CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON HEALTH

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April 27, 2017 Start: 10:17 a.m. Recess: 3:46 p.m.

HELD AT: Council Chambers - City Hall

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Lou Ruggeri Representative New York City Vapor Alliance

Igor Gromadskiy Nextgen Vapeshop

Stewart Bowers Vape Store Owner

[sound check]

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CHAIRPERSON JOHNSON: Good morning everyone. I'm Council Member Corey Johnson, Chair of the City Council's Committee on Health. I wanna welcome you to today's hearing on a package of bills related to smoking and tobacco.

The dangers of smoking are widely known; it causes cancer, increases the risk of heart disease and stroke and contributes to a wide array of other health problems. Despite these risks, the addictive nature of nicotine makes it incredibly difficult for a person to stop smoking once they have started. As a result, smoking is responsible for about 1 in 5 deaths annually or about 443,000 deaths per year in the United States, making it the leading cause of preventable death.

The best way to reduce smoking rate is by preventing young people from starting in the first place. Smoking rates among youth in New York City have declined precipitously over the last 15 years, but still remain too high.

Tobacco products that are not smoked, such as chewing tobacco, carry their own serious health risks. Youth use of tobacco products other

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than cigarettes has been rising in recent years, perhaps because these products are less expensive than cigarettes.

Progress in reducing smoking rates among adults has slowed in recent years, making it clear that we need to do more; New York City must be a leader in tobacco controls.

Research shows that raising the price of tobacco reduces consumption, particularly among young people; that is why I introduced Introduction 1544 which would set minimum prices for tobacco products that currently lack them, such as cigars, smokeless tobacco and shisha, that contains tobacco; it would establish a 10% tax on these products. This tax is authorized by State Law which requires the revenue to go towards public housing.

These bills would expand the Council's past legislation setting a minimum price for cigarettes and little cigars by granting the Department of Health and Mental Hygiene authority to raise these minimum prices in order to continue to drive down rates of tobacco usage.

We are also hearing a bill by Council Member Lander, Introduction 1547, which would cap the

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number of tobacco retailers in the City at the current number and not allow new businesses to sell tobacco until the number of these retailers is half of what it is today. There are currently almost 9,000 cigarette retailers in New York City, an average of one every five blocks citywide. We don't need this many tobacco retailers today, and as tobacco use, is reduced will need even fewer in the future.

Council Member Lander has another bill being heard today, Introduction 1131, which would prohibit the sale of tobacco at pharmacies, as CVS has already done voluntarily. San Francisco has taken these steps to reduce the number of tobacco retailers and has seen great success in reducing tobacco use rates.

Another bill that would affect retail tobacco is Introduction 1471, which I introduced; it would raise the retail cigarette dealer license fee. A higher license fee would encourage stores to stop selling cigarettes and help pay for enforcement efforts against untaxed cigarettes and other illegal activity.

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Introduction 1532, by Council Member

Fernando Cabrera, would require retail dealers of
electronic cigarettes to be licensed, easing
enforcement of minimum age requirements for these
products.

We are also hearing a package of amendments to the Smoke-Free Air Act relating to smoke-free housing. These bills, by Council Members Torres, Richards and Vacca, would prohibit smoking in common areas of multiple dwellings and in affordable housing projects that receive City funding in the future, as well as requiring apartment buildings to create smoking policies that are distributed annually to tenants. Indoor smoking can be a nuisance for neighboring tenants and these bills are to protect tenants who do not wanna worry about secondhand smoke in their apartment. They would be building on new federal policy that prohibits smoking in public housing, including NYCHA buildings.

Council Member Cabrera introduced another bill being heard today, Introduction 484 [sic], which prohibits smoking in a car with a child under the age of eight present in that car. Secondhand smoke is not safe at any level, particularly for young

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children; eight states have enacted laws to protect
children in private vehicles from secondhand smoke.

And finally, we will be hearing an updated version of Council Member Gentile's bill relating to hookah establishments, Introduction 139. This bill would prohibit new hookah bars from opening while allowing existing businesses to continue to operate under a strict new set of guidelines, including fire code and ventilation requirements, a new permitting system and a zero-tolerance policy for serving tobacco products.

I wanna thank the sponsors of all of these bills that we're hearing today for their commitment to tackling these important health issues, to the Department of Health and Mental Hygiene, Dr. Mary Bassett, our Commissioner, who has been a great partner with the Council on these pieces of legislation, and I look forward to hearing from them as well as advocates and others at today's hearing.

Before I finish up and turn it over to my colleagues for statements on their legislation today, I wanna just end with this; I think it's important to be honest and I said this at the press conference that the Mayor had last week about these bills. You

know I still struggle with my own nicotine use and I
think sitting up here and pretending like that's not
the case would be hypocritical; it's important for me
to be honest about that; it's not something that I'm
proud of; it's something that I struggle with; I have
struggled with it for a long time and I am someone
who has been clean and sober for nearly eight years
from alcohol and drugs, but quitting smoking has been
far harder than quitting and complete abstention from
alcohol and drugs, and I think that shows the power
of nicotine and for me, I think it's really important
to bring that personal story to this in knowing
personally what a difficult journey and struggle it
is to quite tobacco and nicotine use and how
challenging it is. New York City has been a leader
on this front; when we outlawed smoking in bars and
restaurants people said that it was gonna be really
horrible and I think if anyone talked about bringing
it back today there would be a revolt in New York
City to allow that. So we have to continue to be on
the cutting edge; hopefully these bills are gonna
help me personally moving forward and I look forward
to hearing from my colleagues and to working with the
Administration to see these bills moving forward

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So I wanna turn it over to my colleagues that have statements and I would like to start with Council Member Fernando Cabrera.

much for your leadership and I wanna thank also the committee members for the opportunity to share with you today. Thank you for this opportunity to hear testimony on two bills that I believe will safeguard the health of New Yorkers, especially children and youth.

Intro 1140 and Intro 1532 are part of a larger effort to completely eradicate smoking and ease the burden of disease that results from this practice.

Intro 1140 will prevent smoking in a car when a child is present and will characterize [sic] smoking in a vehicle with children under the age of eight as a primary offense.

Intro 1532 will require licensing of e-cigarette retail dealers and cap the number of licenses issued. Currently 15 states and the District of Columbia require a license to sell e-cigarettes, which contain nicotine, an addictive substance. The World Health Organization and the

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American Heart Association have recommended stricter laws and regulations for e-cigarettes and the CDC and the Surgeon General have found local licensing programs to be highly effective in preventing e-cigarette use by youth, who are more likely to

choose these than tobacco products.

I want to thank Theo [inaudible] and the advocates who have come today to give testimony and have supported this effort from the beginning. I also wanna thank David Seitzer, Senior Legislative Counsel and the staff for the work on this legislation. Thank you so much.

CHAIRPERSON JOHNSON: Thank you, Council Member Cabrera. We're gonna now go to Council Member Gentile.

COUNCIL MEMBER GENTILE: Thank you, Chair Johnson.

Good morning. My name is Council Member Vincent Gentile; I'm the Council Member representing the 43rd District in Brooklyn.

Since the passage of the groundbreaking
Smoke-Free Air Act in 2002, there has been an
enormous increase in the advent of hookah
establishments arising in neighborhoods all across

2	New York City, with flavors like Pirate's Cave, White
3	Gummy Bear and Bluebonnet, hookah smoking has grown
4	in popularity; patrons of all ages, even young
5	teenagers, have flocked to hookah lounges for the
6	thrill of smoking what they perceived was a safe
7	smoke, but let me clear the air hookah smoke, even
8	non-tobacco shisha, is not a safe smoke. The common
9	misconception that because hookah is filtered through
10	water it must be safe is simply not true. Hookah
11	smokers inhale high levels of nicotine in the case of
12	if it's laced with tobacco, but otherwise, in any
13	case, carbon monoxide, tar and other hazardous
14	substances, including carcinogens associated with the
15	combustion of the charcoal in the hookah pipe. These
16	toxins can have detrimental health impacts, with
17	premature death in those with cardiovascular and lung
18	disease, heart attacks, decreased lung functions, and
19	possibly cancer. Moreover, these chemicals are
20	inhaled much deeper and for longer periods of time
21	compared to cigarette smoking. While a cigarette
22	smoke is several minutes in short puffs, a hookah
23	session can last 45 minutes and can draw a much
24	deeper inhaling of the lungs. So it is of no
25	surprise that according to the Center for Disease

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Control and Prevention, one hookah smoking session — as you can see on the chart over there — one hookah smoking session is equivalent to 80-100 cigarettes.

Over the years, anecdotal and scientific evidence suggests that the number of hookah lounges has risen not just in my area of the city, but citywide. Most troublesome is the fact that the growth in popularity of hookah smoking has risen through the years, with as many as 17% of 12th graders reporting to have smoked hookah in the past year.

In New York City, part of the reason for all this is because hookah smoking is completely unregulated. The [inaudible] Smoke-Free Air Act has served the city well but it did not include hookah smoke when it was passed in 2002, which means all the bars and lounges serving hookah indoors operate completely outside of the Smoke-Free Air Act. Seven years ago I introduced a bill in the City Council that looked to regulate the industry in light of the health concerns and as a result of parents complaining to me that their young 15- and 16-year-old children were permitted to smoke in hookah lounges. Since that time, the evidence has only

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mounted about the health dangers that even nontobacco shisha presents. An so when I reintroduced
this bill this session, the Speaker and Chair Johnson
were prepared to give it a hearing and the testimony
at that hearing last year propelled this new version.
Last year the Administration, along with many
advocates and stakeholders, testified in support of
the legislation, but the testimony compelled us to
make it even better. We sat back down, reviewed the
testimony, brainstormed collectively, and created the
most effective solution to combating the elephant in
the room — the hookah-smoking surge amongst young
people in New York City, and that has resulted in
Intro 139-B.

This bill will add non-tobacco hookah smoking to the Smoke-Free Air Act, a classification that has long been overdue. This bill will for the first time require the existing hookah establishments to register with the Department of Health and Mental Hygiene for a permit and will prohibit those ill-intentioned proprietors from lacing shisha with tobacco to make it even more addictive and more dangerous than it already is. If caught doing so,

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these establishments will have their permits to operate pulled by the Department of Health.

Intro 139-B will set a minimum age requirement for entering into hookah lounges to 21, a provision that was not in the previous version. This age minimum is consistent with the age minimums of 21 years old to consumer alcohol and smoke cigarettes.

Intro 139-B will also mandate for the first time that hookah equipment and paraphernalia be clean and sterile. Too many communicable diseases can be so easily spread with the sharing of a mouthpiece or other paraphernalia.

Intro 139-B will also require that all hookah lounges meet general Fire Code provisions to ensure the fire safety of patrons. Fireproof drapes, portable fire extinguishers and furnace ventilation requirements for the heating of the charcoal are proactive steps to eliminate potential future tragedies.

Intro 139-B will also for the first time require standardized ventilation systems to enhance the air quality in hookah lounges. Caring for employees, nonsmoking patrons and even upstairs neighbors is a necessity because the effects of

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secondhand hookah smoke is just as dangerous as the effects of secondhand cigarette smoke. The health of employees was brought up at last year's hearing and we worked together to close the loophole by requiring protections against secondhand hookah smoke in the lounge and working areas. This bill does allow owners a three-year compliance period for what might be a costly provision based on the footprint of a particular establishment.

Finally, as an acknowledgement to owners, who as small business entrepreneurs have invested significantly into their business, Intro 139-B will grandfather in hookah lounges that generate 50% or more of their profit from the sale of shisha. concept is simple -- since business investment has come long before government regulation in this area, owners whose main source of revenue has come from the sale of hookah can continue to serve nontobacco shisha and we will not impose on them economic hardship and shutdown. But let me be clear, the evidence behind the health hazards of hookah smoking is undeniable; as I said, it's been the elephant in the room for far too long. Insisting that the status quo of unregulated hookah smoking continues is simply

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willful avoidance of the issue with possibly 2 3 catastrophic results. Conversely, completely banning the practice would be unfair to a small business 4 owner with a big investment and it would stymie the individual liberty for those consumers who are 6 adults. With this bill we can protect the youth and 8 their health and prevent their introduction to the concept of smoking while allowing adults to make a conscious decision to smoke and allow small business 10 owners to remain in business under new and long 11

After all the years of patience and persistence we have arrived at this moment with the mission of creating a health and safety-oriented regulatory system sensitive to all concerns, and I believe Intro 139 has done just that.

sought for strict regulations.

I would like to thank the Speaker for her support in these efforts; I wanna thank, particularly, Chair Johnson for his leadership and perseverance on this overlooked health issue; to my colleagues in the Council, 28 of whom are sponsors on this bill in addition to myself; to the Department of Health for their partnership and input; to my Legislative Director, Jonathan Shabshaikhes; and to

Mr. Seitzer here for their good work in putting this				
bill together, and there were many, many versions of				
this bill; and to almost two dozen stakeholders who				
have submitted letters of support or stood with us at				
the news conference, including the New York Academy				
of Medicine, the Americans for Nonsmokers' Rights				
Foundation, the Arab American Association, the Muslim				
American Association, the Moroccan American Council				
to Empower Women, the American Council of Minority				
Women, and thank you also to the countless				
professors, doctors and specialists for your unique				
insight into this issue, and also to the constituents				
of mine who brought this issue to my attention seven				
years ago.				

Thank you, Mr. Chairman; as we said today at the news conference, our message is that hookah smoke is no joke.

CHAIRPERSON JOHNSON: Thank you, Council Member Gentile. We're gonna go to Council Member Lander.

COUNCIL MEMBER LANDER: Thank you very much, Chair Johnson, thanks for your leadership on this issue and for your honest opening statement, which I think sets a very good tone for the hearing,

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and I also wanna say thank you to Dr. Bassett for your leadership and helping me understand and see how important this issue is. It's not every day here at the City Council that we get to do something that just demonstrably saves people's lives, but that's what we're doing today in a very big way. If we achieve our goal of reducing the number of New Yorkers who smoke by 160,000 by 2020; we will save something like 50,000 lives, and that is quite extraordinary and I'm humbled to have the opportunity to be a part of it and I'm grateful to all my colleagues.

As the Chair mentioned, Intro 1131-A would prohibit pharmacies, health institutions -pharmacies -- from selling cigarettes and tobacco
products. Now this is just plain commonsense that if
you're marketing yourself as a health institution you
shouldn't be hooking our kids on things that will
kill them; it's pretty straightforward, and it's not
only us who thought that that's plain commonsense; in
1970 the American Pharmaceutical Association declared
cigarette displays to be in conflict with the public
health roll of pharmacies and recommended that
pharmacies stop selling tobacco. Until 2014, none of

the major chains did now I wanna note that the
vast majority of independently owned pharmacies in
New York City, the vast majority, do not sell
cigarettes or tobacco products. And as the Chair
mentioned, and I wanna give them a big shout-out, in
2014 CVS stopped voluntarily taking the 1970
recommendation of the American Pharmaceutical
Association and it had great results, they
recently published a study that showed in the places
where they have a significant footprint that change
had a real impact a 1% decrease in the number of
the sale of cigarettes, and that's five fewer packs
per smoker, 95 million fewer packs overall, and one
encouraging thing also; a 4% increase in the sale of
nicotine patches in the same time and place as that.
So a real demonstrable impact; still leaving it
everywhere else, every other pharmacy and everywhere
else, and CVS is also still doing fine, so we are
highly confident that this bill will work; that it
will help people quit; that it will save lives and
reduce by about 550 the number of places in the city
where you can buy cigarettes and tobacco products.

And that goes along with my other bill in this package, Intro 1547, which will gradually reduce

the number of retail dealer licenses for retailers of
tobacco products by 50% in each community district as
those licenses are given up, either as in the case of
pharmacies, because hopefully the other bill will
eliminate them, or as a store closes or through
enforcement loses their licenses, so that we would
ultimately wind up with half the number of places,
about 9,000 and you can see the map up here
where retailers sell cigarettes. It is quite clear
that proximity and access lead especially young
people to smoke for the first time; there's one study
that suggests that young people are twice as likely
to start smoking when they have ready and available
access to retailers that sell cigarettes and tobacco
products, and we all just know this, especially in a
place like a New York City as the parent of two
teenagers we love that they meet with their
friends and hang out on the street corners, you know
near their bodegas and stores and pharmacies, but the
fact that that makes them more likely to wind up
starting smoking and get on a path to dying is
something we ought to do something about, so I'm
honored to be part of the package; I'm grateful for
everyone else's participation. Thank you.

COMMITTEE ON HEALTH

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CHAIRPERSON JOHNSON: Thank you very much. We're gonna go to Council Member Donovan

COUNCIL MEMBER RICHARDS: Thank you Chairman and thank you for your leadership on this package of bills.

My name is Council Member Donovan

Richards and I am the prime sponsor of Intro 977. This bill would ban smoking in multiple dwellings that are part of City-financed housing. We are looking at expanding on HUD's federal policy to ban smoking in public housing to ensure that any New Yorker who lives in a building financed by the City can breathe clean, healthy air to prevent chronic respiratory diseases and heart disease. However, the goal of this rule is by no means to make people homeless or to target low-income New Yorkers; enforcement measures have to be incremental, leaving enough time for every resident to comply with the ban; tracking potential violations will help us design such a procedure. We will also be able to ensure that the ban is not used as a pretext to evict vulnerable New Yorkers.

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From other cities' experiences, we can see that the last resort is hardly ever used, as an overwhelming majority of offenders finally comply with policy after one or two warnings. The possibility of an eviction is more a threat than anything that really actually happens in other cities.

I believe that this city has a responsibility to ensure that a mother and her newborn child can breathe clean air in the comfort of their own home. I believe that our grade school scholars should be able to do their homework at night without the distraction of breathing in their neighbor's secondhand smoke, and obviously I have a little bit of experience in this matter. I believe that we ought to protect our seniors who are aging and have more vulnerable respiratory systems, rather than permit someone to negatively affect the health of their neighbors. The truth is, when one of our neighbors chooses to smoke, everyone else in the vicinity is susceptible to their fumes. Smoke-free buildings are a luxury in New York City and I believe that this luxury should be afforded to all New Yorkers and not just simply some people who can shop

around on the open market. And there are several examples of buildings, such as Related -- I have buildings going up in my district that are actually smoke-free at the moment and all in the affordable housing context.

ambitious goal of creating 200,000 units of quality affordable housing and as much as I am an advocate that these buildings be green, safe and affordable, urge the Administration to demand that these tenants and landlords are ensuring that residents can actually breathe the cleanest and most fresh air possible in their buildings, and this is one way of doing it.

So I wanna thank you Chairman for your leadership here and once again, clean air should not be a luxury for some, but it should be a luxury for all.

CHAIRPERSON JOHNSON: Thank you very much. Now we're gonna go, lastly, to Council Member Vacca.

COUNCIL MEMBER VACCA: Thank you, Mr. Chair; members of this committee.

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My bill seeks to address secondhand smoke. We do have the authority right now, in buildings that are ten units or more, to enforce regulations and legislation that prohibits smoking in common areas, such as hallways and elevators and staircase, but in buildings with less than ten units, we do not have that legislative authority and that's what my bill does.

I think that doing all we can to make smoking more difficult is very important. Someone stopped me the other day and said, "Boy, we're reading about what the City Council is doing about smoking; you're making it so difficult for me to smoke." And I said, "Yes, yes we are. We value your life," and that's what I told this person, "and we value the life of other people that you're affecting." And I want you to know that I remember very well when Mayor Bloomberg and this Council stopped the smoking in the bars and restaurants and boy, some people thought it was the end of the world, but you know what; for a lot of people it wasn't the end of the world, it was a new life and it was an extension on their lives, and we did the right thing.

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COMMITTEE ON HEALTH 31 So I'm very conscious of this and it's a 2 3 major health issue and I think that my bill extends that right that tenants have who live in housing not 4 5 to be influenced by others, and does it make it more difficult for people to smoke? Yes, and it should 6 7 get more and more difficult. Thank you. 8 CHAIRPERSON JOHNSON: Thank you, Council 9 Member Vacca. Before I swear in the witnesses and allow them to give testimony, I want to acknowledge 10 11

my Deputy Chief of Staff for Legislation, Louis Cholden-Brown; the Committee Counsel, David Seitzer; and the Committee Policy Analyst, Crystal Pond. with that, I'm gonna turn it over to folks from the Administration, Commissioner Bassett and the Sheriff and Amit from DCA. So before you begin, if you could please raise your right hand. Do you affirm to tell the truth, the whole truth and nothing but the truth in your testimony before this committee and to respond honestly to council member questions?

COMMISSIONER BASSETT: I so affirm.

CHAIRPERSON JOHNSON: Thank you very

2.3 much. You may begin.

> COMMISSIONER BASSETT: Good morning, Chairman Johnson and members of the Committee.

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Dr. Mary Bassett, Commissioner of the New York City

Department of Health and Mental Hygiene and I am

joined today by Amit Bagga, Deputy Commissioner for

External Affairs at the Department of Consumer

Affairs, and Sheriff Joe Fucito from the Department

of Finance.

The mission of the Department is to improve the health of all New Yorkers and to reduce health inequities. As Health Commissioner, I am the City's doctor -- a role I take seriously. Among the most important advice for a long, healthy life that I can give my patients -- the residents of this great city -- is to stop smoking and using tobacco products. I am pleased to be here today to talk about this important issue. Thank you for the opportunity to testify on the suite of tobaccorelated bills currently before the Council for consideration.

On April 19, I joined Mayor de Blasio,

Deputy Mayor Palacio, Chairman Johnson, Council

Members Lander and Cabrera to announce a whole series

of proposals that will help us reduce the number of

smokers by 160,000 over the next three years. The

five bills, all of which I'm pleased will be

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discussed today, continue New York City's commitment to tobacco control by raising the minimum prices for all tobacco products, including cigarettes, and imposing a new 10% local tax on other tobacco products; reducing through attrition the number of tobacco retailers citywide; creating a retail license for e-cigarettes, and capping the number of e-cigarette retailers; requiring all residential buildings to create a smoking policy and disclose it to both current and prospective tenants; and banning the sale of tobacco products at pharmacies.

These bills will build on the work we have done with the Council in recent years. Since 2002, New York City's adult smoking rate has dropped by 33%, from 21.5% in 2002 to 14.3% in 2015, and the youth smoking rate has dropped by 67% from 2001 to 2015, from 17.6% to 5.8%. These reductions will have prevented 136,000 deaths in New York City by 2060. But we can't rest on our accomplishments. More than 900,000 adult and 15,000 young New Yorkers smoke, and an estimated 12,000 New Yorkers die from tobaccorelated illnesses each year. I would like to acknowledge all of today's bill sponsors -- Chairman Johnson, Council Members Lander, Cabrera, Torres,

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Vacca, Gentile, and Richards -- and thank them for addressing tobacco and e-cigarette use.

