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Cigarette tax addresses two issues

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Wisconsin Gov. Jim Doyle did an abrupt about-face last week when he endorsed the idea of an additional \$1-per-pack cigarette tax.

If approved, the state would collect a total of \$1.77 on every pack of cigarettes sold here. The new fee would add at least \$227 million to state coffers — not including federal matching funds if the money were spent as lawmakers propose.

They want the \$250 million funneled directly into two areas — expanding access to health care and Medicaid and helping people quit smoking.

The plan came from the Healthy Wisconsin Council, a group impaneled by Doyle to search for ways to improve health care. And if the cash went to Medicaid and health care funds, it likely would be at least partially matched by federal funds.

There are several reasons to be leery of the proposal:

- u It would make the state financially dependent upon smokers. And if it achieves what it intends to, the source of revenue would gradually decrease as smokers quit their habit.

- u Lawmakers and Doyle himself have been notoriously untrustworthy with designated funds. Former Gov. Scott McCallum raided a tobacco settlement fund to balance the state budget, and Doyle did the same thing with gasoline tax money that was supposed to go toward road repair and construction. We're not confident officials will keep their hands off new tobacco tax money during tough budget times.

- u A \$1-per-pack tax could easily be thwarted by people along the borders who could cross state lines to buy cheaper smokes elsewhere. It also might prompt some to use the Internet to order cigarettes delivered to their homes.

Those are reasons to be leery, but not enough to reject the tax.

First and foremost, all financial considerations aside, a \$1 tax might be enough to deter young people from adopting a habit that inevitably leads to a lifetime of pain and regret.

The new fee would push the price of a pack to about \$5. The minimum wage for minors working in Wisconsin is \$5.90 an hour, and for adults it's \$6.50. So a pack-a-day

smoker would have to work an hour or more (after taxes) every day just to afford the habit.

That's a big bite, especially for kids who might only work 12 or 15 hours a week.

Second, a portion of the money would go to help people kick the habit.

Doctors say nicotine is as addictive as cocaine, heroin and other illicit drugs. Anyone who has tried to give up smoking can attest to that.

Success depends upon many things. Internally, smokers must really want to quit, not just realize that they should quit.

But that's often not enough. Many smokers can't quit without the help of counseling and medication. The tax must help fund those things.

And the other end of the equation — improving access to health care — is just as important.

According to a report released Monday, health insurance premiums in Wisconsin have increased more than four times faster than earnings over the last six years. Nationally, health insurance costs rose 6.4 times as fast as wages.

The trend is forcing more and more employers to eliminate health insurance benefits, thus forcing more and more workers onto publicly funded insurance rolls or to go without coverage.

The figures are supported by local evidence: Aspirus Wausau Hospital is on pace to provide more than \$11.2 million in charity care this year, up from \$8 million in its 2006 fiscal year.

The council suggested that tobacco tax money could be used to expand Medicaid to cover 61,000 more adults and to create a subsidized statewide pool to reduce the cost of health insurance for small businesses.

It's not a perfect solution. Only a complete redesign of the way we provide and pay for health care in this country can answer all the problems plaguing health care.

But the \$1 tax is a stopgap that the state should consider carefully.

And if it passes, lawmakers should keep their hands off.

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