



**Testimony of David G. Greineder
Pennsylvania Government Relations Director**

**before the House Health Committee
regarding House Bill 682 (Amending the Clean Indoor Air Act)**

**Harrisburg, Pennsylvania
June 15, 2015**

Chairman Baker, Chairman Fabrizio, and members of the House Health Committee.

My name is David Greineder. I am the Pennsylvania Government Relations Director for the American Heart Association. On behalf of our association, thank you for the opportunity to testify today on House Bill 682, legislation that would greatly strengthen the Commonwealth's clean indoor air law.

I want to thank our coalition partners at the table with me this morning – Diane Phillips with the American Cancer Society – Cancer Action Network, and Deb Brown with the American Lung Association. We are all part of a coalition called “Breathe Free PA” that advocates for the right of every person to breathe clean, safe, smoke-free air, regardless of where they work. Together, our coalition brings literally decades of experience and institutional knowledge on this issue. I encourage members of this committee to use us a resource should you have any questions or concerns regarding our campaign for clean indoor air.

I want to especially thank Representative Murt for introducing House Bill 682 and for his leadership on this issue. We fully support your legislation as written and look forward to working with you, the committee, and the full House as the bill advances.

The American Heart Association was founded in 1924 and is the nation's oldest and largest volunteer organization dedicated to fighting cardiovascular disease and stroke. We have a presence in all 50 states, with about 150 local offices and 2,600 employees. Our volunteer network is made up of 22.5 million devoted individuals working together to advocate for strong and effective public health policies.

Our bold and ambitious goal is to improve the cardiovascular health of all Americans by 20 percent, while reducing deaths from cardiovascular diseases and stroke by 20 percent, both by the year 2020. With the help of our volunteers, we have been working toward this goal by supporting funding for innovative research, educating the public on heart disease prevention, advocating for strong and effective public health policies, training millions of people in CPR, improving the quality of care in hospitals, and training scientists and other healthcare professionals.

One policy that will improve the health of our citizens and ultimately bring us closer to our 20/20 goal is strengthening the Commonwealth's clean indoor air law. The American Heart Association and our Breathe Free PA coalition partners were instrumental in advancing legislation to the Governor's desk in

2008, which was enacted as Act 27. While we supported the end product, we were fully aware that it was not a perfect bill and additional reforms would be needed in the future. We are at that juncture now.

The coalition has been working to strengthen Act 27, and it has been at the center of the American Heart Association's legislative initiatives. The intent of the Clean Indoor Air Act is clear: to protect the public from secondhand smoke exposure, which is linked to cancer, heart disease, asthma and other serious health problems in non-smokers.

As you will hear from our volunteer, Dr. Mumtaz, Chief of Cardiovascular and Thoracic Surgery at the PinnacleHealth Cardiovascular Institute, breathing even a little secondhand smoke can be very dangerous to one's health. The U.S. Surgeon General reports that tobacco smoke contains more than 7,000 substances, including hundreds that are toxic and nearly 70 that are known or suspected to cause cancer. Exposure to these chemicals has an immediate and adverse impact on the cardiovascular system, damages blood vessels, makes blood more likely to clot, and increases the risk for heart attack and stroke.

Given these facts, we have concerns about the health of Pennsylvania workers who work in an environment that is proven to be dangerous. According to the Pennsylvania Alliance to Control Tobacco (PACT), secondhand smoke kills more than 3,000 Pennsylvanians each year. That is far too many. Unfortunately, the law we have in place is not only an uneven playing field for business, but also exposes thousands of workers to secondhand smoke. This is especially troubling in Pennsylvania because, according to the Center for Disease Control (CDC), the adult smoking rate is 21 percent and the youth smoking rate is 18.4 percent – both higher than the national average of 18.1 percent and 15.7 percent respectively. In fact, 11,800 youth become new daily smokers each year, and 22,000 adults die annually due to smoking. These two statistics alone add over \$6 billion in annual health care costs.

We believe that strong smoke-free workplace laws are the only sure protection to secondhand smoke exposure. Smoking sections, separate rooms and ventilation systems do not remove the hazards of secondhand smoke. In fact, the American Society of Heating, Refrigeration, and Air Conditioning Engineers (ASHRAE), the body that sets national standards for indoor air quality and ventilation, affirms that HVAC systems and air cleaning technologies do not address the health hazards of secondhand smoke. Further, ASHRAE updated its indoor air quality policy in 2015 to affirm that even e-cigarette smoke should not be permitted inside buildings, along with tobacco smoke.

We understand the concern business owners may have on the impact a comprehensive smoke-free law would have on their business. According to the Campaign for Tobacco Free Kids, as of January 2014, 65 percent of Americans, or 200 million people, already live in areas that have passed smoke-free laws in restaurants and bars.

Moreover, the American Heart Association has heard testimonials from volunteers in Pennsylvania who are restaurant owners. They tell us they were previously opposed to the law, but now supportive because of the positive impact going smoke-free has had on their business. To support these testimonials, there have been numerous economic studies and analyses published that show smoke-free laws do not hurt restaurant or bar patronage, employment, sales or profits.

For example, in 2013, a study was published in the journal *Preventing Chronic Disease*, one of the largest studies on this issue to-date, that shows smoke-free laws did not have an adverse impact on the restaurant and bar industry in nine states: Alabama, Indiana, Kentucky, Mississippi, Missouri, North Carolina, South Carolina, Texas and West Virginia. In West Virginia, the study even showed that the smoke-free laws were associated with an increase in restaurant employment.

Similarly, analyses of the impact of smoke-free laws in towns and cities in Missouri, Minnesota, Washington State, Kentucky, New York, California, Massachusetts, Florida, Texas and Delaware – all with stronger smoke-free laws than Pennsylvania – have found that those laws protect public health without harming business.

In fact, a recent U.S. Surgeon General report shows that enacting comprehensive smoke-free laws is the most effective approach to reducing cardiovascular events. For example, New York passed their clean indoor air law in 2003. A study published by the *American Journal of Public Health* found that there were 3,813 fewer hospital admissions for heart attacks only a year later, an 8 percent decline. The study further showed that the lower hospital admission rate translated into a direct health care cost savings of \$56 million. So you can see the immediate impact these laws have not only on public health, but on health care costs.

The public also supports comprehensive clean indoor air laws. A public opinion poll commissioned in 2013 by the American Lung Association reveals that over 70 percent of registered Pennsylvania voters favor legislation that extends the Commonwealth's smoke-free law to all indoor workplaces, including casinos, bars and restaurants. And, nearly 63 percent favor including private clubs so that all workplaces are smoke-free.

Fortunately, this committee has the ability and an opportunity to strengthen the clean indoor air law, protect the health of Pennsylvanians, and reduce the burden that secondhand smoke places on an already strapped health care system. By passing House Bill 682, you will help protect residents and workers from the dangers of secondhand smoke.

I would be remiss if I did not thank the individual members of this committee for their time and attention. I have had the opportunity to meet with many of you personally these last few weeks and I appreciate you listening to our views and for being honest in your comments. I will reiterate the offer I extended earlier to please use us as a resource should you have any questions or need additional information.

For those who want to get involved in our campaign for clean indoor air, please go to our website at www.breathefreepa.org and sign the smoke-free resolution today. You can also help us spread the message by sharing the website address via social media outlets.

Mr. Chairman, thank you for the opportunity to testify. I would be happy to answer any questions you may have.