The first bill that I will discuss is
Intro 1544. This bill focuses on increasing the
price of both cigarettes and other tobacco products,
including cigars, smokeless tobacco and shisha. The
City has had a tax on cigarettes since 2002 and a
minimum price on cigarettes and little cigars since
2013, but it has never addressed the price of many
other tobacco products. All tobacco products are
inherently dangerous and contain nicotine, which is
addictive. Health impacts from tobacco use include
cancers, heart disease and lung disease.

The City's historical focus on reducing cigarette smoking has been justified by the heavy toll that cigarettes have had on the health of New Yorkers, and we've made remarkable progress decreasing smoking rates. However, consumption patterns and the market for tobacco products are changing. A greater proportion of our City's youth is using other tobacco products, such as cigars, including little cigars and cigarillos, and smokeless tobacco. In 2015, 5.8% of youth were smoking cigarettes while 5.7% were smoking cigars and 3.3%

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were using smokeless tobacco. In addition, between 2008 and 2014, the percentage of middle school students in New York City who had ever smoked hookah increased from 2.9% to 8.5%. In 2014, 16.1% of high school students reported that they had ever smoked hookah.

Raising the price of tobacco products through taxes and minimum prices is the single most effective way to decrease consumption and encourage tobacco users to quit. Studies have shown that raising the price of tobacco decreases youth initiation, encourages tobacco users to quit and reduces consumption among those who do not quit. Since youth are particularly sensitive to price increases, measures that raise the price of tobacco products are an effective strategy for reducing the use among this vulnerable population. Intro 1544 would increase the minimum price for cigarettes from \$10.50 to \$13.00 per pack. It is projected to lead to a 6.4% decline in adult cigarette smoking, or 28,000 fewer adult smokers. Among youth we project that there would be a 10% decline in cigarette smoking, which would lead to 1,000 fewer youth smokers. With a minimum price of \$13.00 a pack, New

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York City would once again claim the distinction of having the most expensive cigarettes in the nation.

Intro 1544 also sets a minimum price for various tobacco product categories, including smokeless tobacco, loose tobacco and shisha, and would be the first minimum price of its kind in the country for these products. In addition, the bill would increase the existing minimum price for little cigars from \$10.50 to \$13.00 a pack.

Finally, a State Public Housing Law from 1939 authorizes the City to impose a tax on other tobacco products. Any revenue generated from the tax is required by law to support public housing. The tax would be set at 10% of the minimum price for each non-cigarette tobacco product category and is estimated to produce revenue of \$1 million annually. We project the price increases will reduce cigar prevalence among youth by 10.5%, or 1,700 fewer cigar users. The smokeless tobacco prevalence among youth is projected to decrease by at least 23%, or 1,800 fewer users.

We must use every tool available to us to raise the price of these deadly products, especially since the State has not raised the cigarette tax

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since 2010 and has not allowed New York City to raise its local tax on cigarettes since 2002. We strongly support this bill and thank Chairman Johnson for introducing this needed price of legislation.

Now I will turn to Intro 1547. This bill updates the City's license for selling tobacco products in several important ways that, taken together, restrict access to tobacco. First, it acknowledges that to respond to changes in tobacco use, we need a license that applies to all tobacco products -- not just to cigarettes. Tobacco products other than cigarettes have become increasingly popular among youth in recent years. To properly regulate these products, a license update to include all tobacco products is necessary.

Second, the bill establishes a process for reducing the number of licenses to sell these products over time. The City has a high level of tobacco retail density, which you can see on the map that we have up behind me, with approximately now 8,200 licensed cigarette retailers. Studies show that easy access to tobacco retailers makes it harder for smokers to quit. In addition, youth who visit retail stores that sell tobacco every week are twice

as likely to try smoking as other youth. The bill
will cap the number of tobacco retailer licenses in
each community district at 50% of the current number
of licenses. No new licenses would be issued for
that community district until the number of licenses
falls below the 50% level. Based on estimates by the
Health Department and the Department of Consumer
Affairs, in ten years the bill may reduce the number
of tobacco retailers by up to 40%. And the map that
I brought today illustrates what would happen in one
neighborhood East Harlem over time, and you can
see that this will lead to a dramatic difference in
tobacco retail density. Current tobacco retailers
are allowed to keep their license indefinitely unless
those licenses are revoked for selling cigarettes to
minors or committing other violations. And the
person who buys ownership of a business with a
current tobacco license will be able to apply for
that license if the business has been in good
standing with the law for three consecutive years.
For these reasons, we strong support the passage of
this bill and thank Council Member Lander for
sponsoring this critical legislation.

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2 We also enthusiastically support 3 Intro 1131-A, Council Member Lander's bill that 4 prohibit pharmacies from selling cigarettes and once 5 the cigarette license is updated, prevent them from selling any other tobacco products. 6 Selling 7 cigarettes and other forms of tobacco alongside 8 health products runs counter to a pharmacist's mission, and the vast majority of independent pharmacies do not offer tobacco products. CVS 10 11 stopped selling tobacco in 2014; we join the Council Members in commending them for making that choice. 12 More than 80 jurisdictions have banned pharmacies 13 14 from selling tobacco products and e-cigarettes, 15 including San Francisco and Boston, and I'm excited 16 for New York City to join that list. It's important 17 to note that the number of chain pharmacies in San 18 Francisco has tripled since their pharmacy ban took 19 effect in 2008, demonstrating that stores can thrive 20 without tobacco sales.

Together, these two bills will greatly reduce the number of tobacco retailers over time, reducing tobacco us and improving health outcomes.

Next I want to discuss Intro 1532, which creates a separate license for selling electronic

cigarettes. Despite being on the market for fewer
than ten years, e-cigarettes were used by 15.9% of
New York City high school students in 2015, and
e-cigarette use is now more than twice as common
among youth as cigarette use. The increasing
popularity of e-cigarettes shows the importance of
this bill. Current e-cigarette retailers except
for pharmacies will have the opportunity to apply
for the new license during an open enrollment period.
After the open enrollment period expires, no new
licenses will be issued. Pharmacies will be
prohibited from selling these products. Fourteen
states and the District of Columbia have passed laws
requiring e-cigarette retailers and vape shops to
obtain either a license or a permit to do business,
and it is time New York City does the same. By
blocking any future growth of the e-cigarette
retailers, New York City will have the most
protective policy in the country.

Although e-cigarettes do not contain tobacco, these products typically contain nicotine, which is addictive, as well as potentially harmful chemicals that should be studied further to determine their cumulative health effects over time. Moreover,

there is emerging evidence that youth who use
e-cigarettes are more likely to try cigarettes. For
example, one study showed that youth non-smokers who
used e-cigarettes were more than four times as likely
to report having smoked one year later than non-
smokers who did not use e-cigarettes. There is
insufficient evidence that e-cigarettes are an
effective way to quit smoking, and in fact, Big
Tobacco is heavily invested in e-cigarettes. Many
e-cigarette companies use the same marketing
strategies that were once used to sell cigarettes as
glamorous products, not cessation devices, while also
appealing to youth with flavors like Sour Dream and
Bazooka. I brought some of these products along
today this is Sour Dream e-cigarette and this is
Sour Patch, the candy. As you can see from the
packaging, there's a clear effort to associate
e-cigarettes with other use-oriented products and
this candy, these addictive products. For these
reasons, we thank Council Member Cabrera for this
piece of legislation and we urge the Council to
approve this bill.

The next bill I would like to address is

Intro 1585. This bill will empower individuals to

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make informed decisions about where to live, and it may encourage more buildings to adopt smoke-free policies. There is no safe level of exposure to secondhand smoke, and there is increasing evidence of risks from even low levels of smoking exposure. Air monitoring studies confirm that smoke commonly travels through the building from a smoker's apartment into other apartments. Adult non-smokers exposed to secondhand smoke have higher risks of stroke, heart disease and lung cancer. Children exposed to secondhand smoke have higher risks of asthma attacks, respiratory illnesses, middle ear disease and Sudden Infant Death Syndrome.

Secondhand smoke infiltration in City residences is a common basis for complaints to 311, and more than one-third of adults report smelling cigarette smoke in their home that comes from other residences. Smelling secondhand smoke at home is more likely to afflict low-income New Yorkers than high-income New Yorkers, and those with children in the home than those without.

This bill requires all multi-unit residences in the City to choose a policy on smoking and to disclose that policy to the building's tenants

on an annual basis. In addition, prospective tenants
must receive a copy of the policy on smoking before
signing a lease or agreeing to buy an apartment.
This bill would inform tenants of rental, cooperative
and condominium units where smoking is permitted and
where it is prohibited in a particular building.
Since the U.S. Department of Housing and Urban
Development (HUD) recently issues a rule that will
require public housing authorities nationwide,
including NYCHA, to adopt smoke-free policies by mid-
2018, we believe the time is right to empower all New
Yorkers with the information that will enable them to
find smoke-free housing. Thank you Council Member
Torres for sponsoring this important piece of
legislation.

Finally, I will briefly address the other bills on the agenda today. Intro 1471, sponsored by Chairman Johnson, would increase the cigarette retail license fee to \$340, equal to the cost of the proposed e-cigarette retail license fee. We support increasing the license fee. Intro 484, sponsored by Council Member Vacca, would extend the smoking ban in the Smoke-Free Air Act to common areas of multipledwelling buildings with three or more units. We

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support the extension of the Smoke-Free Air Act to
include these buildings. Intro 139-A, sponsored by
Council Member Gentile, would cover non-tobacco
shisha smoking under the Smoke-Free Air Act and allow
certain hookah establishments to continue to operate.
This bill was originally heard last year. We
appreciate the Council tackling the important issue
of hookah use, and this proposal represents important
progress in regulating these establishments. We also
appreciate the Fire Code language which has been
added to address the concerns raised by the
Administration.

The next two bills -- Intros 977 and 1140
-- are more complicated. Intro 977, sponsored by
Council Member Richards, would ban smoking in all
housing owned and operated by NYCHA as well as
housing financed by the City. As mentioned above,
HUD announced that it will ban smoking in all public
housing, including NYCHA, but this bill would go
further; we don't believe that it's fair for New York
City to ban smoking only in subsidized housing for
low-income New Yorkers, and we think that there may
be legal issues in doing so. We support the concept
of smoke-free housing and would welcome more

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discussion about how to overcome legal and policy
concerns. Similarly, we have questions about
Intro 1140, which is sponsored by Council Member
Cabrera, and would ban smoking and vaping in vehicles
carrying children under the age of eight. While we
certainly don't want anyone to smoke or vape near
children, it's not clear how this bill would be
enforced or if the age limit is appropriate to ensure
public health benefits. We look forward to talking
with the Council further about this hill

Policies that reduce the availability of tobacco and reduce New Yorkers' exposure to secondhand smoke will have positive health impact, and I thank the Council for introducing these important pieces of legislation. The package of bills that I discussed today will put New York City at the forefront of tobacco control nationally, and I'm very excited to work with the Council on this critical public health issue.

I Thank you for the opportunity to testify, and we will be happy to answer questions, after hearing from my fellow commissioner here.

CHAIRPERSON JOHNSON: So before DCA goes,

I want to acknowledge the Council Members that are

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here today. The folks that are here are: Council
Member Mendez, who is a member of this Committee;
Council Member Eugene, a member of this Committee;
Council Members Koo, Vacca, Van Bramer, Cornegy, and
Espinal, all members of this Committee, and then all
the folks that we heard from who aren't members of
the Committee, but whose bills are being heard today.
With that, I turn it back over to the Administration.

DEPUTY COMMISSIONER BAGGA: Thank you so much, Chairman Johnson, and thank you, Dr. Bassett, for your leadership.

Good morning, Chairman Johnson and members of the Committee, as well as bill sponsors. My name is Amit S. Bagga and I am the Deputy Commissioner for External Affairs at the New York City Department of Consumer Affairs (DCA). I am joined today by several of my colleagues from our agency, who will be happy to help me answer any questions you might have after we've delivered testimony. We are pleased to be here today to support this package of legislation, which would prohibit pharmacies from selling tobacco products, expand the scope of the existing cigarette retail dealer license, create a new licensing category for

the sale of electronic cigarettes, increase and

establish price floors for cigarettes and other

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tobacco products, and establish a system by which the number of tobacco retail dealer licenses can be

reduced over time.

I should note that in Council Member Johnson's district there are approximately 480 current licensees, so that's 480 separate places where you can buy cigarettes; in Council Member Lander's district there are 250, and in Council Member Espinal's district -- Council Member Espinal being the chair of our committee -- there are approximately 220.

As our colleagues from the Health Department have shared, the Administration believes that too many New Yorkers are still smokers, and for the sake of their health, as well as the public health of the entire City, it is critical that we take action to reduce tobacco use. We thank the Council for prioritizing this issue and look forward to working closely together on finalizing this legislative package, one that is strongly supported by both the Mayor as well as the First Lady.

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laws.

2	I will begin my testimony today by
3	offering a brief overview of DCA's mission and
4	licensing work. DCA's mission is to protect and
5	enhance the daily economic lives of New Yorkers to
6	create thriving communities. DCA enforces a variety
7	of license laws across 80,000 businesses in 57
8	different categories of industries, as well as the
9	City's Consumer Protection Law and certain State
10	general business laws, as well as local workplace

There are currently more than 8,000 licensed cigarette retail dealers across the five boroughs. DCA licenses businesses that sell cigarettes directly to the public, and every location of any given business must obtain its own license; meaning, for example, that every different type of Duane Reade or Rite Aid has its own license. The application process includes a basic license application, documentation relevant to that particular business's legal structure, and copies of the business's registration with the New York State Department of Taxation and Finance. DCA also often reviews applications to determine their overall veracity. In many instances, cigarette retail

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dealers who have received violations on multiple occasions, who are also aware that recidivist penalties are higher and could leader to license revocation, sell the ownership of their business as a way of avoiding enforcement. Through our existing process, we often attempt to identify whether or not this has been the case when a new applicant is applying for a license at a physical location where a different business previously held a license.

Licenses are renewed every two years on a staggered basis; licenses with even-numbered license numbers expiring on December 31 of even years and licenses with odd-numbered license numbers expire on December 31 of odd years. Staggering renewals in this way allows our licensing staff the ability to better manage the high volume of renewal applications.

We note that Intro 1471 -- Council Member Johnson's bill -- would increase the cost of the new tobacco retail license fee from \$110 to \$340, which, of course, we support. We should like to note that our internal analysis has yielded that the likely cost of administering this license will be between

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\$400 and \$500. We will gladly share our final analysis with the Council when it is complete.

Additionally, we seek to work with the Council and our sister agencies to standardize certain license requirements laid out in Intro 1547. certain new requirements posed by this bill, which DCA strongly supports, would ensure that the practice of sometimes selling a business for the sake of avoiding license revocation when one has received multiple violations would become more difficult. This critical update to the existing law only currently applies to a certain subset of businesses in the bill; for the sake of consistency and east of compliance, as well as enforcement, we would recommend it apply to a larger universe of businesses. I will now provide a brief overview of our enforcement efforts.

Given the City's commitment to reducing tobacco use and ensuring compliance with the law, DCA is proud to partner with the Departments of Health and Finance to enforce our tobacco laws. We, DCA, inspect for unlicensed activity, the sale of cigarettes and liquid nicotine to anyone under the age of 21, the sale of cigarettes to anyone under the

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age of 18, the possession or sale of flavored tobacco, and for the provision of unlawful discounts. We also inspect businesses to ensure that they are not selling tobacco products below the legal price floor, and that cigarettes and cigars are being sold in a manner that complies with the minimum package requirements. Cigarettes are required to be sold in a pack of no fewer than 20 and cigars in a pack of no fewer than four. There are two primary reasons why these requirements exist. First, the sale of individual cigarettes or cigars is likely an untaxed sale, which is unlawful and allows businesses to sell cigarettes for less than the legally-mandated minimum Second, research has shown that the sale of cigarettes in packs with small amounts is more likely to result in continued smoking.

Beyond our inspections in the field, DCA attorneys review new and renewal license applications and pursue suspensions and revocations where and as appropriate.

We would like to note that the New York

City Department of Finance plays a robust role in

enforcing several tobacco-related laws; in

particular, those that govern the sale of untaxed or

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out-of-state cigarettes. I will now speak briefly
about the impact that this particular package of
bills would have on DCA in terms of licensing,

5 enforcement and legal review.

In terms of licensing, the agency would now have to track and implement licensing caps on a community district basis, which is neither an existing function nor current capability.

Additionally, the new electronic cigarette license category will result in what we believe is a large volume of work, as electronic cigarettes are often sold in the same stores as cigarettes, indicating that there could be thousands of potential new licenses. DCA's legal division would see its work increase as well, as the volume of arm's length transaction assessment would grow, as would the potential number of violations that might result in a revocation or suspension.

In terms of patrol enforcement, our inspectors would be enforcing new minimum price floors and licensing requirements for a new licensing category. Inspection times might increase, and our inspectors will have to check for compliance with several additional requirements, such as price floors

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for other tobacco products and requirements related
to the sale of electronic cigarettes. DCA's
inspectors will require handhelds in order to enforce
the new package of bills, as enforcement history
would need to be known in the field in real time to
enable inspectors to issue correct violations.

In closing, we want to reiterate our strong support for this package of legislation before you today and our commitment to implementing these important policies effectively and also as quickly as possible. Thank you again for your commitment to this important public health initiative; my colleagues and I will be happy to answer any questions you might have. Thank you.

CHAIRPERSON JOHNSON: Thank you very much. Does the Department of Finance have testimony? You're here to answer questions?

 $\label{eq:sheriff_joe} \mbox{SHERIFF JOE FUCITO: Just to answer} \\ \mbox{questions.}$

CHAIRPERSON JOHNSON: Thank you very much, Sheriff.

Okay, I'm not gonna ask any questions of the panel; there are a lot of colleagues that have questions. After this panel we're gonna have

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Assembly Member David Weprin, a former member of this
body, come up and testify, and there are a lot of
folks that wanna be heard today, so this is gonna be
quite a long hearing. So I am going to immediately
turn it over to my colleagues who have questions; let
them ask questions of the Administration; ask them to
be as concise as possible so that we can continue to
move along and get to all the folks that have come
here today. I am gonna go first to Council Member
Richards, followed by Council Member Vacca.

COUNCIL MEMBER RICHARDS: Thank you,

Mr. Chairman, and thank you Commissioner for your

commitment to ensuring that, you know our health, and

especially in EJ communities is really taken under

consideration; I really appreciate the work that

you've been doing.

A few questions, so I wanted to just get your feeling; I obviously heard your concerns about the bills on smoke-free housing for low-income New Yorkers and I just wanted to correct you sort of, because a lot of low-income New Yorkers really don't have a choice in terms of what buildings they can actually live in, because obviously don't have the resources to sort of pick and choose where they live.

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I did want to ask there obviously are other
jurisdictions who have gone smoke-free; I know I
visited Schenectady just to get sort of a sense from
their housing commissioner up there on how they
operate smoke-free housing up there. So can you just
speak to your studies and what do you think of other
jurisdictions and have you seen a correlation between
evictions and discrimination when it comes to smoke-
free housing for those places?

COMMISSIONER BASSETT: Thank you, Council Member Richards for that question and for your enduring support for tobacco controls; also greatly appreciated by the Department.

In this case, we feel that the bill introduced that would require disclosure of the smoke policy in all residential buildings in New York City, whether it's a building that you rent or a building in which you're buying a co-op or a condominium, will go a long way towards increasing awareness of the smoking policy of any given building.

The demand that you're describing so far has been what drives smoke-free housing; tenants do have the ability to decide that their building should be smoke-free, and this has happened also with

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2	technical support from the Department in buildings
3	that cater to low-income New Yorkers, including,
4	actually, public housing where you know HUD has
5	decided that in 2018 our public housing must go
6	smoke-free. But I feel strongly that the data show
7	that every single human being, if exposed to
8	secondhand smoke, faces health risks and that the
9	requirement of smoke-free housing aimed only at low-
10	income New Yorkers raises fairness questions, and,
11	additionally, raises legal questions. So we are oper
12	to continuing to discuss this with you; I certainly
13	support the reduction of exposure of all New Yorkers
14	to secondhand smoke in their homes [interpose]
15	COUNCIL MEMBER RICHARDS: So can you just
16	speak to HUD's and I know they didn't promulgate
17	the rules yet, but I know before the Obama
18	Administration left, that was something that
19	[crosstalk]
20	COMMISSIONER BASSETT: Past that
21	COUNCIL MEMBER RICHARDS: you know, the
22	the
23	COMMISSIONER BASSETT: that's right; that
24	was sort of a late decision made by HUD during the

Obama Administration, but to date there appears no

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2	indication that the current administration will
3	change that ruling, and it is of course an unfunded
4	mandate, one that all believe will continue to stay
5	on the books with enforcement required by mid-2018
6	and I've already met with the NYCHA Chief Executive,
7	Shola Olatoye and we are discussing how to work
8	together to ensure that NYCHA meets this goal.
9	COUNCIL MEMBER RICHARDS: And can you
10	speak to how many 311 complaints do you get on
11	average per year, complaints on smoking in whether
12	it's public housing or
13	COMMISSIONER BASSETT: Right; that's a
14	good question, and I know that we get a fair number
15	of them and [crosstalk]
16	COUNCIL MEMBER RICHARDS: What's a fair
17	number?
18	COMMISSIONER BASSETT: but I don't know
19	what the actual number is; I can either get that
20	number to you; it's a knowable number… [crosstalk]
21	COUNCIL MEMBER RICHARDS: Would you say
22	it's in the thousands or hundreds?
23	COMMISSIONER BASSETT: I would guess that
24	it's thousands, but I would be just guessing, Counci.

Member, which you might imagine I am reluctant to do.

1	COMMITTEE ON HEALTH 59
2	COMMISSIONER BASSETT: so let me promise
3	to get that number to you… [crosstalk]
4	COUNCIL MEMBER RICHARDS: Is it 800; 900?
5	COMMISSIONER BASSETT: I don't know the
6	answer to that question [crosstalk]
7	COUNCIL MEMBER RICHARDS: Okay.
8	COMMISSIONER BASSETT: but it is a common
9	complaint and therefore I think that New Yorkers are
10	aware, increasingly, that secondhand smoke is
11	dangerous; this is now an established fact, and
12	endorsed by every public health authority that you
13	can think of and supported by the research
14	[interpose]
15	COUNCIL MEMBER RICHARDS: And how many
16	COMMISSIONER BASSETT: and I think that
17	there will be increasing demand on the part of people
18	who are seeking housing to get in a building which is
19	smoke-free; with the disclosure bill people will at
20	last have that information for every single residence
21	in New York City so that they can vote with their
22	feet, so to speak.
23	COUNCIL MEMBER RICHARDS: So I hear you
24	on that, but Amit [sic], I have a building in the

Rockaways where it's 101 units and 50,000 people

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applied, so we're in a housing crisis right now where I don't think individuals who are moving into housing have a choice, in one sense, on whether a building is smoke-free or not; whether… [interpose]

COMMISSIONER BASSETT: Well...

