	\$6,400,654	25.9%
Louisiana	\$1,635,696	\$6,458,036	25.3%
Maine	\$1,169,002	\$17,074,579	6.8%
Maryland	\$1,694,510	\$23,006,703	7.4%
Massachusetts	\$1,902,654	\$8,212,407	23.2%
Michigan	\$2,347,639	\$6,953,539	33.8%
Minnesota	\$1,596,128	\$13,657,468	11.7%
Mississippi	\$1,341,100	\$10,036,100	13.4%
Missouri	\$1,949,182	\$5,065,182	38.5%
Montana	\$1,356,206	\$6,567,057	20.7%
Nebraska	\$439,313	\$4,091,459	10.7%
Nevada	\$1,384,475	\$2,334,475	59.3%

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State	FY2025 CDC/OSH Funding to States	FY2025 Overall Tobacco Control Program Funding	Federal Funding as a Percentage of Overall State Tobacco Control Program Funding
New Hampshire	\$1,144,210	\$1,751,051	65.3%
New Jersey	\$1,855,458	\$9,416,451	19.7%
New Mexico	\$1,142,861	\$6,827,361	16.7%
New York	\$2,905,769	\$42,139,369	6.9%
North Carolina	\$2,353,231	\$15,702,831	15.0%
North Dakota	\$1,055,244	\$7,112,128	14.8%
Ohio	\$2,464,914	\$10,244,914	24.1%
Oklahoma	\$1,618,668	\$37,971,718	4.3%
Oregon	\$1,556,750	\$30,356,750	5.1%
Pennsylvania	\$2,399,303	\$20,775,297	11.5%
Rhode Island	\$1,383,858	\$2,163,686	64.0%
South Carolina	\$1,720,878	\$7,720,878	22.3%
South Dakota	\$1,046,792	\$5,546,792	18.9%
Tennessee	\$1,664,198	\$3,664,198	45.4%
Texas	\$3,349,957	\$9,428,349	35.5%
Utah	\$1,256,406	\$17,403,806	7.2%
Vermont	\$1,101,504	\$3,793,525	29.0%
Virginia	\$1,847,658	\$11,256,934	16.4%
Washington	\$1,828,532	\$6,741,532	27.1%
West Virginia	\$1,229,006	\$1,680,410	73.1%
Wisconsin	\$1,588,681	\$8,291,437	19.2%
Wyoming	\$1,020,771	\$3,630,436	28.1%

Note: Information on FY2025 State and Centers for Disease Control Prevention Office on Smoking and Health Funding comes from the [American Lung Association's State of Tobacco Control 2025 report](#).