COUNCIL MEMBER RICHARDS:

housing, so I think that's just a bad... [interpose]

they need

COMMISSIONER BASSETT: Well the other thing that I would add to that is that on... thinking as a landlord, there are real advantages to being smoke-free that landlords, I believe, are increasingly recognizing. As you note, in the luxury market they see it as a draw for their building, but in terms of the maintenance of a building, the costs of sort of cleaning up an apartment that has been occupied by a heavy smoker are much higher than they are... there are fire risks related to having smokers. So I believe that we may see a convergence between both landlords and tenants; all of us agreeing that smoke-free housing is healthier. Certainly, as your health commissioner, I would say that that conclusion would be strongly supported by the data.

COUNCIL MEMBER RICHARDS: Okay, I know my colleagues have a lot of other questions. I look

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2	forward to continuing this conversation, but I just
3	wanna go back to what you said in luxury housing
4	individuals recognize that it is an amenity to live a
5	smoke-free housing building and low-income New
6	Yorkers deserve the same sort of leverage, and just
7	going back to your statements, they don't have a
8	choice of choosing between a luxury building and a
9	low-income building [interpose]

COMMISSIONER BASSETT: I look forward to continuing the conversation. I appreciate the intent of your bill.

COUNCIL MEMBER RICHARDS: Okay. Great. Thank you.

CHAIRPERSON JOHNSON: We're gonna put folks on a -- this is not because of Council Member Richards... [crosstalk]

COUNCIL MEMBER RICHARDS: It is. It is.

CHAIRPERSON JOHNSON: No, it's not; just because of the size of the crowd here today; we're gonna put members on a five-minute clock, but we'll have a second round and everyone will be allowed to ask their questions, but I wanna make sure that we move along because there are a lot of people here to testify today and I wanna make sure that everyone

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2	gets here… folks took time off of work, so I wanna
3	make sure everyone is able to do that. Up nest is
4	Council Member Vacca, followed by Council Member Koo
5	and if the Sergeant could put a five-minute clock and
6	start it immediately when Council Member Vacca starts
7	talking. Thank you.

COUNCIL MEMBER VACCA: I don't take that personally, Mr. Chair... [crosstalk]

CHAIRPERSON JOHNSON: Never.

COUNCIL MEMBER VACCA: I'll take it how it was meant, but that's okay. I appreciate your bringing order, and, of course, that's your prerogative.

Let me ask you something, Commissioner; is hookah very dangerous or is it just as dangerous as cigarettes, in your opinion?

COMMISSIONER BASSETT: I concur with all the health information that Council Member Gentile has given in his opening statement.

COUNCIL MEMBER VACCA: Shouldn't we be regulating it more than we do? I'm on Councilman Gentile's bill and I support it, but the reality is that we've not been as forthcoming or as aggressive when it comes to this danger as we have been to

2	cigarettes and electronic cigarettes. Is there a gar
3	here, because the use of it seems to be exploding,
1	yet you are still allowed to smoke hookah in public
5	places, in restaurants? Why are we not doing
5	anything about that? Why are we exempting that if
7	it's so dangerous and we have precedent where we've

8 been aggressive in the cigarette and e-cigarette

9 area?

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the health issues that Council Member Gentile has outlined, and I should just reiterate that there is no safety in non-tobacco containing shisha; that shisha smoking carries health risks, even if it doesn't contain tobacco and does not thereby contain nicotine; it carries health risks due to the content of the product as well as to the combustion of the product on a coal bed and the misconception that somehow filtering smoke through water makes it healthier and safer is widespread and completely unfounded. This is not a habit that is risk-free, it carries real health risks and that should be very clear to all of us... [interpose]

COUNCIL MEMBER VACCA: So...

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2 COMMISSIONER BASSETT: So what the bill 3 accomplishes is a real step forward in our ability to limit the exposure to hookah... [crosstalk]

COUNCIL MEMBER VACCA: Well I ...

COMMISSIONER BASSETT: and I consider it ...

[crosstalk]

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COUNCIL MEMBER VACCA: Commission, I realize... I... excuse me, but I realize it's a step forward and I support it, but my question is; why are we not doing here what we've done with other substances that we have determined are equally dangerous to the public?

COMMISSIONER BASSETT: Let me just go over what this bill will accomplish. For the first time we will have permits that the Health Department will issue for hookah; these permits will be available only to people who have a majority share of their business dependent on hookah; 21-year-olds will not be allowed to enter locations where hookah smoking is underway; the presence of tobacco in hookah is a violation of the current Smoke-Free Air Act, and if it is identified in hookah, would lead to an immediate revocation. We believe that much of the hookah that is being smoked in hookah bars is tobacco

COMMITTEE ON HEALTH

2	containing and therefore part of the reason that
3	people smoke it is to get the effect of nicotine that
1	will be [crosstalk]

COUNCIL MEMBER VACCA: Commissioner...

COMMISSIONER BASSETT: something that

leads to an immediate revocation... [crosstalk]

COUNCIL MEMBER VACCA: I... I... I

understand...

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COMMISSIONER BASSETT: so we expect that this will lead to a great deal more control of hookah smoking. I agree with the Council Member that this is a habit that carries health risks; I'm not gonna argue with you about that; I think that this is a step forward... [crosstalk]

COUNCIL MEMBER VACCA: Commissioner, I don't mean... I... I appreciate that and that's why I'm on the bill. I only have five minutes, so with all due respect to you, and you're a professional who I respect greatly, but I want an answer to the question. Why are we not taking a position that has hookah in the same classification with the same regulations as we do cigarettes and e-cigarettes? We now say it's just as dangerous, if not more; it is become more widespread, yet we don't take the same

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regulatory position and there is no legislation that's being offered that gives that protection to our people in this city. Why?

COMMISSIONER BASSETT: I think you heard Council Member Gentile explain that he is sensitive to the fact that there is a tradition of hookah smoking and a small business interest in maintaining their business that is dependent on this product.

tradition of smoking cigarettes of many types, there is a concern by the small business community about this legislation that deals with cigarettes and electronic cigarettes; those same concerns exist for the hookah industry; the same concerns exist for the cigarette industry, yet one concern is being recognized and other concerns are not being recognized. I don't think any of the concerns should be recognized because I'm not for smoking at all, but I do not understand; I want an explanation; why are we not doing, across the board, what, for health purposes, has to be done in this city? Why?

COMMISSIONER BASSETT: Well Council

Member, I'm sure you're aware that public health

operates at the interface of health knowledge and the

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argument going.

policy environment. I consider this bill an important step forward and I understand the case that you're making, but I am happy to say that this is much better than our current situation. Council Member Gentile has been working on this issue for seven years and I am really a fan of [bell] never making the perfect the enemy of the good.

COUNCIL MEMBER VACCA: I appreciate your testimony, but I think that we have an outstanding issue that you've not answered and I think that you must have heard my argument before and you will be hearing my argument again, if not from anyone else, but from me.

COMMISSIONER BASSETT: I appreciate that; please keep your argument going.

COUNCIL MEMBER VACCA: Well you're in a position to effectuate administrative policy and the Administration is in a position to recommend legislation and what we do here at the Council I feel has to be universal in nature when it comes to a public health crisis... [crosstalk]

CHAIRPERSON JOHNSON: You're keeping the

COMMITTEE ON HEALTH

2	COUNCIL MEMBER VACCA: this is a public
3	health crisis, and my five minutes are up, but that's
4	my point. Thank you.
5	CHAIRPERSON JOHNSON: Thank you, Council
6	Member Vacca. We're gonna go to Council Member Koo.
7	COUNCIL MEMBER KOO: Thank you Chair
8	Johnson for your leadership and thank you, all the
9	Commissioners and Police Chief [sic] here for
10	testifying.
11	Let me say this first; New York City is
12	not an island in the Atlantic Ocean, you know, we car
13	increase the price all we want, but people can buy
14	cigarettes easily on any street corner. [applause,
15	background comments] Yeah.
16	CHAIRPERSON JOHNSON: Uh
17	COUNCIL MEMBER KOO: No no clapping,
18	right.
19	CHAIRPERSON JOHNSON: Please.
20	COUNCIL MEMBER KOO: Sometimes I feel
21	like some of us are living in a bubble; we lost
22	reality. You know in my district grandmothers always
23	complain to me my grandson buys cigarettes every
24	day from where, not from pharmacy, not from license

places, they can buy off the street and even at cafes

and at beauty salons, barber shops. If you have a
big difference in pricing we are connected to New
Jersey, to Yonkers, to Great Neck, Long Island; you
can buy it just some people will buy it over there
and sell it off the street. So no matter how much
you charge, I mean buying cigarettes from official
places, of course, the volume will come down, but
that market will go up. So my question to each one
of you is like, to the Commissioner, I know we all
have good intentions, but why don't we do something
on alcohol; alcohol has more problems than
cigarettes, people die in DWI driving I mean, how
many people die and alcohol, drinking causes liver
cancer, cirrhosis, loss of memory, infertility, all
these and worse affects, but the City is not putting
a cap on bars or on places selling beer and wine; you
can buy at any bodega, any supermarket; why target
pharmacies? I'm in the spirit of free enterprise, so
if you get a license, you should be able to sell the
stuff. Pharmacy is just one department in a big
store. Pharmacies, they are community stores, like
7-Eleven, they sell everything, so cigarettes is one
item. So my question is; why [inaudible] limit the

the...

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1	COMMITTEE ON HEALTH 71
2	COMMISSIONER BASSETT: I think your
3	question, Council Member Koo… [crosstalk]
4	COUNCIL MEMBER KOO: Well I wanna ask
5	three questions first.
6	COMMISSIONER BASSETT: is largely about
7	COUNCIL MEMBER KOO: How you enforce
8	[inaudible] cigarettes on the street? You always go
9	to the licensed stores and you always bring a kid, a
10	tall African American kid, 17 years old maybe, he can
11	go to the store and trap [sic] people selling
12	cigarettes, right? And then a lot of stores, because
13	the cashier is new and is an immigrant, you know but
14	this guy, wow, so big; he must be 18; he's supposed
15	to ask for his ID, and a guy, the inspector follow
16	him oh, you sold cigarettes to the teenager and
17	they fine him \$1,000. Have you done anything to off
18	street [sic] marketing, I mean cigarettes? I mean,
19	you didn't do anything. So this is [inaudible]
20	targeting enforcement; we should target those black
21	markets. If you have more enforcement, the price
22	disparity is not so huge; [inaudible] won't die.

CHAIRPERSON JOHNSON: No clapping.

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[clapping]

SHERIFF JOE FUCITO: Good afternoon, Council Members. So first, let me give you a little

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2	information so you can get an understanding of what
3	our enforcement role is. My name is Joe Fucito; I'm
4	the Sheriff for the City of New York. The Sheriff's
5	Office is an old law enforcement agency; it's one of
6	the oldest agencies in the City of New York, and our
7	enforcement model is that we enforce orders of the
8	court, we're conservators of the peace, and we act as
9	the Department of Finance enforcement arm, so the
10	Sheriff is part of the Department of Finance. So
11	think of us like the Marine Corps; the Marine Corps
12	is part of the Navy; we're a part of the Department
13	of Finance, so we're a subset and our goal, as far as
14	tax enforcement, is to look at it as a broader
15	picture. Our enforcement model, the models you've
16	been explaining to me are more in line with the
17	Police Department in the sense that these are
18	nuisance crimes in the street, and just like anything
19	else; if you are peddling DVDs or other types of
20	items in the street, that's more of a question that
21	should be directed towards the Police Department.
22	Our enforcement model is based on stopping the entire
23	trafficking network. What our goal is, is not to
24	stop the person on the street; by the time it gets to
25	the person in the street's hands to sell, it's too

2	late and the tax laws if we spent resources trying
3	to stop that one individual sale, it wouldn't be
4	significant. Our goal is to stop networks of
5	cigarette traffickers, and that's what our structure
6	and organization is designed to do. We examine who
7	is trafficking in cigarettes, we make low-level
8	arrests, and just like narcotic sales, we determine
9	where they purchased the product from and we work our
10	way up the chain. Most of our investigations start
11	out of state; a Virginia cigarette doesn't end up in
12	Brooklyn, it has to start in Virginia, so we look at
13	who is buying product in Virginia, who is selling the
14	product in Virginia, and then we work on the
15	trafficking network from Virginia to New York. The
16	Law Department is very aggressive in tackling
17	businesses in Virginia that are enabling cigarette
18	sales that are ultimately being sold in New York, so
19	we first tackle the problem in Virginia. We worked a
20	large-scale case last year where they were
21	trafficking 7-10,000 cartons a week, so we feel
22	that's a significant way of cutting down on cigarette
23	trafficking; getting it at the source. So a major
24	part of what we do is to look at it as a network.
25	Tast waar wa did 1 500 inspections we soized 20 000

cartons of cigarettes between regulatory inspections
and search warrants; we seized 41,000 packages of
flavored tobacco, 3,200 packs of illegal narcotics of
various types, and eight firearms. What that
material tells us is we're dealing with a criminal
network and that's what we want to tackle, the
criminal network, and the way we do that is we
investigate, we inspect a store; if we find
contraband material, we work with the store owner,
give them the opportunity to become an informant;
give us the information about the trafficking
network, and then we work backwards to tackle the
larger network. I have a small amount of resources;
the entire Sheriff's Office has 160 sworn officers; I
have 20 people in my Bureau of Criminal
Investigation, so I have to make all of my resources
count, and we do by tackling the large-scale cases.
I know that's not going to resolve all the questions
that you brought up, and you brought up many, many
important issues, but we don't have a policeman on
every street corner; we don't have a deputy sheriff
on every street corner, but where I do have them, I
make them count.

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COMMISSIONER BASSETT: And if I may add; with... Council Member... [crosstalk]

COUNCIL MEMBER KOO: So... so what... May I ask one question? What... What is the penalty of being caught selling unlicensed cigarettes?

SHERIFF JOE FUCITO: Well that's part of the complication of enforcement. The street level that you just described, it's not necessarily criminal to possess cigarettes, unlike regular narcotics; if you're carrying narcotics, it's a crime. You could carry a certain amount of cigarettes on you and it's deemed to be used for personal consumption, so we can't tackle that until you actually make a sale or an offer and an officer has to actually be there to see the sale or offer before it becomes a criminal act, so that is why it's much more complicated to tackle the street sales because it's not a crime inherently to possess untaxed cigarettes, except over a certain amount.

COMMISSIONER BASSETT: And if I could just point out though, Council Member, that with the retail reduction which will cap the number of tobacco licenses, maintaining your license in good standing will become more important than ever, because if you

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COMMITTEE ON HEALTH

Τ	COMMITTEE ON HEALTH //
2	violate the license by selling untaxed cigarettes,
3	the kind of cigarettes that the Sheriff will seize if
4	he identifies them, you will be fined and the initial
5	fine is typically about \$1,000 I can turn to
6	Consumer Affairs to explain the whole process, but it
7	puts you on a pathway to license revocation and may
8	make it impossible for you to sell your business with
9	a license in good standing [interpose]
10	CHAIRPERSON JOHNSON: We are gonna come
11	back
12	COMMISSIONER BASSETT: and once you lose
13	your license with a cap, you won't be able to get it
14	back.
15	CHAIRPERSON JOHNSON: We are gonna come
16	back for a second round; it's a good strategy to ask
17	all your questions in five minutes, so then it goes
18	longer and then you get to rebuttal, but we're gonna
19	give you a second round.
20	COUNCIL MEMBER KOO: I also want to talk
21	to the Sheriff afterwards; I want [crosstalk]
22	SHERIFF JOE FUCITO: Of course.

COUNCIL MEMBER KOO: to give him some locations I want some enforcement because in...

[crosstalk]

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1	COMMITTEE ON HEALTH 78
2	CHAIRPERSON JOHNSON: Give him that nu
3	COUNCIL MEMBER KOO: seven years, hasn't
4	changed.
5	CHAIRPERSON JOHNSON: Peter, give him
6	that number.
7	COUNCIL MEMBER KOO: Yeah.
8	CHAIRPERSON JOHNSON: Okay, we're gonna
9	go to Council Member Lander.
10	COUNCIL MEMBER LANDER: Thank you,
11	Mr. Chair, and it's always challenging to follow
12	Council Member Koo, and I obviously, we all respect
13	his business experience and he's passionate about it.
14	I will point out again that American Pharmacists
15	Association is onboard; you know, it started in 1970,
16	but as recently as 2010, urging pharmacies to stop
17	selling tobacco and actually pushing state pharmacy
18	boards to stop issuing licenses or renewing licenses
19	of pharmacies that sell cigarette and tobacco
20	products.
21	At the press conference you had some
22	statistics on what percentage of independent
23	pharmacies were you know, this is what we're
24	overwhelmingly talking about in New York City are

chain… [crosstalk]

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COMMISSIONER BASSETT: The chain

pharmacies, that's right. It's something like 95% of independent pharmacies do not sell cigarettes, so overwhelmingly cigarette sales in pharmacies are in chain pharmacies.

COUNCIL MEMBER LANDER: So the pharmacy bill we're talking about here would not mostly, you know, only a tiny amount impact independent small businesses; we are talking... [crosstalk]

COMMISSIONER BASSETT: That is correct.

COUNCIL MEMBER LANDER: about Rite Aid and Duane Reade and the large national retailers. And also, just to be clear, if they want to keep selling cigarettes, they could stop having their pharmacy department, right?

COMMISSIONER BASSETT: Right; I hadn't thought of that, Council Member.

COUNCIL MEMBER LANDER: So... and I know we're gonna hear from some stores who say, we sell so many products and it seems to me what we're saying is, amongst your big product mix you just have to make a choice; you can sell health products you can sell cigarettes, the choice is up to you, but you can't do both in the same store.

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2 COMMISSIONER BASSETT: Correct.

COUNCIL MEMBER LANDER: Alright, thank
you. And then on... the other thing I think we're
gonna hear from some opponents later is -- I've got
some testimony here from 7-Eleven and a few other of
the kinds of small businesses that would be affected
by 1547, and I think most of the testimony there
reflects the mistaken assumption that you can't under
any circumstances pass that license on if you sell
your business and therefore you'll have a hard time
selling it. But you said in your testimony -- I'm
just gonna ask you to repeat it -- so long as you're
in good standing you would have the opportunity to
have your license be transferred... [crosstalk]

COMMISSIONER BASSETT: The way it will work, and I should turn it to my colleague from Consumer Affairs, is if... you have to have a license that's been in good standing for three consecutive years, and then the new owner can apply, the cap would not be a barrier to them getting a new license in that business, but you must maintain the license in good standing for three consecutive years in order to be able to offer a new owner the opportunity to apply for a new tobacco license.

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DEPUTY COMMISSIONER BAGGA: I will simply say that Dr. Bassett is correct.

COUNCIL MEMBER LANDER: And look, I think... I would almost be comfortable arguing the opposite side that we shouldn't do this, I mean to the extent that we're talking about value in businesses that exists because of poisoning people and like leading a third of your customers to their deaths, that it wouldn't be the end of the world if we said you know what; you can keep your license until you stop using your business, but when you sell it, we're actually going to attrit those licenses out and more quickly reduce because people are dying as a result, but even though I might support that, that is not what we're doing here, so individual small business owners, so long as they maintain their good standing and don't break the law, can keep their license and under those circumstances still sell their business with that license and pass it along.

although I should add that our understanding -- and we're not business people, obviously our priority is health -- is that very few customers who enter corner stores are in fact buying cigarettes and a study that

COMMITTEE ON HEALTH

2	we did of corner stores in 2012, only 10% of the
3	customer traffic was for buying cigarettes and buying
4	only cigarettes, and only half of them bought anothe:
5	product. From my completely unscientific survey of
6	corner stores in my neighborhood I live in Upper
7	Manhattan the profit margin for the sale of
8	cigarettes is not very large, so these products are
9	not generating a lot of revenue; the estimate that we
10	have is somewhere around \$400-500 a year on average.
11	COUNCIL MEMBER LANDER: Interesting;
12	that's good oh go ahead.
13	DEPUTY COMMISSIONER BAGGA: Council
14	Member, if I may just I wanna have our General
15	Counsel, Tamala Boyd provide a clarification on the
16	good standing piece, if I might [crosstalk]
17	COUNCIL MEMBER LANDER: Good.
18	TAMALA BOYD: It's only that there are
19	[interpose]
20	COUNCIL MEMBER LANDER: Introduce
21	yourself for the record.
22	TAMALA BOYD: Oh sorry. I'm Tamala Boyd,
23	General Counsel, DCA. We just wanna clarify that
24	it's just a little bit more than I guess we wanna
25	clarify what good standing means.

1	COMMITTEE ON HEALTH 83
2	COUNCIL MEMBER LANDER: Please.
3	TAMALA BOYD: It requires a former
4	business to have been in business for five years and
5	it's also… it's kind of meant to address an
6	operational [bell] shift in ownership; not a complete
7	change in business relationship. So we just wanted
8	to clarify that.
9	COUNCIL MEMBER LANDER: Okay.
10	COMMISSIONER BASSETT: Is that what's
11	meant by the "arm's length" conversation?
12	TAMALA BOYD: The arm's length is a
13	little bit different; this conversation is only for
14	the cap; the arm's length is outside it has nothing
15	to do with the cap.
16	COMMISSIONER BASSETT: So in order to
17	offer to a new owner your license, you have to have
18	been in business for five years and have maintained
19	your license in good standing for three years and not
20	be selling to completely convert your business into
21	some other business.
22	DEPUTY COMMISSIONER BAGGA: That's
23	exactly [inaudible] [crosstalk]

COUNCIL MEMBER LANDER: Absolutely. So to me those sound very reasonable; I think we'll hear

from 7-Eleven that there are franchisers that have 35-40% of their sales in tobacco products, but all I can say is, if a very, very high percentage of the value of your small business is premised on poisoning your customers to death; you know, something isn't working quite right. So I appreciate that you can't... [interpose]

COMMISSIONER BASSETT: Nobody loses their tobacco license unless they are not able to maintain it in good standing. So this only applies to people who are seeking a new license.

COUNCIL MEMBER LANDER: And I should just say; I wish we could go straight at the tobacco companies, right, we love our mom and pop businesses and our small retailers; the folks that are killing us are the tobacco companies, but there's other steps we can take. So thank you very much for the time.

CHAIRPERSON JOHNSON: Council Member Gentile.

COUNCIL MEMBER GENTILE: Thank you,

Mr. Chair and thank you all for what is a long day

and also a lot of testimony and a lot of questions

coming from everybody.

2002. Am I correct?

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I just wanted to do a little bit of history, Commissioner Bassett, which might eliminate some of the concerns that Councilman Vacca has expressed. It is my understanding that when the Smoke-Free Air Act first passed in 2002 some of the same considerations that are presented to us today were presented to them back in that day and indeed the industry at that time was the cigar/tobacco bars, right, and under the Smoke-Free Air Act of 2002 those cigar, I guess they're called tobacco bars, were grandfathered in under the Smoke-Free Air Act of

commissioner bassett: That is correct,
eight tobacco bars; the number of hookah bars that
we're talking about, as your opening statement
suggests, are far larger in number, but we don't know
how many will be eligible under the many caveats that
your bill [inaudible]... [crosstalk]

COUNCIL MEMBER GENTILE: Right. And I think it's a function of the fact that the regulation that we're proposing has come way after the explosion of the industry, of the whole phenomena of hookah smoking indoors.

COMMISSIONER BASSETT: Yes, that's

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correct, there's been a real explosion I mean with the number of hookah establishments going manyfold, three, four, fivefold, now standing between 250 and 300 locations around the City. As you noted, among youth the unregulated products have really escalated in use, so that includes e-cigarettes, which have doubled and tripled, with nearly 16% of high school students saying that they've used e-cigarettes in the last 30 days, and hookah has as well, particularly

COUNCIL MEMBER GENTILE: Now you also...

your testimony, and working with your agency, you had

proposed a permitting process for that purpose of

having that better regulation on hookah bars, right?

among Latino and African American youth.

COMMISSIONER BASSETT: That's correct,

the Department would issue these permits; the

Department of Consumer Affairs issues tobacco

licenses -- you also [inaudible] licenses -- and we would do the hookah.

COUNCIL MEMBER GENTILE: Right. And so that when you found 13 out of 13 hookah bars having tobacco in their shisha, how did you enforce it; there was no permit on smoking at that point?

1	COMMITTEE ON HEALTH 87
2	COMMISSIONER BASSETT: But under the
3	Smoke-Free Air Act, you're not allowed to have
4	COUNCIL MEMBER GENTILE: So So
5	COMMISSIONER BASSETT: tobacco, so we
6	went to you know it ended up going [inaudible] and
7	we pursued [crosstalk]
8	COUNCIL MEMBER GENTILE: Violating
9	COMMISSIONER BASSETT: that as a
10	violation of the Smoke-Free Air Act.
11	COUNCIL MEMBER GENTILE: Now under this
12	permitting system, you could just pull you could
13	[interpose]
14	COMMISSIONER BASSETT: That's correct.
15	COUNCIL MEMBER GENTILE: revoke the
16	permit
17	COMMISSIONER BASSETT: Yeah.
18	COUNCIL MEMBER GENTILE: right? Okay.
19	And you also, as a matter of concern with the health
20	aspects here, requested that an age minimum of 21,
21	consistent with alcohol and cigarettes, be imposed on
22	the hookah those that had been grandfathered in?
23	[crosstalk]
24	COMMISSIONER BASSETT: That's correct.

That's correct.

COMMITTEE ON HEALTH

	COMMITTEE ON REALITY 00
2	COUNCIL MEMBER GENTILE: Right. So in
3	effect, what we're saying here is that we are looking
4	to protect the young people and not putting them in a
5	position to learn, to be exposed to smoking by having
6	an age minimum
7	COMMISSIONER BASSETT: Additionally, you
8	know hookah smoking can't become part of the family
9	restaurant business, which frankly, at the moment it
10	is… [crosstalk]
11	COUNCIL MEMBER GENTILE: Right.
12	COMMISSIONER BASSETT: so as I indicated,
13	I live in Upper Manhattan where at the moment hookah
14	is in sort of a large number of restaurants that are
15	frequented by families, so
16	COUNCIL MEMBER GENTILE: Right.
17	COMMISSIONER BASSETT: it will no longer
18	be possible.
19	COMMISSIONER BASSETT: Right. And it
20	would only be those who have 50% or more of their
21	business.
22	COMMISSIONER BASSETT: Exactly.
23	COUNCIL MEMBER GENTILE: And just as the
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those who decide to do that, to go into a hookah bar

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2	and	smoke	shisha,	that's	а	decision	that	they	make	as

3 an adult and the burden's on them, but under this

4 scenario we still have protected those youngsters,

5 | 14-, 15-, 16-year-olds not going into those [sic].

COMMISSIONER BASSETT: I would agree with your initial statements, Council Member and those made by Council Member Vacca that shisha smoking, hookah smoking is not safe for anyone.

COUNCIL MEMBER GENTILE: Right. Right.

Okay. Very good. I think I just wanted to clarify that issue.

What plans do you have or do you have plans yet on how to educate the hookah bar owners about the legislation and [bell] basically consumers also about what changes will take place?

COMMISSIONER BASSETT: Well this whole suite of legislation will require a large amount of education; we always do that with any regulatory changes and we work with our colleagues in Consumer Affairs to ensure that people have ample time to prepare. So for example, the disclosure bill has a whole year; the others are I believe a hundred...

[crosstalk]

regards to raising the base price. When was the last

2 time the City took action to raise the base price of 3 cigarettes?

COMMISSIONER BASSETT: There was a tax, the only tax that the City has been able to levy on cigarettes in 2002 of \$1.50 per pack; it was matched at that time by the State with \$1.50 per pack price, and in 2013 a price was set at \$10.50. This legislation would raise the minimum price to \$13.00 per pack.

COUNCIL MEMBER ESPINAL: So do you believe that that increase actually had a significant impact in the amount of people who are actually smoking in the city?

that, Council Member; that's what the data show; our smoking rates have declined enormously; they stood at over 1 in 5 New Yorkers in 2002 and progressive price increases, along with other actions in tobacco control have contributed to a 30% decline; the impact on youth smoking was even greater, with two-thirds of youth no longer reporting that they smoke; that's gone down to under [inaudible]... [crosstalk]

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COUNCIL MEMBER ESPINAL: So do we have the demographics in which neighborhoods actually benefited from the price increase?

COMMISSIONER BASSETT: This is a very important question, whether we've seen a decline in tobacco use sort of for all New Yorkers and the answer to that question is yes, smoking rates have declined among everyone.

COUNCIL MEMBER ESPINAL: Well no, my concern is, you know, again, is the low-income folks in our city who have an addiction to the nicotine and you know I feel that raising the price a dollar or two won't deter them from smoking cigarettes because of that addiction, and in one way or another we're taking advantage of that fact, you know. If we were serious about getting people off smoking, wouldn't we raise the minimum price to \$20.00 a pack of cigarettes?

COMMISSIONER BASSETT: You're right that it's hard to quit smoking and I think we've already had some conversation about that today and that's why part of the Department's strategy in tobacco control has always included support for cessation; anyone can call the New York State Quitline, NY Quits, 1-800... or

2	is it 1-866 somebody help me here [background
3	comment] 1-866-NY-QUITS and find out whether you're
4	eligible for free nicotine replacement therapy;
5	periodically the City has a targeted strategy that is
6	for New Yorkers and makes free products available in
7	addition to what's available through the State. We
8	run numbers of activities, working with physicians,
9	making sure that they understand that insurance plans
10	will cover cessation products. So I want to be very
11	clear, that while it is difficult to quit, every
12	smoker can quit with appropriate support and if you
13	use cessation products, you double your chances for a
14	successful quit. That said, raising the price has
15	been the single most important intervention that we
16	can take in tobacco control, and for people who are
17	low-income, with low disposable income, I think you
18	should consider how much that individual will save if
19	they no longer use their money to buy cigarettes.

COUNCIL MEMBER ESPINAL: I agree with you that they will save a lot of money if they don't buy cigarettes, but I think the reality is that a lot of them are not gonna stop buying cigarettes.

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1	COMMITTEE ON HEALTH 94
2	COMMISSIONER BASSETT: I don't know why
3	you say that; the data shows that people have
4	continued to quit [crosstalk]
5	COUNCIL MEMBER ESPINAL: I know a lot of
6	people who I know a lot of people who smoke
7	cigarettes in low-income communities and they end up
8	if they're not buying the cigarettes legally at a

store; they are actually probably buying loosies or

cigarettes. So that's why I feel that if they come 11

they're going to other states to buy their

12 to a point where they can't find a store selling a

loosie or they can't find a store selling cigarettes 13

anywhere else at a lower price than the legal price; 14

15 that we're only going to push them to dig into their

16 pockets further to pay the extra \$2.00 for the pack

17 of cigarettes.

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COMMISSIONER BASSETT: Well I would just encourage [inaudible] friends who smoke that they can quit, that they can get support in quitting and is the best single thing... [crosstalk]

COUNCIL MEMBER ESPINAL: Yeah, I mean I think they ...

COMMISSIONER BASSETT: that they can do for their health.

2	COUNCIL MEMBER ESPINAL: I think they
3	know that, but you know, I think that, you know, the
4	City's not doing enough for to do more outreach and
5	more education and providing you know that gap where
6	I feel like New Yorkers who are wealthier would
7	probably pay the extra \$2.00 or would probably have
8	more access to this education and we as a city should
9	be doing more to education our lower-income folks
10	instead of raising the prices on these cigarettes,
11	'cause they have an addiction and that's the reality
12	and that's what pushes them to buy these cigarettes.
13	COMMISSIONER BASSETT: The facts show,
14	Council Member, that raising the price creates an
15	incentive not to smoke and it has been an important
16	part of our efforts to reduce tobacco use and not
17	only do we believe that; we've shown that. There are
18	now fewer smokers [crosstalk]
19	COUNCIL MEMBER ESPINAL: How are these
20	studies How do you [bell] What are the studies that
21	are done to show and prove that less New Yorkers are
22	smoking?

COMMISSIONER BASSETT: We have every year a survey that's called the Community Health Survey, it's available online, it's a public access database

2	in which we publish our most recent data are from
3	2015; we'll have our 2016 data out probably in the
4	middle of this year and you can go online and
5	look; every year we have seen a decline, until about
6	2010; at that time, as the Council may be aware,
7	there were severe budget constraints, the tobacco
8	control budget was reduced; when I became
9	Commissioner, the smoking rate had come up from about
10	13.9% to 16.1%. The first thing that we did was
11	greatly increase our efforts to educate the public
12	again; some of it was uncomfortable, hard-hitting ads
13	that remind people the truth, that tobacco us will
14	kill you, maim you and also place your family at
15	risk; in addition to losing someone they love, you
16	expose them to health risks, and we saw the smoking
17	rates go down, along with a suite of bills that were
18	introduced at the very end of the Bloomberg
19	Administration. So every year we can give you an
20	estimate on the proportion of New Yorkers who smoke;
21	that percent now stands at 14.3% and that represents
22	a 33% decline from the estimate that we had in 2002,
23	and we can look at it by neighborhood, we can look at
24	it by age, we can look at it by race, and I would be
25	delighted to sit down with you and show you that we

COMMITTEE ON HEALTH 97
have benefited the health of every New Yorker with
our tobacco control efforts… [crosstalk]
COUNCIL MEMBER ESPINAL: Yeah, I think I
think that will be helpful; I just wanna say I think
this I believe this is a noble effort, but we just
have to be careful with how we decide to move
forward, because I wouldn't want my constituents or
lower-income New Yorkers in the city who are already

[crosstalk]

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COMMISSIONER BASSETT: I agree, but I would argue to you that tobacco use is an injury and that the data show that people who are facing higher prices will either stop smoking altogether or reduce their tobacco use, and that is a health benefit. I hope you as an elected representative will feel proud that we can deliver this health benefit to our residents.

facing 10,000 other issues with affordability in this

city and we have to make sure that we don't continue

to injure them and not be able to [inaudible]...

CHAIRPERSON JOHNSON: Thank you very much. Council Member Cabrera.

COUNCIL MEMBER CABRERA: Thank you so much, Mr. Chair.

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Commissioner, I wanna thank you for your courage; for doing the right thing. Sometimes when we make decisions in government, it's just the reality it's not gonna please everybody. Sometimes I feel that people are driven by the bottom line, and for me, someone who represents the third poorest Council District, this is an imperative of what we're doing here; we need to have research-driven policies. Every organization that I see nationwide, health organizations, from the American Heart Association, Lung Association, all of them, they're saying the same thing; there is a concert of voices coming together telling us that we must act and we must act quickly. So thank you; it's gonna help my people in my district. Having had two grandfathers who died because of smoking cigarettes, I don't wanna see more grandfathers, moms and dads and then we're not even talking about secondhand smoking.

So I wanted to thank you also for your support on Bill 1532; really looking forward to seeing this bill become a reality.

I wanted to ask you, on Intro 1140 -- appreciate your comments -- would it be helpful, and you make a good point; how do we go about enforcement

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when it comes to, you know an 8-year-old, somebody's driving with an 8-year-old versus a 9-year-old; how do you tell the difference; how would, you know, someone identify -- would you be open to the idea of raising the age in this bill to those under the age of 18, so all the way to 17-year-olds -- 18-year-olds have IDs -- and that way will be enforceable, and to also looking at what the other 15 states, plus the District of Columbia are already doing?

Member. I appreciate the fact that all of us are seeking to limit the space where people can smoke and that the protection of people who have no choice but to be exposed -- children -- should be first and foremost in our minds. I think that there are two separate issues; the idea of how to enforce vaping and smoking bans inside a car was something that our Police Department wasn't sure that they would know how to enforce, and the idea of the age cutoff at eight is something that we could discuss, so we would very much like to have a further discussion with you about this bill.

COUNCIL MEMBER CABRERA: Appreciate the offering to have an offline discussion about this.

2	wanna take the remaining two minutes just to commend
3	my colleague Gentile for having the sticky
4	perseverance and tenacity to continue with this
5	hookah bill. I mean, I was just walking through one
6	of our parks, Council Member, just this last Easter;
7	after I went to church service, walked through one of
8	the parks, 20 kids were walking by one young
9	person was smoking in the park, several spots this
10	scenario was taking place; one of them was smoking
11	she was smoking a hookah and 20 kids stopped by; one
12	of them says, "Hey, can I have a hit?" and it was
13	like, 19 [inaudible] behind it; I was like, what is
14	going on around here? We need to pass this
15	legislation; you have my full support and I know
16	Council Member Vacca is not here and I'll commend
17	him, that if he wants to have the legislation, we
18	have the power to introduce legislation here and I'll
19	be second in line to support him. Thank you so much
20	and with that, I'll be the first one to finish short.
21	CHAIRPERSON JOHNSON: Thank you, Council
22	Member; I really appreciate it. Before I go to
23	Council Member Barron, Torres and Wills, I wanna just

24 ask the Sheriff -- your current staff is 160?

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2 SHERIFF JOE FUCITO: That's the entire 3 Sheriff's Office, 160 sworn officers.

CHAIRPERSON JOHNSON: Hundred and sixty sworn officers; how many of those folks are working on tobacco-related enforcement issues?

SHERIFF JOE FUCITO: Our Bureau of Criminal Investigation has 20 officers. Now it's not that all 20 are working on tobacco at the same time; on the average we have anywhere from 10-15, but it fluctuates with the type of investigations that we're running. We also pull in more officers if it's a large-scale operation, so we can draw upon 160 officers if we're working something large-scale; if we're gonna tackle a borough. More recently we had a project in Staten Island and we dedicated more officers to the project because it was something that we wanted to look at as far as cutting down on the trafficking in Staten Island.

CHAIRPERSON JOHNSON: Twenty-one folks working on this and other stuff, on the criminal investigation you mean...? [crosstalk]

SHERIFF JOE FUCITO: Correct. Correct.

CHAIRPERSON JOHNSON: That seems like far too small, for a city as large as ours, a city with

right now because I have to see the impact of some of the legislation -- how it's going to roll into effect and what the effect on the network is going to be. Our main goal is to tackle the network, that's what we wanna tackle; I don't wanna give a firm number that we need 100 officers; we may need 10; we wanna tackle the network.

CHAIRPERSON JOHNSON: How many retailers are -- we said it earlier -- are selling cigarettes in New York City; 9,000? What's the number?

DEPUTY COMMISSIONER BAGGA: It's approximately 8,200.

COMMISSIONER BASSETT: It's gone down ... [crosstalk]

CHAIRPERSON JOHNSON: Eighty-two hundred...

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CHAIRPERSON JOHNSON: Okay; is it... is it

SHERIFF JOE FUCITO: I couldn't give you

that estimate at this time, [inaudible]... [crosstalk]

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SHERIFF JOE FUCITO: Hold on one second.

We're still working with OMB on the number. I don't wanna commit to you that we need 100 officers; I don't wanna commit to you that we need four officers.

CHAIRPERSON JOHNSON: Okay, well a big

part of this discussion today that I think Council Member Koo was getting at; that we heard from Council Member Espinal, and I think is a legitimate question to be asking about the black market, and when you raise the price do you see an influx in cartons of cigarettes that are being sold on the black market and so, I know that Dan Goldberg from Politico New York did an article this morning about the black market itself -- I'm not gonna read the whole things, but he said in his piece that... it says that when the price of cigarettes increased in 2002, the smoking rate in the city dropped -- as you said, Commissioner Bassett -- from 21.5% to 18.4% in two years. Nearly half of smokers reported that they had reduced the number of cigarettes they smoked, thought about quitting or tried to quit in response to the tax increase -- so that goes to what you were saying -and while the portion of cigarettes purchased outside of New York City doubled, it only reduced the effect

of price by one-third, the study said. Then in 2005
the smoking rate tipped back up but declined
following the 2006 media blitz highlighting the
dangers of smoking, as you said. Between 2001 and
2008, tobacco-control spending increased tenfold,
according to the IBO. State taxes increased in 2008
and 2010, federal tax increased in 2009, and the
smoking rate in New York City continued to trend
lower. Then the recession led to a 47% cut in
funding to tobacco-control campaigns and,
predictably, the smoking rate began to rise again,
peaking at 16.1% in Mayor Bloomberg's final year. So
that goes to what you said, but the issue here in all
of this is an influx of cigarettes into the black
market, that is the issue; we have to worry about
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COMMISSIONER BASSETT: We... we...

[interpose]

that.

CHAIRPERSON JOHNSON: That is why I need to know how many officers you need; it's an incomplete discussion, and I understand you're not gonna tell me today; I understand you're talking to OMB, but for us to be able to have a full conversation about increased enforcement related to

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the measures that we're seeking to pass today to improve the public health of New Yorkers and to crack down on bad actors and to go after networks in places like Virginia, that you talked about, but also go after individual retailers who are selling cigarettes at a much lower price than the minimum price, which is happening all over the city, and they're doing it through black market cigarettes that they bought, that they then sell at a lower price -- you need more officers; I need to know the number. You're not gonna tell me now, but I need to know.

SHERIFF JOE FUCITO: I appreciate your passion on this, I do. The reason why I'm not committing to a certain number of new officers; we don't wanna use a shotgun effect; we don't wanna just go out there and throw officers and say let's grab everybody on the street who has an untaxed pack of cigarettes; that's not the enforcement model we use; that doesn't seem to be the enforcement model that the people want. What we are trying to develop is a strategy, a long-term strategy to cut off the trafficking network; it doesn't just require deputy sheriffs; it requires auditors, it requires other types of skill sets needed to cut that type of

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trafficking down; we can have follow-up, [inaudible] ... 3 [crosstalk]

CHAIRPERSON JOHNSON: Sheriff, I understand, but...

SHERIFF JOE FUCITO: we need to ...

CHAIRPERSON JOHNSON: but the reason why you heard Council Member Koo go on -- and I say this not in a pejorative way -- the rant that he went on related to the black market of cigarettes in Flushing and he walked over to me and he walked over to you and gave you his card -- is he says that in Flushing there is so much of a black market that it's happening everywhere in his neighborhood; he sees it, he hears about it, it is going on; he said he has never seen a single enforcement action in Flushing. I'm not saying you don't have officers in Flushing; what I'm saying is, with 21 folks that are potentially doing these criminal investigations and enforcement matters in all five boroughs, they're probably not in Flushing that often; they have a big city, you're putting resources towards Staten Island, you're putting resources towards other places; you need more officers and to come today and to not at least have a range to say okay, I have 21 now; I need

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potentially 10 more, 15 more, 20 more; 60 more, but
to not give some type of range that you need, it's
not fully helpful in the context of the conversation
we're having today. So I would have hoped that the
conversations between the Department of Finance, the
Sheriff's Office and the Office of Management and
Budget would've included a conversation on the range
of new needs associated with putting these bills
forward and having them [inaudible], because anything
we pass here in the Council comes down to
enforcement.

add, Council Member, a reminder that the cap on retail licenses will increase the incentive [background comment] for self-enforcing behavior, because the cost of a violation will be higher; it can put you on the path to losing your license forever; not just having to pay a fine. So I expect in this whole suite of bills that we will have higher incentives for compliance among retail outlets, because they don't wanna risk losing their license.

CHAIRPERSON JOHNSON: Great. I wanna let everyone know that we have been joined by the young people at The Raymond York School, P.S. 65 in Queens;

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- that is in Council Member Ulrich's district. 2
- 3 [clapping] Welcome. Thank you for being here.
- 4 Don't smoke. [laughter]
- 5 Okay, we're gonna go back and I'm gonna call Council Member Barron, followed by Council 6

Member Torres. COUNCIL MEMBER BARRON: Thank you, Mr. Chair and thank you to the panel for coming. before I bring my comments about this topic, I just

have to continually remind all of us that this nation historically has used the term "black," the adjective "black" for things that are negative and things that

are bad, and I've heard the term "black market" used

here by several people, and what I would ask is that

16 we become more conscious of the negativity that's

17 generated when we use those phrases and that we

18 refrain from that and perhaps use the term

19 "unregulated market" or "underground market," because

20 I find it offensive to have that adjective "black"

21 placed in the terms of looking at something that's

2.2 not legal or not done appropriately, so... [interpose]

2.3 CHAIRPERSON JOHNSON: I apologize,

Council Member Barron... [crosstalk]

COUNCIL MEMBER BARRON: Thank you...

Τ	COMMITTEE ON HEALTH 110
2	CHAIRPERSON JOHNSON: that was not my
3	intention
4	COUNCIL MEMBER BARRON: I didn't think
5	that it was; it's just something [crosstalk]
6	CHAIRPERSON JOHNSON: it's not my nature
7	[sic]
8	COUNCIL MEMBER BARRON: that we do; we
9	get comfortable with it… [crosstalk]
10	CHAIRPERSON JOHNSON: I agree with you.
11	I apologize. I want to apologize on the record
12	COUNCIL MEMBER BARRON: so I didn't take
13	any personal offense from you [sic] thank you; I
14	appreciate that.
15	So now to talk about the topic at hand.
16	I think when I first started smoking I was 16, I had
17	just gotten into college and everybody else smoking,
18	so cigarettes were I think 35 cents a pack so I'm
19	telling you my age 35 cents a pack, so everybody
20	else did it; it was cool, so I started smoking, and
21	we know that nicotine is addictive, and as the price
22	went up and up I decided I would smoke less and less
23	and then there was one point in my life that I just

decided that I would stop and so I did stop smoking,

cold turkey, so to speak. But it's difficult and

it's troubling to hear your testimony and to know
that there's nicotine in these hookahs and that young
people are being addicted for being attracted
unknowingly and unwittingly and so I understand
that there is a great connection between raising the
price and limiting the number of people who get
exposed to tobacco in the first place, especially
when the research tells us that minds are not fully
matured until about mid 20s, so young people get very
easily influenced, so if we can keep them from
getting attracted to that or involved with that until
they're at an age to know listen, you're playing with
death here, then perhaps that will help to reduce
that. So I'm in favor of that, but I did have a
couple of questions. I wanted to know; are there
some types of these products and experiences that are
more attractive because they're cheaper? As we
compare tobacco and e-cigs and the hookah and other
tobacco products, are there some that are more
readily accessible because they're cheaper?
COMMISSIONER BASSETT: I would say that

23 the other tobacco products that include cigarillos and small cigars; roll your own; ones that haven't been subject to tax or to minimum prices and are

2	cheaper, have appeal to youth, in part because of
3	their costs. So this application of minimum pricing
4	to other tobacco products, not just small cigars and
5	cigarettes something that New York City will be
6	the first jurisdiction in the nation to use will
7	be elevating the price of those products and thereby
8	because youth are so price-sensitive, as you
9	yourself have just described; making it less likely
10	that they'll use these products.
11	COUNCIL MEMBER BARRON: And in terms
12	COMMISSIONER BASSETT: All of them are
13	equally dangerous.
14	COUNCIL MEMBER BARRON: Say again.
15	COMMISSIONER BASSETT: Yes, all equally
16	dangerous… [crosstalk]
17	COUNCIL MEMBER BARRON: Okay.
18	COMMISSIONER BASSETT: so it's not as
19	though there's a variability in risk and exposure to
20	tobacco products.
21	COUNCIL MEMBER BARRON: That same
22	question then applies to different ethnic groups; are

there some products that are more attractive to

particular groups of people than others; have you...

25 [crosstalk]

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2 COMMISSIONER BASSETT: Gee, I think that 3 we can say that among youth, the other types of tobacco products -- partly because the price has not 4 gone up because they remain untaxed -- have become more widely used and they are widely marketed. 6 think that one of the things that we haven't talked 8 at all about today -- because in this country our hands are tied in terms of being able to do anything about the marketing practices of the tobacco 10 11 companies -- is that these products are 12 differentially marketed to poor, low-income [bell] African American and Latino communities; that we can 13 14 only counter with counter-marketing. We can't keep 15 the tobacco industry from exercising its so-called 16 free speech. But I would say that the main trend 17 that we've seen over time has been a shift by youth 18 of all races, including large increases among Black 19 and Latino youth in the use of other tobacco

COUNCIL MEMBER BARRON: Thank you.

Mr. Chair, if you could just indulge me. My last
point is regarding Bill 1140. I noticed in your
testimony that you had some questions about how that
would be implemented in terms of not allowing people

products; not cigarettes.

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2 to smoke in the car if a child's [inaudible]...

3 [crosstalk]

COMMISSIONER BASSETT: In the car. Yeah.

COUNCIL MEMBER BARRON: A colleague in the Assembly, when I was there, wanted to introduce a similar bill and my objection was; to criminalize smoking in your car, as dangerous and as bad as that is and the secondhand smoke that your child would get, is another opportunity for police to have interaction with people in their own cars, in their own private vehicles -- oh, I thought the child was 5 years old and it's a child who's 15 -- whatever the excuse is, and I think it would be another part of the broken windows policy that this administration has allowed the Police Department to use and I see it as a problem and I'm not in favor of that, because I don't think that we can expand these opportunities for police to interact with people and put them in a situation where now they're subject to having their car searched and having their child taken from them 'cause they're being arrested and the child needs to go into the system if they can't get someone. see a lot of problems with 1140. Thank you,

25 Mr. Chair.

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COUNCIL MEMBER GENTILE: Thank you, Council Member Barron. Next up is Council Member

COUNCIL MEMBER TORRES: Thank you, Mr. Chairman. Commissioner, I know the decades-long trajectory of smoking rates has shown a dramatic decline; what has been the smoking trend in recent years, in the past three or five years?

COMMISSIONER BASSETT: In about 2010, the smoking rate stood at about 13... actually, it was 13.9%; then, as you've heard, there was a reduction in the tobacco-control budget, and the smoking rate went up, reaching 16.1% as the estimate, when I became Commissioner, the estimate for 2013. So the smoking rate now stands at 14.3%, which is about -it's statistically indistinguishable from the 2010 estimate. So... [crosstalk]

COMMISSIONER BASSETT: in aggregate, it's gone down from where we started in 2002, but we've had a bit of a blip in the past and that's why I'm so pleased to be testifying... [crosstalk]

COUNCIL MEMBER TORRES: So we have seen.

COUNCIL MEMBER TORRES: Right.

variables ten to correlate very closely with race.

COUNCIL MEMBER TORRES: But those

you... as you said... [crosstalk]

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COMMITTEE ON HEALTH

2	COMMISSIONER BASSETT: But when we look
3	at the smoking rates for blacks and whites in this
4	city, they are about the same.
5	COUNCIL MEMBER TORRES: Right, but I'm
6	not I'm not clear how you could have socioeconomic
7	disparities without racial disparities in smoking
8	rates. Are you telling me that the share of people
9	of color who are smoking has declined over time?
10	COMMISSIONER BASSETT: Well youth smoking
11	rates among blacks has always been lower than among
12	whites.
13	COUNCIL MEMBER TORRES: And what about
14	Latinos?
15	COMMISSIONER BASSETT: I believe that
16	it's the same; partly, I would argue, related to
17	price. [background comment]
18	COUNCIL MEMBER TORRES: Okay.
19	COMMISSIONER BASSETT: Related to price.
20	But the data per da… [crosstalk]
21	COUNCIL MEMBER TORRES: I have a
22	question
23	COMMISSIONER BASSETT: Well, this is a
24	longer conversation than probably your two-and-a-
25	half, three minutes [inaudible] [crosstalk]

2	COUNCIL MEMBER TORRES: Yeah. Fair
3	enough. Fair enough. Public housing; the Obama
4	Administration, for which I'm increasingly nostalgic,
5	came out with a rule prohibiting smoking in public
6	housing; I imagine the rates of smoking are probably
7	disproportionately higher in public housing than
8	elsewhere in the city; given those mandates and give
9	the disproportionate rates of smoking, what outreach
10	is the City doing specifically tailored toward the
11	residents of public housing?
12	COMMISSIONER BASSETT: Well I've had
13	conversations with Shola Olatoye about how we can
14	prepare for this; its implementation date, as you
15	probably know, is mid-2018.
16	COUNCIL MEMBER TORRES: Yeah. But
17	beyond… [interpose]
18	COMMISSIONER BASSETT: The intention is
19	to do outreach; one of the things that I'm pleased
20	with in this package of bills is the use of the 1939
21	Public Housing Law [crosstalk]
22	COUNCIL MEMBER TORRES: Are we investing
23	more res beyond the package of bills are
24	[crosstalk]

COMMITTEE ON HEALTH

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2	COUNCIL MEMBER TORRES: we investing more
3	resources in outreach and other means of [inaudible].
4	[crosstalk]
5	COMMISSIONER BASSETT: and education;
6	we're going to have to.
7	COUNCIL MEMBER TORRES: Do we have an
8	estimate of how much more we're going to invest?
9	[crosstalk]
10	COMMISSIONER BASSETT: I don't have an
11	estimate for you.
12	COUNCIL MEMBER TORRES: Okay. Anything
13	specifically tailored toward public housing beyond
14	your conversation with the Chairperson?
15	COMMISSIONER BASSETT: Well now we're
16	working on a plan advising NYCHA on how to get the
17	information out, working on our intention to make
18	cessation services available to residents. Many
19	residents in public housing have public health
20	insurance which covers tobacco cessation products, s
21	we wanna make sure that people are aware that their
22	insurance will cover these products so that it won't
23	carry out-of-pocket expenses for them.

dollar amount of the City's tobacco-control budget?

COUNCIL MEMBER TORRES: And what's the

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1	COMMITTEE ON HEALTH 120
2	COMMISSIONER BASSETT: Gosh, I really
3	should know that and I don't, right, as you ask me
4	this question, but it's millions of dollars.
5	COUNCIL MEMBER TORRES: Okay. And has it
6	increased since 2014? [crosstalk]
7	COMMISSIONER BASSETT: It has been
8	increasing and it now stands higher than it was when
9	I came in.
10	COUNCIL MEMBER TORRES: Okay, but you
11	don't have exact numbers specifically [sic]?
12	COMMISSIONER BASSETT: I don't have the
13	exact number [crosstalk]
14	COUNCIL MEMBER TORRES: Okay.
15	COMMISSIONER BASSETT: and I would be
16	happy to provide you with them.
17	COUNCIL MEMBER TORRES: Okay, that's the
18	extent of my questioning. Thank you.
19	COUNCIL MEMBER GENTILE: Thank you,
20	Council Member Torres. And our last set of questions
21	will be from Council Member Wills.
22	COUNCIL MEMBER WILLS: Good afternoon
23	Commissioners. I just have a couple of quick

25 The legal retailers who sell cigarettes and they

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questions; they're not gonna be long or drawn out.

COMMITTEE ON HEALTH

2	follow the procedure to card underage buyers, tha
3	deters and controls underage smoking to a degree,
4	doesn't it?

COMMISSIONER BASSETT: It's a violation of your cigarette license, as it's now called, to sell to minors as well as selling flavored tobacco products other than cigarettes, other than menthol cigarettes, and additionally, to sell untaxed cigarettes. Do you wanna add to that?

DEPUTY COMMISSIONER BAGGA: Dr. Bassett is correct; those are all violations; DCA conducts inspections to ensure that cigarettes are not being sold to those under the age of 18, which is required by state law, as well as those who are under the age of 21, that they are not being sold cigarettes as well, which is required by local law.

COUNCIL MEMBER WILLS: Both of you spoke, but neither one of you answered the question.

Dr. Bassett, you've handled yourself incredibly today; it's like a Senate confirmation hearing or something, but I really need an answer to the question... [crosstalk]

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1	COMMITTEE ON HEALTH 122
2	COMMISSIONER BASSETT: But I well then I
3	mi I have every intention of answering every
4	question asked of me [crosstalk]
5	COUNCIL MEMBER WILLS: Okay. So my
6	question was
7	COMMISSIONER BASSETT: but I must not
8	have understood your question.
9	COUNCIL MEMBER WILLS: So my question
10	was; legal retailers who actually go through the
11	correct process in carding underage smokers, do you
12	agree that that deters and controls underage smoking
13	COMMISSIONER BASSETT: Absolutely.
14	COUNCIL MEMBER WILLS: Okay. Uhm
15	COMMISSIONER BASSETT: If the legal
16	retailer who had sold me my first pack of cigarettes
17	had done that, I would not have obtained that pack or
18	cigarettes; neither would've Council Member Barron,
19	because they weren't meant to be sold to anybody
20	under 18.
21	COUNCIL MEMBER WILLS: So also we can
22	agree with the contention that these enforcements and
23	this new legislation that we are entertaining today
24	would actually add to the underground market, right,

Council Member Barron, the underground market to

2	which these cigarettes will now be sold, which then
3	dovetails into the counterfeit market also. So my
4	question is because we had to deal with synthetic
5	marijuana when we go into doing something like
6	this, if we don't have the enforcement measures that
7	the Chair was speaking of to counterbalance it; how
8	do we then control the underground market from
9	exploding past what it's already doing, number one,
10	and number two; how do we deal with, if we're not
11	already ready for it; how do we deal with the
12	counterfeit market which can I mean tobacco's
13	already a horrible product, but how do you deal with
14	the counterfeit market which then would introduce
15	things that are worse than tobacco to our people to
16	smoke?
17	COMMISSIONER BASSETT: Well the Sheriff,
18	who I want to public acknowledge, was really critical
19	to our key K2 efforts and [interpose]
20	COUNCIL MEMBER WILLS: Right.
21	COMMISSIONER BASSETT: our Emergency
22	Department visits for K2 have declined by nearly 90%,
23	thanks to the legislation passed by this chamber and
24	the actions of numbers of City agencies [interpose]

COUNCIL MEMBER WILLS: But see, you know...

Τ	COMMITTEE ON HEALTH 124
2	COMMISSIONER BASSETT: But So let me
3	just… [crosstalk]
4	COUNCIL MEMBER WILLS: Yeah, sure.
5	COMMISSIONER BASSETT: say that we've
6	heard from the Sheriff about all of the enforcement
7	actions that they're taking to eliminate the supply
8	chain to the City of untaxed cigarettes coming from
9	other jurisdictions that do not tax their cigarettes.
10	In New York City you have to have a tax stamp from
11	New York State on your cigarettes in order to sell
12	those products legally and we have a whole set of
13	activities that the Sheriff can tell you about, but I
14	guess I don't know who's the Chair at the moment
15	but we already heard about some of them, so
16	perhaps, in the interest of time, you should
17	summarize quickly.
18	SHERIFF JOE FUCITO: Okay. Councilman,
19	when you mention counterfeit, are you talking
20	counterfeit product or counterfeit stamped product,
21	because there is a diff [crosstalk]
22	COUNCIL MEMBER WILLS: No, I'm speaking
23	about counterfeit product.

SHERIFF JOE FUCITO: Okay.

COMMITTEE ON HEALTH

2	COUNCIL MEMBER WILLS: Because if you
3	already if you're doing a counterfeit stamp; if
4	you're selling illegally, you're gonna do whatever
5	you need to do… [crosstalk]
6	SHERIFF JOE FUCITO: Count 'Kay,
7	counter counterfeit product has its own way of
8	diminishing itself
9	COUNCIL MEMBER WILLS: Right.
10	SHERIFF JOE FUCITO: if somebody is a
11	smoker, a true smoker and you sell them a pack of
12	Newports that is counterfeit, it doesn't taste the
13	same, it doesn't produce the same effects, and what
14	that does; it drives the person away. So usually
15	when there's what we see what counterfeit markets;
16	it's almost like a sucker's transaction [crosstalk]
17	COUNCIL MEMBER WILLS: Well
18	SHERIFF JOE FUCITO: it gets a person
19	once, so we don't… [crosstalk]
20	COUNCIL MEMBER WILLS: Well that
21	[inaudible]
22	SHERIFF JOE FUCITO: see a large line of
23	counterfeit products [crosstalk]
24	COUNCIL MEMBER WILLS: I I understand
25	where you're going, believe me that can [bell]

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that's only true to a point, right, because just like

3 in any other illicit drug market, when synthetics are

4 introduced or some... that only works until the point

5 where they get it right; right, or until... [crosstalk]

SHERIFF JOE FUCITO: Uh there's...

COUNCIL MEMBER WILLS: something else is more addictive. Yes, because people use heroin that didn't want to use cocaine... [crosstalk]

SHERIFF JOE FUCITO: [inaudible]...

came in and that was a whole different product that people didn't like but the addictive property was much larger. So if you have a synthetic cigarette or if you bring in something that is not the exact thing that they're retailing now; if it begins to come into the underground market, then that is a problem; that introduces something that could be, possibly be more deadly to our communities. So what I'm asking is...
[interpose]

SHERIFF JOE FUCITO: Any counterfeit product, of course, carries risk; our material, our seizures have shown a very low volume of counterfeit product. We seized 20,000 cartons of cigarettes and I think we only had maybe 400 packs of counterfeit

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product, so the counterfeit product is low because of the reasons that I explained. If you're a business and you wanna keep getting your customers to come back, if you sell them a counterfeit product, they're not going to buy from you anymore because it doesn't produce the same effect. So counterfeit product, that issue is not as great as counterfeit stamped product... [interpose]

COUNCIL MEMBER WILLS: Right.

SHERIFF JOE FUCITO: that is the greater concern for us and we... last year we seized 40,000 counterfeit stamps, so counterfeit stamps is a significant problem 'cause it's a tax problem; that is something that we see a high volume of.

COUNCIL MEMBER WILLS: I appreciate it,
but I do want to put on the record that I believe
that any measures that are not fully vetted would
present itself; it would allow the, not counterfeit
stamp, but the counterfeit market to present itself
in a way that we haven't seen before. I would ask
the Chair, because there are so many questions to
this, that we did an additional hearing and we did it
with Small Business and possibly Public Safety,
because even though this is a public health issue, it

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still dovetails into other issues and other

3 committees should have the ability to fully weigh in

4 on this issue, so I would just publicly state that.

5 Thank you.

much. Well I'm glad it was an easy morning for you all [background comment] being here; it's a complicated issue and I'm glad we're having this hearing today; I appreciate you all being here.

Thank you very much for your testimony and I look forward to working together as we move forward on this package of bills. Thank you very much.

Okay, we're gonna call up... [crosstalk]
COMMISSIONER BASSETT: Thank you.

CHAIRPERSON JOHNSON: Assemblyman David
Weprin, who's been very patient, and I appreciate it.
He is not just an Assembly Member -- so if folks who
wanna talk, if they could go outside in the back,
we're gonna keep going 'cause we have a lot to do,
folks could expeditiously make their way out the back
of the chamber. [background comments] Okay. If
folks could move out, that would be great. So we're...
we are joined by Assemblyman David Weprin, who is not
just an Assemblyman who represents the 24th Assembly

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2	District in the great Borough of Queens, but he is
3	also a former member of this body; he was in the
4	Council from 2001-2009; he chaired the Finance
5	Committee of the Council and then he went to the
6	State Assembly; we are really grateful that he's here
7	today, and I wanna turn it over to him for testimony.
8	Thank you, Assemblyman Weprin for being here.
9	[background comment] If you hit the button there
10	you go.

 $\label{eq:assemblyman} \text{Assemblyman Weprin:} \quad \text{We have the same} \\ \text{problem in Albany.}$

Thank you, Chairman Johnson; thank you, my former colleagues and some current colleagues, former... Councilman Gentile, who I served with in the Council and Council Member Barron, who I served with in the Assembly and now serve with her husband, who I served with in the Council and Assembly as well, and of course, Councilman Cabrera, the sponsor of the bill that I'm mostly gonna be testifying about.

I'd also like to state at the outset that I support the entire package of bills, 'cause I think it's -- as was shown by the Commissioner and all the medical evidence -- smoking is dangerous and is detrimental to people's health and I think this

2	entire package will go a long way in reducing people
3	from smoking and endangering their lives. But I'm
4	primarily here to testify on behalf of Council Member
5	Fernando Cabrera's bill, 'cause I have a similar bill
6	in Albany; I'm talking about the bill about not
7	smoking in cars with children under eight; my bill in
8	Albany would apply to children under the age of 14.
9	New Yorkers have known of the dangers, as we heard,
10	of secondhand smoke for some time now and the tobacco
11	industry has started to take notice. The harmful
12	effects of secondhand smoke have been well-
13	documented. The American Lung Association states
14	that secondhand smoke causes approximately 7,330
15	deaths from lung cancer and 33,950 deaths from heart
16	disease each year. Children are even more
17	susceptible to the harmful effects of secondhand
18	smoke. When children inhale the over 7,000 chemicals
19	in cigarettes and tobacco products, they are more
20	likely to develop dear infections, asthma,
21	bronchitis, pneumonia, and other ailments. On top of
22	all that, children who inhale secondhand smoke are at
23	an increased risk of developing far more serious
24	ailments in the future, including cancer and heart
25	disease.

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New York was among the first states to take action to limit the dangers of secondhand smoke, and New York City has very often led the way in that effort as well. We were among the first to ban smoking in restaurants and bars and among the first to ban smoking in public parks as a state. You're not allowed to smoke in stadiums, airplanes, trains, or buses, so while we protect ourselves, we continually expose our children to secondhand smoke in cars. We have a responsibility to protect our children from this threat to their health. Council Member Cabrera has -- and I've introduced a similar bill in Albany, or have had it for a number of years -- are not new concepts. My bill has been in the Assembly for 20 years, since 1997; it's passed the Assembly but it has not passed in the Senate yet.

While New York is known for making legislative precedence, just last year Virginia became the eighth state to make it illegal to smoke in cars with children under eight. There are certain counties within New York State, such as Rockland County, that have already banned smoking in all cars with passengers under the age of 18. I am here to shed light on the importance of this legislation and

ask that you support our bills so that they are
implemented citywide and statewide. While the spirit
of the legislation is preventative, it should also be
used as a tool to empower children to speak up about
the dangers they may be facing. Oftentimes young
children in particular have a harder time speaking
out about what is going on around them, while parents
are generally more responsible, younger children are
often in carpools that are being driven by teenagers
who may not be as responsible and will think nothing
of having a cigarette in the presence of children.
Other times children may be in situations where they
are around non-family members, whether they are
family friends, who, sadly, might also light up in
front of children. By participating in hearings such
as these, I hope to empower the children to not be
shy and to speak out when someone around them decides
to light up, just as when my children often reminded
me, when they learned about the use of seat belts in
school, to put my seat belt on right away not that
I wasn't, but they certainly reminded me.

I call on the parents, grandparents, teachers, and concerned citizens of New York to help us raise awareness of the dangers of smoking in cars

with children present to please stop smoking while
your children are present or in areas where they will
be in the future. So great are the risk factors
involved with children inhaling secondhand smoke that
nearly all vehicles produced today and I'm sure
most of you know that if you have a recent car or a
car within the last, you know, eight years or so
they're not produced with cigarette lighters anymore,
you may recall. Luckily, the national decline in
smoking overall has forced carmakers to eliminate the
need to produce cigarette lighters in cars. I appeal
to every New Yorker to please consider the well-being
and the health of the child traveling with them and
to refrain smoking in their presence; just as safe as
we are in making sure their seat belts are on and
their car seats tight, we must also protect them from
smoke and environmental factors that could cause
irreversible damage to their developing body.

If you'd like to quit, there are many resources available in New York to help and support you; for more information you can call 1-866-NY-QUITS or visit nysmokefree.com. Again, I commend Councilman Cabrera on his legislation and I hope you pass it in the Council and we re-pass it again in the

COMMITTEE ON HEALTH

2	Assembly and hopefully eventually in the Senate
3	[crosstalk]
4	CHAIRPERSON JOHNSON: Thank

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 $\label{eq:assemblyman} \mbox{ASSEMBLYMAN WEPRIN: I'd be happy to} \\ \mbox{answer questions.}$

CHAIRPERSON JOHNSON: Thank you very much, Assemblyman Weprin; I wanna go to Council Member Cabrera, followed by Council Member Barron.

Weprin, thank you, thank you so much for your eloquent, detailed, reasonable argument for this bill and for the State bill and I assure you that you have my 110% support at the State level; whatever we could help with, please let us know; if we need to do a resolution here calling upon the State to make sure that we could have all New Yorkers all across the State and not just New York City residents to benefit really from intent of this bill.

I need to ask you a question that really comes down to the concern that the Commissioner mentioned; I'm sure you heard her; she was concerned about the implementation of it and enforcement of it. So for example, in your bill, a 14-year-old, how will the police be able to determine if you have a 14-

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year-old versus a 15-year-old; what are the check and balances that you have in place?

ASSEMBLYMAN WEPRIN: Well you know look, it's not a criminal penalty, it's just a fine, similar to a traffic ticket, and I know Council Member Barron's objection; she's probably gonna ask me next, 'cause she stated it in her testimony to the Commissioner, but I don't look at this as any more of a problem of stopping somebody and saying to them you're not wearing your seat belt, you were texting while driving, and we all know that those are laws that are recognized throughout the country, and the fact that someone might be stopped you know, because of racial profiling should not prohibit us from enacting law such as seat belt laws, such as texting while driving and such as smoking with children in the car. So I would think it would be a deterrent just knowing you know that it's a law in effect. was here in the City Council when a former colleague, Phil Reed, the late Phil Reed introduced a bill for movie theaters, not to use your cell phone, and it's basically there's a warning at the theater on the screen and people generally comply with it; I don't think it's an enforcement problem, I mean people

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aren't really enforcing it in the movie, other than to remind people at the beginning in the theater not to use their cell phone; then people get accustomed not to using them, and I would hope that the same would happen; we would be changing behavior, where people would be sensitive not to smoke in the car with children, just as people don't smoke in office buildings and they always smoke outside, they changed their behavior.

COUNCIL MEMBER CABRERA: Very good. I'm just curious as to the age 14; are you open to the... are you in support of... 'cause my bill is age of 8 and now we're looking... the advocates are literally calling to the age of 17, under 18; are you open to that idea, [inaudible]... [crosstalk]

ASSEMBLYMAN WEPRIN: Yeah, there are a num... I think we should do something. There are a number of jurisdictions that adopted 18, 14; 16 -- 8 was the most recent adoption. I think the protection is really more... I'm more concerned about the younger children because they can't speak up; at what age does that happen; it is 8; is it 10; is it 14? But I would think that protection should be more on children who can't necessarily speak up. If there's

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2	an adult in the car and someone is smoking; they can
3	say to the person smoking, please stop smoking; it's
4	bothering me or I would prefer you not do that. So I
5	think it's an arbitrary age, but there are some
6	jurisdictions that have adopted 14, but I'd certainly
7	like to see something in that area.
8	COUNCIL MEMBER CABRERA: Assemblyman,
9	thank you so much; I know you were waiting here for a
10	while; it just shows where your heart is at and thank
11	you for your leadership; really appreciate the
12	support… [crosstalk]
13	ASSEMBLYMAN WEPRIN: Well it was like
14	déjà vu; I enjoyed coming back to this wonderful
15	chamber; I had eight beautiful years here, years I
16	enjoyed very much in this chamber; some very fond
17	memories. I'm not used to being on this side of the
18	table, but I certainly enjoy coming back and thank
19	you for your kind courtesy.
20	COUNCIL MEMBER CABRERA: Thank you.
21	CHAIRPERSON JOHNSON: Council Member
22	Barron.

COUNCIL MEMBER BARRON: Thank you

Mr. Chair. To my former colleague and still

colleague in government, good to see you again, and

2	yes, my concern is that this proposal will increase
3	the opportunity for police officers to interact with
4	Black and Latinos on a basis that exceeds what
5	history and data show happens that does not happen in
6	other communities, and every time there is an
7	interaction between a police officer and a person of
8	color there is a heightened possibility of a physical
9	encounter and even leading to death; it's documented
10	fact. So now we know that New York City used racial
11	profiling to stop, question and frisk and we know
12	that they did not use it in accord with how the
13	legislation for that policy was implemented and that
14	it was unconstitutional in the way in which they did
15	it. I believe, with the history that's documented of
16	police interactions here in New York City, that this
17	will be another opportunity for the Police Department
18	to implement their theory of broken windows oh,
19	well if he's smoking in the car, he may also have
20	marijuana in the car or some other substance in the
21	car. So now a police officer stops you oh, hold
22	is the child? My child is 16. Oh, he looks like
23	he's 14; show me some ID, and on and on. What do you
24	have in the car? Can I search your car? Usually
25	they don't even ask if they can search the car, they

just begin that process and see what's happening. So
for me, it's very serious and I see it in my
community all the time. So I see this as another way
of police doing whatever they need to do to get their
numbers up, to show that they're being effective in
arresting the people who are potentially going to
create some other higher level of crime, because the
Police Commissioner has said yes, he's continuing his
policy of broken windows; notwithstanding the fact
that it's not implemented equitably across all
communities. So that is the reason why I'm opposed
to this; I certainly understand and appreciate all
the negative impact of secondhand smoke, especially
in a closed environment, but when I take it beyond
that, I can see some black man winding up dead
because a police officer stopped him for smoking in
the car, and that's why I'm opposed to this bill.
ASSEMBLYMAN WEPRIN: Council Member, I

ASSEMBLYMAN WEPRIN: Council Member, I share your concern in racial profiling; I've been a co-sponsor of every bill in Albany against racial profiling as well as here, but let me just ask you a question, if I may. By that same theory, you should advocate for repealing seat belt laws and texting

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while driving, 'cause the same thing would apply for stopping people as well; would you advocate that?

COUNCIL MEMBER BARRON: No. And I don't think that that's an appropriate question for what I'm laying out as I see happening. I'm saying that the law is not implemented equitably across the system, across the communities, and that's why I'm opposed to it.

ASSEMBLYMAN WEPRIN: Okay, I hear you and I think we should fight the racial profiling, but I don't think that should be a reason not to enact safety laws in cars.

COUNCIL MEMBER BARRON: I think that we can do as we talked about earlier; educate people. The Commissioner talked about the fact that people who smoke; at the outset it's a reflection of lower education and lower-income. So now, of course we can talk about the lower-income and we know there are many factors that contribute to that, that income gap, but we can certainly address the issue of education. And you know appeal to a parent's sense of -- listen; do you really know what you're doing to your child? The commercials that are on TV that talk about secondhand smoke and the impact that it has on

COMMITTEE ON HEALTH

2	children I think are very impactful, so I think we
3	need to follow down that path more than allowing
4	another opportunity for NYPD to interact with Black
5	and Latinos in particular. Thank you… [crosstalk]
6	ASSEMBLYMAN WEPRIN: 'Kay, I hear you,
7	Council Member; I respect you very much [crosstalk]
8	COUNCIL MEMBER BARRON: And I respect you
9	as well.
10	ASSEMBLYMAN WEPRIN: I have a lot of
11	respect for you; I just respectfully disagree on this
12	particular issue.
13	COUNCIL MEMBER BARRON: Thank you. Thank
14	you, Mr. Chair.
15	CHAIRPERSON JOHNSON: Thank you, Assembly
16	Member; good to see you.
17	ASSEMBLYMAN WEPRIN: Good to see you.
18	Thank you.
19	CHAIRPERSON JOHNSON: Okay, we're gonna
20	get into the panels; we're gonna hold folks to three
21	minutes, three minutes, you're not going past three
22	minutes or I'm going to cut you off and it's not
23	because I don't like you or I don't like what you're
24	saying, it's just because we have a lot of people to

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testify today.

2	So the first panel Robin Vitale from
3	the American Heart Association; Kevin O'Flaherty from
4	the Campaign for Tobacco-Free Kids; Michael Davoli,
5	the American Cancer Society Cancer Action Network;
6	Michael Weitzman and Jennifer Polinski from CVS. Dr
7	Weitzman. Michael Weitzman, M.D. Okay, we're gonna
8	MICHAEL WEITZMAN, M.D.: My name is
9	Michael Weitzman and it's a great honor for me to
LO	testify before you today. I want to… [interpose]
11	CHAIRPERSON JOHNSON: If you could talk a
12	little closely to it and project.
L3	MICHAEL WEITZMAN, M.D.: And project. I
L 4	really congratulate our City Council and Department
L5	of Health and Mental for their continued efforts to
L 6	protect the public from a profound public health
L7	threat. I believe that the upcoming bill,
L8	specifically that dealing with hookahs being
L 9	discussed today, is the needed next step [crosstalk
20	COUNCIL MEMBER GENTILE: Doctor, just put
21	the mic a little closer… [crosstalk]
22	MICHAEL WEITZMAN, M.D.: is the needed
23	next step in the regulation of hookah use in New Yor
24	City and I support it wholeheartedly. I'm a

pediatrician by training, who is a professor of

pediatrics, environmental medicine and global public
health at New York University. I have more than 40
years of caring for and training thousands of others
to care for children, adolescents, and young adults.
I have been conducting research that entire time and
consulting to a large number of city, county, state,
and federal agencies, including the CDC, the
Environmental Protection Agency, and most recently,
the Federal Food and Drug Administration on the
effect of environmental contaminants such as tobacco
smoke on health; for the past five years my work has
largely focused on water pipes and hookahs. These
studies have clearly indicated many of the things
that have been stated here about adverse health
effects are the consequence of our work, but these
studies clearly indicate markedly dangerous levels of
multiple chemicals in the air of hookah bars that
cause cancer, hearth disease and countless other
problems; they also have shown, these studies have,
and these data here are from studies that we did in
East Village hookah bars, and I'd be glad to go over
that with you, if I have enough time. Basically,
they show you the levels above regulatory standards
that we found in ten hookah bars; for the ones that

2	don't have regulatory standards, that's the
3	relationship between what we found in regulatory
4	standards is because there aren't regulatory
5	standards from federal agencies for those. The slide
6	beneath it is results of what are called inflammatory
7	markers, so inflammatory markers in the blood are a
8	sign of systemic inflammation; inflammation is highly
9	related to the development of diabetes,
10	cardiovascular disease and there's growing data
11	even depression. So this is data about hookah bar
12	workers, these are individuals that we tested before
13	and after shifts who didn't themselves use hookahs,
14	and you can see the mark changes in inflammation that
15	they've gotten from an eight-hour work shift. [bell]
16	CHAIRPERSON JOHNSON: Doctor, we're
17	gonna
18	MICHAEL WEITZMAN, M.D.: Cut me off?
19	CHAIRPERSON JOHNSON: Yes, because I'm
20	sure Council Member Gentile's gonna have questions
21	for you
22	MICHAEL WEITZMAN, M.D.: Sure.
23	CHAIRPERSON JOHNSON: so you'll be able
24	to talk a little bit more about what you were gonna

testify on, so we're gonna go to the next person who

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wants to testify. So you're gonna have the opportunity to answer questions. So whoever wants to be next.

Thank you, Chair. ROBIN VITALE: My name is Robin Vitale from the American Heart Association. Thank you very much for this opportunity to testify. You'll see on my submitted testimony there is a list of bills that I'm able to speak on today and I'm gonna do my best to synopsis as quickly as possible. I'm going to skip over a good chunk of the information behind the health impact of smoking, because I think that's been well-stated on our previous panel. But we know smoking kills and that is why the American Heart Association is strongly in support of any and all efforts that help to reduce access to tobacco, limit exposure to secondhand smoke and generally promote awareness about the dangers of tobacco use. Meanwhile, our city has often led the way in pioneering health policies; there is always work to be done, and as long as we continue to lose 12,000 New Yorkers to tobacco-related illness every year, we have a responsibility to pursue more solutions around this health risk.

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Speaking specifically around some of the proposals related to smoke-free housing, the American Heart Association did support the HUD proposal and we're looking forward to a successful implementation of those standards. We are strongly in support of the opportunity to provide transparency and disclosure with those multi-unit housing units, and we certainly wanna make sure that any and all opportunities to protect the elderly, children and people with chronic illnesses in these housing units are protected.

We know that while we're certainly very passionate about advocating for comprehensive smokefree policies, the American Heart Association wants to assure that smokers are not denied access to public housing, as they can abide by policies which allow for outdoor smoking areas. And, as Council Member Torres mentioned, a well-funded cessation program can complement the strategy to support any tenant population in the effort to reduce smoking rates in the building.

Related to tobacco-free pharmacies, this is another area that the American Heart Association is strongly in support of; we are strong advocates to

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banned tobacco sales in all healthcare institutions,

which obviously also includes pharmacies. And this

is just another step in our longstanding efforts to

denormalize tobacco products in our community.

Speaking to the retail license effort; evidence shows that it's more difficult for smokers to quit and particularly in low-income areas when they reside in close proximity to tobacco retailers and children exposed to tobacco retailers can double the risk of tobacco use initiation. Communities will adopt these licensing laws as one way to ensure compliance of tobacco laws and to combat the public health problems associated with tobacco use. same argument holds true for the need to monitor compliance of laws involving electronic cigarettes. And the fees connected to the license registration are a necessary tool to fund needed oversight and management of these programs. It is appropriate to assess these fees periodically and to ensure that the costs involved are commensurate with the current operation needs.

Lastly, regarding price -- I realize I'm almost out of time -- we know tobacco use in any form including e-cigarettes is bad and we certainly

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appreciate that the price sensitivity is the number
one tool [bell] to address this concern, so we
support any and all efforts to increase the price
floor as well as increase the tax on other tobacco
products as well. Thank you, Chair.

CHAIRPERSON JOHNSON: Thank you, Robin. Kevin.

KEVIN O'FLAHERTY: Thank you, Chairman.

I'm so excited to actually have some water up here by
the time I get here, it's great.

Thanks so much for the opportunity to testify today in support of these great new proposals to reduce tobacco use in the City, especially among kids. As you know, you've done great work over the last 10, 20 years to cut youth smoking by more than half and reduce adult smoking by a third, but that still leaves over 900,000 smokers in the City, including 15,000 kids and I think we all agree we need to do more.

I'm gonna spend most of my time specifically talking about Intro 1544-A, your bill, Chairman Johnson, that sets a price floor on all tobacco products, expands the original price floor, increases it, and applies a tax on OTP [sic] as well

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as taking the minimum pack sizes from the 2013 legislation and expands it to all tobacco products.

Decades of research show conclusively that price increases dramatically reduce tobacco use. As the Commissioner mentioned earlier, there is no more single effective tool in our toolbox that helps drive down youth smoking rates and adult smoking rates across the board. So doing anything we can to increase those prices, keep them high and prevent kids from having access to cheap products and encouraging adults to use price as a reason to quit helps reduce tobacco use and we think is a worthwhile goal.

I did wanna comment a little bit on some of the comments that Council Member Koo and Espinal and you, Chair Johnson mentioned about the illegal sales. You know there is no question that the sale of untaxed cigarettes is an issue here in New York City, but the numbers don't lie; New York City's price enforcement policies have helped to drive smoking among youth and adults to historic lows, and the data just doesn't come from pack sales, it comes from surveys that have been tested for years, multilayered, that show that people really do quit as

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a result of these increases. We should do all that we can to combat the illegal sales through increased enforcement and we should support the Sheriff's Department in any way we can to do that. If we do that, not only are we gonna get more people to quit, but we're gonna get more legitimate businesses that'll get the sale of those products and the City gets the revenue. But as long as more adults are quitting and fewer kids are starting, then this is worth doing and it's important to remember that. All the evidence tells us that this is exactly what has happened and what will happen when you pass these bills.

One last thing; many economic studies have found that particular groups are more sensitive to price than others; youth are more price-sensitive than adults and price increases work more effectively to reduce smoking among males, Blacks, Hispanics and lower-income smokers. When some of the opposition comes up here today and says, you all, this is an aggressive tax, it's gonna hurt low-income smokers and low-income communities, I would urge you to look at them with a healthy dose of skepticism and perhaps dismay, because it is the tobacco industry, with

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tobacco retailers that aggressively target these 2 3 communities by putting more stores in their neighborhoods, lower-priced products in their 4 5 neighborhoods, more flavored [bell] products in their neighborhoods. These price floors will help these 6 7 populations quit at higher rates than the rest of the 8 population and I think that's really critically important to consider as you move forward with this legislation. 10 11 CHAIRPERSON JOHNSON: Thank you, Kevin.

Jennifer.

JENNIFER POLINSKI: Mr. Chairman; Committee Members, my name is Dr. Jennifer Polinski; I'm a pharmacoepidemiologist and health clinical researcher in the Medical Affairs Department at CVS Health and I'm here today to speak about CVS' experience with removing tobacco products and subsequent reductions in cigarette purchases nationwide.

So on September 3, 2014, CVS removed tobacco products from its more than 7,800 retail stores nationwide. We conducted two evaluations to assess whether restricting access to tobacco would reduce cigarette purchasing. Using household

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cigarette purchasing data from IRI Nielsen, we compared households that purchase cigarettes exclusively at CVS Pharmacy to households that purchase cigarettes at other locations and/or CVS Pharmacy. Households that had purchased cigarettes exclusively at CVS Pharmacy before we removed them were 38% more likely to stop purchasing cigarettes for at least six months in any location. And those consumers that bought more than three packs a month at CVS were more than twice as likely to stop buying them after we removed them from our stores, likely reflecting the greater disruption in their tobacco use and purchasing behaviors.

Our second evaluation used eight months of state-level purchasing data from IRI and in the eight months after CVS stopped selling tobacco, we found smokers in these states with CVS pharmacies stopped or reduced their cigarette purchases across all retailers by five packs per smoker, as compared to smokers in states with no CVS stores.

The result of the two evaluations at the household level and at the population level demonstrates that restricting access to tobacco is an effective approach to reduce cigarette purchasing and

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consumption.

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presumably consumption of cigarettes. The significance of these results is striking for public health. In the 13 states where CVC Pharmacy locations have more than 15% of the market share, consumers purchased the equivalent of 95 million fewer packs of cigarettes over the eight months subsequent to tobacco removal. This represents a 1% reduction in sales in these states and presumably

Finally, as an advocate for living

tobacco free, CVS Health is proud to partner with the

nation's leading tobacco control and youth

organizations to support comprehensive education,

tobacco cessation and healthy behavior programming.

This commitment reflects our company's purpose [bell]

as the largest pharmacy innovation company to help

people on their path to better health. Thank you.

CHAIRPERSON JOHNSON: Thank you very much, Dr. Polinski. Before I turn it over to Council Member Gentile, who I know had some questions, I wanted to just ask you: how much money do you estimate that CVS has not received since you discontinued selling cigarettes?

JENNIFER POLINSKI: That's a good question. I know that at the time those numbers were made public; there were a couple numbers in the public sphere; I do not know them offhand. As I said, I'm a researcher and pharmacoepidemiologist;

I'm sure we can get those to you.

CHAIRPERSON JOHNSON: But it's a significant amount of money; it's in the tens of millions of dollars that I would assume CVS was getting annually through tobacco-related sales that they are no longer getting because CVS had decided they believe that in the best interest of their customers and in the welfare of the public that the appropriate decision was to discontinue the sale of tobacco; is that right?

JENNIFER POLINSKI: It's accurate that CVS does believe that in its mission to helping people on their path to better health that selling cigarettes was not in accordance with that mission. I don't know the numbers about sales and we can get those for you.

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CHAIRPERSON JOHNSON: Thank you very much. Council Member Gentile. I want to applaud CVS for doing this. Councilman Gentile.

1	COMMITTEE ON HEALTH 155
2	COUNCIL MEMBER GENTILE: Thank you.
3	Thank you, Mr. Chair.
4	Dr. Weitzman, I'm curious; you said this
5	chart here represents the testing you did on
6	employees at the hookah establishments; is that
7	correct?
8	MICHAEL WEITZMAN, M.D.: That's correct.
9	COUNCIL MEMBER GENTILE: Okay. And it
10	shows elevated blood inflammatory markers
11	MICHAEL WEITZMAN, M.D.: Correct.
12	COUNCIL MEMBER GENTILE: and other types
13	of concentrations; correct?
14	MICHAEL WEITZMAN, M.D.: Correct.
15	COUNCIL MEMBER GENTILE: So the aspect of
16	the Bill, 139-B, that would require ventilation
17	systems within the area, not only in the back where
18	they have the charcoal burning, but also out front
19	where you have employees and you have patrons who are
20	not smoking; do you see that as a means by which
21	these numbers will at least get better if not
22	disappear?
23	MICHAEL WEITZMAN, M.D.: Well I'm a
24	scientist, so I require hard data; I would imagine

that it would result exactly in what you're saying,

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[crosstalk]

COUNCIL MEMBER GENTILE: Right.

but it depends upon the size of the ventilation ducts, where they're placed, what role the hookah bar worker plays, because not everybody goes in the back and lights the charcoal, but surely it can't possibly hurt individuals in the hookah establishment, and I'm glad that you mentioned that there are large numbers of people who go to hookah bars who don't participate in smoking that themselves are exposed to virtually the same amount of tobacco products as the person who's smoking.

COUNCIL MEMBER GENTILE: Was any study like this done on patrons of hookah bars?

MICHAEL WEITZMAN, M.D.: Right and we are in the midst of analyzing that data. There is one such study from Toronto, but did not look at inflammatory markers; looked at acute changes in cardiopulmonary function, as we did as well, and we found alterations — those are acute. Again, people have asked about deleterious effects of hookahs; what we ultimately wanna know is long-term effects, right; you wanna know about cancer and heart disease...

cancer. So so far we have found that typical tobacco

has about 6,000 different chemicals in it and 60 have

been identified as being carcinogenic and there are

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17 cancers that they cause. We tend to focus on lung
cancer; there are numerous other cancers that are
caused as well and with time we will find other
things as well. Remember, when you talk about non-
tobacco, vegetative matter that's being combusted,
the only thing that's different is the absence of
nicotine, and nicotine is not carcinogenic. It is
true that if you have underlying cardiac disease you
can increase the risk for a stroke or a heart attack
from nicotine, but when we're talking largely about
young people, and we are largely talking about young
people, there are multiple population-based studies
that show that it's between the age of 16 and 24 that
you're most likely to go to a hookah bar; they're not
likely to have underlying heart disease themselves.

hydrocarbons and the aldehydes are all cancer-causing agents. The particulate matter that you mentioned -- and you'll see that we have particulate matter 2.5 -- so that's very small particulate matter, right? If you inhale something with large particulate matter, it's gonna get stuck in your throat or your nose; you're gonna cough; it's much less likely to cause long-term effects. It does increase your risk for

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2	upper respiratory cancers, but they're far less
3	likely to occur than lung cancer. Really small
4	particles get stuck in very small, what are called
5	bronchioles, so those are things that will stay for
6	years, so you actually have physical contact and that
7	particulate matter includes the poly aromatic,
8	hydrocarbons, the aldehyde, and the benzene. So the
9	particulate matter that's small is profoundly
10	important.

The carbon monoxide levels that we find here would affect somebody who has underlying cardiac disease. When you see somebody who's committed suicide by sitting in a car in a closed garage, they're dying of carbon monoxide poisoning, but it's substantially higher. These levels can cause a headache, might make you wanna stop or go outside, but I don't see these are particularly dangerous.

And then the nitrous oxide clearly does damage to arteries themselves.

COUNCIL MEMBER GENTILE: I see. Okay. That kinda lays it out pretty well.

So you also testified last year in the hearing, and I thank you for coming back again this year, and one of the things you mentioned or

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2 supported was increasing the age to 21; am I
3 correct...? [crosstalk]

MICHAEL WEITZMAN, M.D.: Sure...

5 [crosstalk]

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COUNCIL MEMBER GENTILE: Yeah.

MICHAEL WEITZMAN, M.D.: 98% of smokers in the United States have started before the age of 18...

COUNCIL MEMBER GENTILE: Right.

MICHAEL WEITZMAN, M.D.: and we know that earlier secondhand smoke exposure increases the likelihood that you're gonna become a smoker, because it -- through a biochemical mechanism; I'm not... I'm not talking just about socialization -- because secondhand smoke exposure increases the density of nicotine receptors in your brain and your likelihood of becoming addicted to nicotine or cocaine or heroin -- somebody mentioned Staten Island earlier -- I would bet you; there aren't data, but I would bet you that exposure to tobacco is part of the opioid epidemic, because you'd need far less exposure to an opioid if you've been either prenatally or during childhood exposed to secondhand smoke.

COUNCIL MEMBER GENTILE: Right. Well thank you for your work in this area and thank you to the entire panel for the work that you do in regard to tobacco and other areas to keep people safe.

Thank you, Chair... [crosstalk]

MICHAEL WEITZMAN, M.D.: Thank you for thanking us, but the real thanks I think goes to City Council.

CHAIRPERSON JOHNSON: Thank you very much, Doctor. I wanna turn it over to Council Member Cabrera for a statement.

much. I just wanna thank CVS for -- really, you went to heart of the matter; you put people above profits, and at the end of the day that's what it's all about and I believe that's the mission and should be the mission of every pharmacy out there. So thank you for your leadership in the business world and thank you for, finally, [sic] true research and science.

I had a question for the Doctor regarding the markers... [crosstalk]

MICHAEL WEITZMAN, M.D.: Yes, sir.

COUNCIL MEMBER CABRERA: the inflammatory

markers: is there a significant difference regarding

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age; was there ... did you study the variables regarding the age?

MICHAEL WEITZMAN, M.D.: So that's a great question. We were able to get ten hookah bar workers; it was very difficult to recruit them because of concern that they'd lose their jobs. have a grant application into the National Institute of Health to do a much larger study on this, because if you remember, the way we began to get clear air acts -- almost 40 years ago -- was by demonstrating that airline workers who were not smokers on planes, transatlantic planes, rather, were developing lung and laryngeal cancer. So damage to people who are not using a product in a workplace is one of the ways that you go about developing public health laws.

COUNCIL MEMBER CABRERA: Alright. And one last question to all the panelists. Do you have a position regarding Intro 1140 in preventing smoking where we have children, whatever age -- you can address whatever age -- 14, 18, you know, 8 years old -- do you have a position regarding smoking in a car, should we make that illegal?

ROBIN VITALE: The American Heart
Association is very interested in the policy, but we
don't have a position at this time.

COUNCIL MEMBER CABRERA: Okay.

MICHAEL WEITZMAN, M.D.: The Academy of Pediatrics I don't believe has a position, but is very interested. It's clearly in the child's best interest, other than witnessing a potentially terrible social interaction.

COUNCIL MEMBER CABRERA: Okay. Thank you.

Campaign for Tobacco-Free Kids has a formal position on it either, although I think to get there, we would encourage legislation to have a higher age, something closer to the age where a child can actually make a decision to take a different form of transportation, whether that's 18 (which is, you know, sort of the age of maturity), whether that's 16 (which is the age you could get a driver's license in the State), I'm not sure, but 8 seems more arbitrary and very young; why would we not wanna protect a 9- or an 11-year-old's lungs in the same way we'd protect an 8-year-

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old. So I think we'd encourage the Council to look
at moving that up in either case.

COUNCIL MEMBER CABRERA: That's very good; that's very helpful.

JENNIFER POLINSKI: And I'm here to share our experience with removing tobacco products from the store, but do not advocate either way for that legislation.

COUNCIL MEMBER CABRERA: Okay. Thank you.

much. For those of you that prepared very good, detailed testimony and weren't able to read it all, it is submitted into the record, it is being looked at, and we appreciate you being here today, so thank you very much. [background comment]

Okay, the next panel -- Mittin Chadha,

Adam Cheney, Saurin Desai, Lawrence West, Robert

Bookman, and Thomas Briant. Who am I missing? Adam

Cheney is there, Mittin is there, Robert Bookman is

there. Thomas Briant? Lawrence West? So Saurin

Desai; is he here, or is she here? Okay. Great.

You may begin in whatever order you'd like; just make

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2	sure	that	the	red	light	is	on	on	the	mic	and	λo	u
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ROBERT BOOKMAN: I'm just gonna jump in, since I'm so, you know...

CHAIRPERSON JOHNSON: Go ahead.

ROBERT BOOKMAN: so used to it.

My name is Robert Bookman; I proudly represent hundreds of the immigrant operators of our city's iconic sidewalk newsstands.

There are a number of inconvenient truths that were substantially left out so far today or barely touched on and I wanna go through those.

- 1. Tobacco is a legal product. Small business owners are driven to sell legal products to adults who wanna purchase them. We are not poisoning anyone and we are offended by that comment by one of your colleagues, who chose not to stay.
- 2. A statistic left out by all the government people who testified is that there is overwhelming compliance by the 8,200 licensed retailers in the City of New York when they are inspected by the government agencies. Undercover inspections for sale to minors -- 92% compliance, which is virtually full compliance. So if young

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people are getting tobacco in the City of New York,

they're not getting them from the licensed owners out

here who are selling tobacco, they're getting them

3. Raising prices raises the illegal markets, especially for young people. There was no illegal market 20 years ago; government has created this illegal market by artificially raising the prices of tobacco; that's a fact.

from the illegal market, which leads to number three.

A further fact is; Cornell University
just released a study today -- which I got on an
email; I haven't got to read it completely yet, but
their conclusion was that raising New York City
cigarette prices will ignite illegal street sales.
That's Cornell University, independent entity here.

4. Reducing the number of law-abiding sellers will have the opposite effect that you're trying to achieve today; it will also limit the number of new stores that can open, because in this inconvenience and sidewalk newsstands, 'cause if they can't get the tobacco license, they can't open the business; let's be honest about it.

5. The best way to reduce smoking, proven over and over again, is through education and through peer pressure.

Mr. Chairman, how many times have I said to you please stop smoking?

CHAIRPERSON JOHNSON: Many times.

ROBERT BOOKMAN: It's that, as what my grandparents would say, the noodging of the peers and... [interpose]

CHAIRPERSON JOHNSON: You are definitely a noodge.

ROBERT BOOKMAN: Yeah, and the education, that's the most effective program; that's how people stop smoking, and listen, I've had cancer deaths in my family; I'm not pro smoking; I've been a lifetime virulent, anti-smoker; I made my wife quit smoking; otherwise we wouldn't get married; she thanks me to this day that 35 years later she's still not smoking, but that's what's effective, and if you listen carefully to what Commissioner Bassett said, that is where... when you guys spend more money on education, the amount of smoking goes down; when you spend less money on education, the amount of smoking goes up, and sixth, and not last is;

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6. The bill that will limit the number of 2 3 licenses is likely illegal and will wind up in court. Let's understand; everybody has a State license to 4 see tobacco; there are only five counties in the State of New York where you need an additional 6 license and that's here in New York City. The State 8 may allow you to require additional requirements, but if I have a State license and I go to the City to get that additional license, the City can't say sorry, 10 11 we're not gonna give you that license and therefore 12 negate the license that the State, which is a higher 13 level of government, already gave you... [crosstalk] 14 CHAIRPERSON JOHNSON: Thank you. 15 ROBERT BOOKMAN: so that's really a non-16 starter. Thank you. 17 CHAIRPERSON JOHNSON: Thank you, Robert. THOMAS BRIANT: Mr. Chairman; members of 18 19 the Committee, my name is Thomas Briant and I'm the Executive Director of the National Association of 20

With the goal of these ordinances to protect the public health, one important solution

member stores here in New York City.

Tobacco Outlets, a national trade association of

50,000 retail stores that sell tobacco products, with

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that is not included in the ordinances is the focus on changing societal attitudes, that it is not permissible for adults to legally obtain tobacco products and then improperly provide those tobacco products to underage persons; these are what are called social sources -- older siblings, adult-age friends, parents, and even strangers are the kind of social sources where youth rely on to obtain tobacco products.

Why is social sources so important? The FDA, in 2016 issued the results of a major study and it found that 86% of underage youth obtained cigarettes from social sources; 79% of those youth obtained cigars and cigarillos from social sources. This means that retailers are not the primary or even the secondary source of tobacco products for underage youth and the proposed ordinances will not augment the protection of the public health because it is not addressing the youth access through social sources.

In addition, the higher minimum prices will not protect the public health. Introduction

No. 1544 would set high minimum prices on all tobacco products. New York City residents who buy tobacco products will perceive this action as being very

unfair and they'll be motivated to seek out other
sources of tobacco products, especially from sources
that don't comply with the law. Enacting extremely
high minimum prices threatens the health of the
overall community. The health of a city is not
measured just by the physical well-being of each of
its citizens but also the degree of adherence to the
law and the ordinances that are on the books.
Raising the minimum prices will exacerbate the
disobedience of the law by your very residents
because they will not submit to paying the mandated
prices on these tobacco products from stores within
the City limits. This fosters an environment for
elicit and illegal market operations where they're
allowed to thrive.

Also, the higher minimum prices will force more stores to close. In 2013, when the minimum prices were first enacted, there were 9,800 licensed retailers to sell tobacco; that number is now 8,200; there's been a reduction of 1,600 license retailers throughout the City. But with tobacco products accounting for up to 36% of in-store sales for your average convenience store, these higher prices and also the density limit will cause more of

1	COMMITTEE ON HEALTH 171
2	those family-owned stores to close and they'll be
3	involuntarily shut down, they'll lose their
4	investment and the employees will lose their job.
5	For all of these reasons, we ask you not
6	to support these ordinances. Thank you.
7	CHAIRPERSON JOHNSON: Thank you very
8	much.
9	[background comments]
10	CHAIRPERSON JOHNSON: You're such a
11	noodge. [laughter] Go ahead.
12	LAWRENCE WEST: Good morning Council; how
13	you doin'? My name is Lawrence West and I represent
14	my owner, Mr. Norinja [sp?] Saning [sp?], who is a
15	fairly responsible owner that follows all local and
16	state laws. We have a store located at 60-31
17	Metropolitan in Queens, Middle Village, Queens; I

think he's a fairly responsible owner because he's a new owner, he just received the establishment two years ago, and due to his track record, is on a

positive track; with the new sales tax increase, I

believe that the sales will be redirected to the

underground market.

I also live in an urban neighborhood where if you walk down the street you also see people

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selling cigarette packs for \$5.00 less than what we sell at our store and basically is gonna be \$7.00 compared to what the State minimum wanna raise to \$13.00.

Also, my owner purchased his business and it had a certain value, and I also heard, since the other people were talking over here sayin' that the value of his store won't go down, but in a sense, if he tried to resell his store or 7-Eleven tried to get it back from him, it's going to have a depreciated value from the renewal of the tobacco license.

Also, as a person looking to purchase his own 7-Eleven, I don't see a benefit for me having a business in New York State with all these new regulations and laws coming up and I don't see... it's not a good idea, nor is it [inaudible] in New York City at the moment.

Also, the timing of this announcement of the sales tax increase, in my opinion, wasn't ample time to have a bigger support or fact-finding to produce for as many responsible retailers that are out there; I had to adjust my whole schedule so I could come and make it at the last moment.

2	Here at 7-Eleven, we also have training
3	in place, whether it's computer-based or a system set
4	up by 7-Eleven, the Corporation, which sent in groups
5	of individuals underage-looking or underage trying to
6	purchase cigarettes; we have a green card and a red
7	card process that if we don't follow the laws or we
8	don't ask for ID; we get a red card, and then after
9	that red card we get chastised from the City or we
LO	get a violation from the City that we have to appear.
L1	But due to my store like I said, two years our
12	track record is like 97% in passing; everybody that
L3	works in my store gets properly trained and
L4	occasionally they come in with people that have
L5	I'm 40 years old; I don't look 40; they come in with
L6	people who have a beard, tall, 6' tall, and some
L7	certain guys that don't speak property English in my
L8	store may assume that this person's above the age and
L9	I think that's also like entrapment for my work
20	[inaudible] they're just tryin' to make a honest
21	livin' and my owner, who's tryin' to make a decent
22	livin' with his establishment. [bell]
23	CHAIRPERSON JOHNSON: Thank you, sir.
24	LAWRENCE WEST: Thank you.

CHAIRPERSON JOHNSON: Go ahead.

MITTIN CHADHA: Chairman Johnson, members of the Committee, thank you for allowing me to testify today. In the essence of time, a lot of these points have already been mentioned, so I'm gonna try to abbreviate it.

oh sorry. The limit... we're trying to limit tobacco licenses; if this law passes, it would significantly financially harm the value of my store; I'm a responsible convenience store owner; my store's employees are trained and provide friendly service and convenience to our customers. In addition, 7-Eleven goes above and beyond training, with very strict compliance checks on a regular basis. My store is a mystery shop [sic] to ensure that the staff is properly checking ID on all adult purchases.

Under this proposed bill, when I go to sell my business I will likely not be able to sell it at its rightful valuation; that's because my store will be in a district with license caps and a new tobacco permit likely will not be granted to the new potential owner. Tobacco sales are approximately 18% of my business, so if I cannot sell it with that

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license being available to the next owner, it devalues my business substantially.

As a 7-Eleven owner for over 15 years, we've been trying to transition people to healthier food and alternatives -- salads, humus, alkaline water -- we're not trying to hurt our customers, we want to have a healthy lifestyle and we're also working on that image and pushing those products. That's it.

CHAIRPERSON JOHNSON: Thank you, sir.

ADAM CHENEY: Chairman Johnson and the rest of the Committee; thank you for your time and I appreciate being able to be here and be part of the process.

My name is Adam Cheney and I'm a local 7-Eleven owner right her on Fulton Street, around the corner [background comment] and... thank you... [laugh] and I'll only take up a moment of your time.

We heard numbers of 35, 36 and up to 40% of sales, and for myself personally, it's nowhere near that number; it's a lot lower. It's not about specifically selling tobacco; it's the same reason why we sell something like the *New York Post*. When somebody comes to our store and they wanna get a cup

of coffee, they wanna be able to get the other items
that they want and that's what allows us to have the
minute edge that we do, compared to somebody like
Amazon or some unbelievably huge company we are
small business owners. I am responsible; I do
respect the law, we are compliant, and we're here
because this all matters in terms of satisfying the
guests; that's really all it's about. And in terms
of having restrictions of five-year ownership, a
three-year compliance cigarette or tobacco license,
that does still impact. Any regulations or any
standards that are added I put my life savings
into my store; it will impact it, whether or not caps
are put or a license is renewed and that will give
thought to somebody when I choose to retire, if I'm
able to retire, to whether or not they're able to
purchase that store. It does matter; I work six days
a week; I bring my kids with me to work on Sunday,
and I am happy to have my business and I appreciate
it, but at the same time, I am a small business owner
and we need to be protected the same way as everybody
else. And that's it, thank you.

CHAIRPERSON JOHNSON: Thank you all for your testimony, I appreciate your patience. For

2	those of you that submitted written testimony, it's
3	part of the record and I'm sure there will be
4	conversations between the folks here at the Council
5	I hope there are conversations between the folks
6	here at the Council and those of you that are
7	interested in this legislation as it moves forward.
8	Thank you very much for being here today.
9	[background comment] Oh, oh sorry, I apologize.
10	Council Member Cabrera has a question.
11	COUNCIL MEMBER CABRERA: I'm sorry, Mr.
12	Chair. I just wanted a clarification; you mentioned
13	retail stores, 9,000 to 8,200; what year was that?
14	THOMAS BRIANT: In 2013, we conducted an
15	Economic Impact Study when the first price increases
16	were proposed; there were 9,804 licensed retail
17	stores in New York City that sold tobacco products,
18	and then from prior testimony today, they referenced
19	the 8,200 figure, so it was about a 1,600 store
20	difference.
21	COUNCIL MEMBER CABRERA: Was there a
22	study done in following up with those stores as to
23	why they closed down?

THOMAS BRIANT: No, that study was done prior to the adoption of the ordinance to indicate

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what the economic impact could be. We estimated from that study there would be 2,000 stores that would close or no longer be licensed and then in reality, there are 1,600 that were no longer licensed.

the numbers, but there could be a correlation, but it does not mean causation, and so though it could've happened around the same time, like the recession, where a lot of businesses were shutting down, and so just because it happened during the same time doesn't mean that one necessarily caused the other, so that's why I was asking was there any particular research that would indicate causation and so just a thought. Thank you so much.

THOMAS BRIANT: You're welcome. Thank you.

CHAIRPERSON JOHNSON: Thank you all very much. Okay, next panel -- Elizabeth Carde from the American Cancer Society; Annette Spellen from ACS; Michael Seilback from the American Lung Association; Patrick Kwan from NYC Smoke-Free; Marla Tepper from Public Health Solutions; Deidre Sully from NYC Smoke-Free; and Lisa Spitzner from NYC Smoke-Free. That's seven people; there are six chairs; we can pull an

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- 2 additional chair over to the side as well.
- 3 [background comments] [pause] Go ahead.

MICHAEL SEILBACK: Good afternoon. My name is Michael Seilback; I'm the Vice President of Public Policy [background comments] and Communications for the American Lung Association of the Northeast.

I'm here today on behalf of the Lung
Association to voice our strong support for the
package of bills that were announced last week. We
know that the City's policies of strong smoke-free
air laws, a tobacco-control and cessation program, a
high tobacco tax, hard-hitting media campaigns, and
innovative tobacco-control policies are what have
helped significantly reduce smoking in this city.

It's important to recognize some of the things that were said in the last panel; specifically, that education and peer pressure are the best way to reduce smoking; that's factually inaccurate. We know that the biggest way to reduce smoking is to increase the price. We know that having a strong tobacco-control program reduces smoking rates. Peer pressure, while it may work on some people, it is not a public health solution.

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Additionally, there was testimony from the National Association of Tobacco Outlets; they talked about social sources. We agree; social sources are a major reason why young people smoke; that's why this body in 2013 passed a law that raised the sales age to 21 years old. By increasing that sales age we drastically reduced the amount of social sources that youth get their tobacco products from. It's very rare that 16- and 17-year-olds are hanging out with 21-year-olds to get their tobacco products. So we agree on that purpose and we wanna make sure that people understand social sources are real, but let's not argue that we need to do something other than what we're talking about today, which we know will reduce smoking rates.

You heard some arguments; I like to consider them the "sky is falling" argument; that we are just going to see businesses close across the city. The fact is; every time that we've sat and had conversations about tobacco control laws, folks have come in and said that everything is going to close; we're gonna regret the day that we talked about these bills. The fact is; that the facts do not bear that out; that business still is doing well. And someone

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in this last panel talked about you don't measure the
health of the city by the health of its people. I
would disagree and so would the Lung Association. We
know that the bills that we're talking about today
are gonna save lives and they are gonna build upon a
history of saving lives by this city, which have been
replicated not only across the state, but around the
world Thank you

CHAIRPERSON JOHNSON: Thank you very much.

PATRICK KWAN: Hi, my name is Patrick

Kwan; I'm the Director of NYC Smoke-Free at Public

Health Solutions. I wanna thank Council Member

Johnson, as well as the Health Committee for this

invitation and opportunity to speak today.

NYC Smoke-Free has been working for over 20 years to help establish and expand smoke-free protections in the City of New York; we are very appreciative that this year, which is the 15th anniversary of the NYC Smoke-Free Air Act, that we are here today talking about many tobacco issues, and one of the pride and joy that I have every day at NYC Smoke-Free is that we work in over 60 schools and we host many students who are high school interns of

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ours who are shocked, absolutely shocked that you know we used to smoke in the restaurants, that we smoked in the subways and things like that, so it's a great privilege to talk about tobacco-control efforts today.

pharmacies as tobacco outlets, which is Intro 1131.

While many New York City neighborhood pharmacies put the health of our communities first and do not sell cigarettes and other tobacco products, more than 600 pharmacies, half of which are Duane Reade and Rite Aid stores, which are both owned by Walgreens, still continue to peddle deadly and addictive tobacco products in our neighborhoods.

We have to understand and recognize that pharmacies are crucial, frontline providers of health care and medications and they should not be an outlet for the tobacco industry, which is best known for targeting kids as a customer base for their deadly product.

Intro 1131 will stop the irresponsible pharmacies from contributing to New York City's tobacco epidemic and get them out of the deadly tobacco business.

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On 1547, which is about stopping the 2 3 proliferation of tobacco outlets in NYC 4 neighborhoods, New Yorkers are seeing more and more 5 tobacco in our neighborhoods. And in some of our most vulnerable communities we have where tobacco is 6 7 both persistent and pervasive; we have chronic disparities of higher tobacco use and secondhand 8 smoke exposure rates that are coupled with widespread availability of dangerous tobacco products. And 10 11 alarmingly, many of the neighborhoods are also food 12 deserts that lack and avoid of healthy foods and are 13 yet also tobacco swamps, abundant with deadly and

addictive tobacco products.

In far too many New York City
neighborhoods it's easier for a child to find
cigarettes than a book or a swing set as we have more
than 8,500 tobacco outlets in our neighborhoods. In
response to the gentleman from the Newsstand
Association, I picked up my very first pack of
cigarettes from a newsstand around the corner from my
junior high school on the Upper East Side at Wagner
Junior High School.

And we also have to note that more than 1 in every 3 New York City high school student, they

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obtain their cigarettes from a neighborhood tobacco outlet; that's 1 out of every 3 of the students who obtain their cigarettes from neighborhood outlets, based on surveys.

We know that candies and cigarettes don't belong together, [bell] yet at neighborhood outlets teens and kids are bombarded with bountiful arrays and colorful sales displays of tobacco products.

Thank you.

UNKNOWN FEMALE: Good afternoon to the Chairperson and the members of this Committee.

First; I'm nervous. I'm a registered professional nurse and I've seen people die from lung cancer. I'm listening to a lot of conversations this morning, pros and cons about the bills, but just strictly from taking care of loving people who've been diagnosed with lung cancer, I'm here today to just say let's get together and do what it is that we can do to save lives, and that means supporting the pharmacy ban, Bill No. 1131; also, 1544 and 1547. We really need to begin to figure out ways that we can come together and work to save the lives of those people that are our family members, our friends, our colleagues, and my co-workers. We all know that all the empirical

data says that smoking leads to cancer, so I don't
know what their bickering is about; let's just kind
of stop it; let's just stop it and do those things
that we know within our hearts that we need to do; to
not have cigarettes available at the store right
around the corner from the junior high school. I
live in Harlem, oh my goodness, I don't have to tell
you stories; you probably know them yourselves about
how and where to we just need to be able to come
together and figure out how do we stop the sale of
cigarettes; let's take them out of the drug stores,
the pharmacies. If you're gonna sell them, let's
kinda limit the number of places that you can. Let's
do something about the e-cigarettes, and I didn't
even know about the proliferation of the hookah
places until I came here today; I thought a hookah
meant something bad I mean you know what I mean,
but anyway [laughter] Alright, so thank you for
listening to me; I appreciate the ability to be here.
[pause]

22 COUNCIL MEMBER GENTILE: Thank you.

ANNETTE SPELLEN: Good afternoon. I'd like to thank Chairman Johnson and the members of the Health Committee for allowing me to testify today.

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My name is Annette Spellen; I am a retired NYPD
Detective, a former smoker of 28 years and a five-
year lung cancer survivor. I am here to support the
pharmacy ban and the minimum price [inaudible] tax,
but I strongly support amending Local Law
1547(a)(2017) of the Administrative Code as it
relates to expanding the retail dealer license to
include retailers of tobacco products and setting a
cap on retail dealer licenses.

neighborhoods, especially my neighborhood of
Bushwick, are being saturated with tobacco products
and smoke shops. What is truly frightening to me is
the increase in smoke products that are being
displayed in some of our grocery stores and our deli
shops. These stores are frequented by our children,
are blocks away from our schools and I feel that the
displays of pipes and other colorful smoke items are
enticing our children.

I started smoking at the age of 13

because I felt it was cool and the smoke displays and advertisements lured me to the product. I listened to the previous speakers talk about minors, that they get their cigarettes from social sources; yeah, well

2	a lot of them do, but guess what; they usually steal,
3	they aren't given to them by a true adult and an
4	adult who really cares about them; they steal those
5	cigarettes or they get them from social sources that
6	they hang out with. I also hear them talk about
7	their concern about their businesses going down.
8	Well we really don't want your business to go down,
9	but you need to find another product to sell and the
10	bottom line is; how many of them are willing to
11	subsidize the medical cost for those who have cancer
12	from the product that they sell? All I ask is that
13	you support these bills and let's find a way to get
14	rid of this problem.
15	COUNCIL MEMBER GENTILE: Well thank you
16	for being here; thank you for your and
17	congratulations on your successful struggle too.
18	ANNETTE SPELLEN: Thank you.
19	COUNCIL MEMBER GENTILE: Absolutely.
20	Miss Sully.
21	DEIDRE SULLY: Good afternoon. Thank you
22	to Chairperson Johnson and other members of the
23	Health Committee, Council Member Gentile and Council
24	Member Cabrera for the invitation and the opportunity

to speak today. My name is Deidre Sully and I'm the

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Deputy Director of NYC Smoke-Free, a program of
Public Health Solutions. NYC Smoke-Free works to
protect the health of New Yorkers through tobacco-
control policy, advocacy and education. We partner
with community members, legislators and health
advocates to support local effort to end the
devastating tobacco epidemic throughout New York
City. I'm here today in regards to Intro 139-B and
regulation of non-tobacco smoking products in our
bars, restaurants and lounges in New York City.

It is our position that Intro 139-B would create an oversight and regulatory framework for hookah establishments to promote and ensure compliance of the New York City Smoke-Free Air Act, which keeps tobacco products away from kids and protects New Yorkers, particularly in this case the workers who are employed at hookah establishments, and it protects them from the harmful exposure of secondhand smoke.

A 2014 investigation conducted by New York University students found that over a dozen of the City's most popular hookah-serving establishments claiming to only use non-tobacco shisha were in fact in violation of the Smoke-Free Air Act when

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laboratory tests conducted on those shisha samples showed to contain nicotine and tobacco. Two very clear things were happening from this revelation:

1. these places were illegally serving tobacco to youth under the age of 21, and 2. exposing everyone in the establishment to secondhand smoke. Being exposed to the use of hookah renormalizes smoking in a general way and it may discourage those who are trying to guit using cigarettes.

For more than a decade, New York City has achieved great successes in tobacco control, including a decline in teen use of cigarettes. Any hopes of continuing that success may be in jeopardy because the use and services of a non-tobacco smoking product such as hookah have become a growing trend spreading among bars, restaurants and lounges across the five boroughs.

There is a common misconception that smoking hookah tobacco is safer and less addictive than cigarette smoking; in reality, it can be just as dangerous as smoking cigarettes; perhaps even more so due to longer periods of inhalation and exposure. Hookah smoke, whether tobacco-based or non-tobacco-based, contains many of the same harmful toxins as

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2	cigarette smoke and has been associated with lung
3	cancer and respiratory illnesses. We must protect
4	New Yorkers from the adverse health affects of
5	secondhand smoke exposure resulting from the
6	increased use of a trendy and under-regulated product
7	that creates misconceptions of safety. Simply put,
8	it is another product [bell] that only encourages
9	young people to start smoking other seemingly newer
10	forms of tobacco. Thank you.
11	CHAIRPERSON JOHNSON: Thank you very

much... [crosstalk]

COUNCIL MEMBER GENTILE: Right ... Right on, right on.

MICHAEL DAVOLI: Good afternoon. My name is Michael Davoli; I'm the Director of Government Relations for the American Cancer Society Cancer Action Network (ACS CAN). I apologize to the Chair and to the Committee; I never was good at musical chairs and I lost an earlier round today, so I'm kinda crashing on this panel.

So I'm pleased to speak to you all today to talk about the various pieces of legislation in front of us. My oral testimony's gonna focus primarily on Intro 1138, which ACS CAN strongly

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supports; that is the establishment of the retail cap on tobacco licenses. My written testimony goes into more depth on the various other issues.

While smoking rates are at a historic low, on average, nearly 5,400 New Yorkers will be diagnosed with tobacco-related cancer and more than 3,200 New Yorkers will die from tobacco-related cancer every single year. So while we can be concerned about the interest of small businesses, which is a vital concern, we have to fundamentally remember why we're here first and foremost, and that is to save lives.

Last week ACS CAN released a report -which I provided for you all today -- that looks at
in-depth the number of licensed tobacco retail
outlets in New York City, and while our numbers vary
a little bit from the Department of Health numbers,
they've got the more up-to-date data, so my data's a
few months older. But the bottom line is that New
York City is oversaturated with licensed tobacco
retail outlets. Our estimates are there are 8,992
license tobacco retail outlets in New York City.

To put those number in perspective, that's 3 times more than the top 10 corporate chain

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retail stores combined, which is 2,984; 3.5 times more than the number of pizzerias in New York City (there are only about 2,500 pizzerias); 3 times more than the number of schools in New York City (there are only about 2,700 schools), and my favorite number; 29 times more than the number of Starbucks in New York City. So as you can see, the retailers are everywhere in our city.

The scary part is that more than twothirds of those retailers are within 1,000 feet of a
school and more than 93% of those retailers are
within a 1,000 feet of another retailer. There is
simply too much tobacco in New York City.

By establishing a cap, we can begin to reduce that density and reduce the exposure that our young people are having on tobacco every single day and help people quit, 'cause the bottom line is; if you are trying to quit and everywhere you go tobacco is in your face and every child, when they walk into a corner store (which is where most children spend their money) [bell] they are exposed to tobacco; we are simply not going to be able to dive down smoking rates even further. Thank you very much.

CHAIRPERSON JOHNSON: Thank you.

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very own home.

2 LISA SPITZNER: Good afternoon. 3 you to Council Member Johnson and the members of the Health Committee for the invitation and the 4 5 opportunity to speak today. My name is Lisa Spitzner; I'm the Manhattan Community Engagement 6 7 Coordinator at NYC Smoke-Free, where we strongly 8 believe that every New Yorker and visitor, for that matter, deserves the right to breathe clean, smokefree air not only where they're working and playing, 10 11 but most importantly, where they're living in their

Since 2009, NYC Smoke-Free has helped over 12,000 apartments to go smoke-free, which has impacted over 32,000 residents. I should note that more than 6,500 of those have converted just in the last two years.

The three bills today related to smokefree housing -- Intros 1585, 484 and 977 -- will make
it much easier for New Yorkers to identify housing
with smoke-free protections, breathe air free from
harmful tobacco pollution and find opportunities for
smoke-free affordable housing.

In regards to 1585, the disclosure of smoking policy, it really should not be a mystery

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whether smoking is permitted or prohibited in an apartment building. New Yorkers should have the right to know their buildings' policy when they're about to sign on that dotted line, purchase a new house or renew a new lease. At NYC Smoke-Free, we often hear from many New York City residents who are surprised to learn that their building is lacking these smoke-free protections and often this occurs when it's too late and they're already being exposed to secondhand smoke. Families should not have to find their way out of subjected secondhand smoke and struggle to come up with the expenses to move to a smoke-free building. We think that this commonsense policy can really go a far way in providing crucial information that can afford New York City residents more informed decisions to find a healthy environment for them and their families to live in.

In retards to 484, extending common area smoke-free protections for all apartment buildings, we know that in New York City the Smoke-Free Air Act of 2002 prohibits smoking in lobbies, stairways, hallways, elevators, and laundry rooms, and other common areas in residential buildings with 10 or more units. Whether a building has 10 units or 400 units,

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2 secondhand smoke exposure is secor	dhand smoke
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3 exposure and these protections should be awarded to

4 | those who live in buildings with 10 units or less.

5 Again, at NYC Smoke-Free, we often hear from a lot of

6 New York City residents who live in apartment

7 buildings with 10 units or less who are being exposed

8 and inundated to secondhand smoke, not only from just

9 their common areas, but then that smoke is seeping

10 | into their own living environment.

Lastly, the 977, extending smoke-free affordable housing. We know that luxury condos and co-ops and rentals are increasingly going smoke-free, but this positive trend has yet to be and slow to reach for most New Yorkers, especially families who depend the most on it in affordable housing.

While New Yorkers with options are choosing smoke-free housing, the great majority of New Yorkers who are rent-burdened or struggle [bell] in the City's competitive housing market have few options but to stay where they are and endure dangerous secondhand smoke.

CHAIRPERSON JOHNSON: Thank you all very much. Council Member Cabrera I believe had some questions.

2	COUNCIL MEMBER CABRERA: Thank you so
3	much. To the gentleman on the right I'm very bad
4	with names, so thank you for sharing what you said
5	about the illusion that people quit because, you know
6	your friend tells you to quit; if it was that easy,
7	we would've solved this problem a long time ago. The
8	fact is; people quit when the cost becomes higher
9	than its reward, and that goes with any addiction.
10	Let's be real; we're dealing with a drug, this is a
11	drug. Nobody has said it that plainly, but really,
12	this is what we're dealing with here; it's a drug and
13	it's a powerful drug and it's very, very addictive,
14	so thank you for sharing that.

The question I was gonna ask -- you mentioned as an officer your experience was that a lot of times young people were getting cigarettes from social sources, but they were stealing them; is there any data on that; is there research on that that you know of?

ANNETTE SPELLEN: Not to my knowledge; I... [crosstalk]

COUNCIL MEMBER CABRERA: Or does anybody happen to know if there's...

COMMITTEE ON HEALTH

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2	ANNETTE SPELLEN: Not to my knowledge;
3	what I know [crosstalk]
4	COUNCIL MEMBER CABRERA: Okay.
5	ANNETTE SPELLEN: is from when I was a
6	kid; I stole my cigarettes, and I listen to the
7	children I mentor and I listen to some of the
8	children talking; they talk about how they steal
9	cigarettes from their parents and older sisters and
10	brothers.
11	COUNCIL MEMBER CABRERA: Let me and a
12	totally different topic here as you know, I have a
13	bill, 1140, that would prohibit people from smoking
14	while having children in the car; as a former NYPD
15	I'm sure you heard Council Member Barron's concern
16	that that will be a pretext to stop minority members
17	of our community; would that be a concern of yours?
18	ANNETTE SPELLEN: To stop [inaudible]
19	[crosstalk]
20	COUNCIL MEMBER CABRERA: To stop that
21	they will use it as a pretext as an excuse to stop a
22	minority member because they saw them smoking in the
23	car and as an excuse to go ahead and let's check your
24	car; let's see if you have any drugs?

ANNETTE SPELLEN: I don't believe that.

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2	COUNCIL MEMBER CABRERA: Okay. Any
3	particular reason why you don't believe that or?
4	ANNETTE SPELLEN: I'd have to have more
5	information on that, I mean [crosstalk]
6	COUNCIL MEMBER CABRERA: Okay.
7	ANNETTE SPELLEN: secondhand smoke in
8	your car why would the police take your car,
9	unless it was a law, and I don't see a law like that
10	being passed. You need to work on finding ways to
11	stop people from smoking, especially when they have
12	children in the car, 'cause secondhand smoke is just
13	as bad as a regular cigarette or a hookah pipe, so I
14	don't I'd have to have more information you know, to
15	say for the minority community, why would you make it
16	just for the minority community; what about the
17	entire community?
18	COUNCIL MEMBER CABRERA: Right. Okay,
19	thank you so much, Mr. Chair.
20	CHAIRPERSON JOHNSON: Thank you all very
21	much. We're gonna go to the next panel, thank you.
22	Okay, so the next panel is gonna be [clearing
23	throat] excuse me Ramon Murphy, Nelson Eusebio,

Jay Peltz, and Sam Schlamone [sic].

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Okay. And then after that panel, the one after that is Josephine Beckman, Phil Konigsberg,
Stan Harmon, Regina Lee, Smitha Varghese, Ilana
Knopf. Okay. So they're on deck.

Anyone else for this panel? We called four folks. Ramon Murphy?

RAMON MURPHY: Yes.

CHAIRPERSON JOHNSON: Nelson?

NELSON EUSEBIO: Yeah.

CHAIRPERSON JOHNSON: Jay? Yes. And Sam? [background comment] Did you sign up to testify? What's your name, sir? Issam. So you're probably on another panel, but if you wanna come up for this panel you can. Okay, go ahead. Go ahead, sir.

Member. We represent 13,000 bodegas. We're here because we understand that bill, they've got good intention and we have good intentions too to working with the City, with the Council Member to reduce smoking, but we believe that's not the way we can do that, because illegal activity in the city, illegal market is strong. Ten years ago we don't have that illegal activity. Mayor Bloomberg come and raise

2	100% tax on cigarettes and that's opened to the road
3	to the illegal cigarettes coming in the street.
4	Today we see you bring a pack of cigarettes \$13.00
5	and that shows to us right now we're gonna have a
6	bigger highway to the black market. We need to work
7	with the City, we need to work with the Council
8	Members to just educate our community and working
9	with the small business how we can just bring less
10	the smoking. Taking my license because I made a
11	mistake or because you send someone look like 21
12	years old and is not; you know what's gonna happen?
13	[inaudible] Joe gonna come [inaudible] way to sell
14	cigarettes for \$6.00 and the other guy gonna come and
15	sell cigarettes; then, when somebody comes to my
16	store, they don't even ask me for the cigarette; you
17	know why? Because I'm gonna sell the cigarettes for
18	\$13.00. Don't make no sense when somebody in the
19	street just sell cigarettes for \$6.00. My concern is
20	that teenagers in a bodega, when you go in to buy
21	cigarettes, at least I ask you for ID. If I see
22	you're a minor, I don't sell the cigarettes. But
23	when you go to the corner to the guy selling illegal
24	cigarettes, they don't ask for nothing. It's easy to
25	get a loosie, it's easy to get a cigarette.

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What can I say; I'm not gonna be against it if you wanna raise \$13.00 a pack, but the way I see it, the only thing that's gonna happen is you're gonna have 80% in the illegal market in the street.

Right now we have 60% that activity.

I used to sell 25 cartons a week. When Bloomberg came with that law, they reduced 10. Who's selling the rest? Illegal market. Right now, with that bill, [inaudible] sell cigarettes [inaudible] straight to the black market. Thank you.

CHAIRPERSON JOHNSON: Thank you, Mr. Murphy.

JAY PELTZ: Thank you for the opportunity to [bell] testify on behalf of the Food Industry Alliance of New York regarding Intros 1547 and 1532. FIA is a nonprofit trade association that promotes the interests statewide of New York's grocery, drug and convenience stores.

other things, would cap and ultimately cut the number of retail dealer licenses in the city. The bill will adversely impact store values. If a prospective store buyer believes that it won't be able to sell cigarettes and tobacco products at a location, such

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as a convenience store or a bodega, that is heavily
dependent on sales of these products, as well as the
non-tobacco items that are part of the same
transaction, then either the business will be sold at
a significantly reduced price or there will be no
buyer at all. Either way, small business owners who
have endured long hours and severe competition could
have their equity in the business, and therefore
their savings (including their retirement savings),
wiped out and default on personally guaranteed debt,
which would result in the forfeiture of personal
assets to lenders and suppliers. If convenience
stores or bodegas shut due to a lack of buyers, job
losses will result.

These outcomes will occur even though users of cigarettes and tobacco products are fully informed purchasers of legal products. These products are heavily regulated and taxed, including a prohibition on sales to minors, a price floor for cigarettes and a ban on promotions and coupons.

In addition, New York already has a significant and growing illegal trade in tobacco products. According to a January 217 study by the Tax Foundation, 55.4% of cigarettes consumed in New

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York are from smuggled sources. In 2015, the Obama

Administration released a report titled "The Global

Illicit Trade in Tobacco: A Threat to National

Security." The report stated that cigarette

smuggling provides funding for everything from

terrorism and human trafficking to weapons.

Accordingly, eliminating thousands of responsible, heavily regulate, taxpaying locations that ID minors will have the unintended consequence of increase illicit sales as well as an increase in legal purchases by City residents outside the City, including cross-border brick and mortar stores, the internet and Indian reservations.

In addition, FIA opposes Intro 1532, which would make it unlawful for any establishment to engage in business as an e-cigarette retail dealer without first having obtained a separate license for each place of business where e-cigarettes are sold at retail in the city.

A local law was adopted in Suffolk last year that requires sellers of e-cigarettes to register with the county. However, businesses registered to sell tobacco products under a state license are exempt from the separate registration

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[crosstalk]

requirement. The separate requirement was deemed unnecessary since sellers of e-cigarettes who are also licensed sellers of tobacco products can easily be identified through that database. This will allow the county to enforce laws regarding the sale of e-cigarettes at those establishments.

This rationale is even stronger in the city, which has its own license requirement, separate from the state, to sell cigarettes and tobacco products. There is no need to impose another license requirement and another fee on businesses that are already licensed and paying a fee to sell cigarettes and tobacco products. These establishments are already regulated and inspected by the City.

Accordingly, the existing retail dealer license provisions in the Admin Code can simply be amended to authorize retail dealers to sell e-cigarettes as well as traditional cigarettes and tobacco products.

In addition, the provisions of the legislation [bell] barring pharmacies from obtaining a license to sell e-cigarettes and severely restricting the number of these cigarette licenses to be issued are counterproductive. The restrictions...

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2 CHAIRPERSON JOHNSON: Thank you. Thank
3 you, sir. We got it; I have your comments; I
4 appreciate it; we're keeping everyone at three
5 minutes; there are another 40 people that are here to
6 testify, so we have to move along. But thank you; I
7 appreciate your testimony.

JAY PELTZ: Thank you.

CHAIRPERSON JOHNSON: Thank you. Go ahead, sir.

NELSON EUSEBIO: Good morning, Chair.

Good afternoon, Chair, actually and members of New
York City Council Committee on Health. My name is
Nelson Eusebio; I am the Director of Government
Relations for the National Supermarket Association
(NSA). The NSA is a trade association that
represents the interest of independent supermarket
owners in New York and other urban areas throughout
the east coast, Mid-Atlantic region and Florida. In
the five boroughs alone, we represent 400 stores and
employ over 15,000 people.

I'm here today to testify in opposition to Intro 1547, a local law to amend the Administrative Code of the City of New York in relation to expanding the retail dealer license to

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include retailers of tobacco products and setting caps on a retail dealer license. We would like to focus mainly on the latter part of this bill, setting caps on a retail dealer license.

In a position of a cap; in this case, a moratorium, a new license will impede the growth of the supermarket industry. It would not only negatively impact sales in stores that cannot secure a license; it would also halt growth in the industry and create an unlevel playing field. Small businesses like ours who employ and serve mainly high-need, low-income communities devoid of healthy food options are struggling and laws that put a stop to any license that yield any income and sales will negatively impact the growth of an already struggling industry.

It is true that not all members carry tobacco products; for those who do, it is important that part of our business [inaudible] customers
[inaudible] account for about 25% of store
transactions. While we're glad to see the bill
allows a transfer of license during the sale for
stores in good standing and with previous a license
in a place for at least five to three years, we feel

that this does not go far enough in securing th	.e
value of our investment. If a current retailer	•
cannot assure a prospective store buyer that th	еу
will continue to be able to sell tobacco produc	ts,
then the business value of their store is sever	ely
diminished. There are many factors that could	lead a
store to sell in less than three or five years	of
operation. Running a small business in New Yor	k City
can be very unpredictable; no one should be pun	ished
for having made an investment recently or	
reorganizing at a good time to sell that happen	ıs to
be before the three- or five-year period. We f	eel
that three- or five-year provision should be re	moved
completely, leaving no timeframe for the store	in
good standing to be able to transfer their lice	ense.
Thank you.	

CHAIRPERSON JOHNSON: Thank you very much.

ISSAM HASSAN: Good afternoon, Chair,

Council Member Gentile; thank you guys for your

support of the bodega strike; I was there and I heard

some very encouraging words, and I'm shocked at what

I'm hearing today.

2 Contrary to the Council Members' claims, 3 I am not a drug dealer; never have I engaged or my 4 family in illicit trade or illegal activity; we 5 taxpaying citizens. My family has been here since 1960, where my grandfather came here and worked as a 6 farmer in California and he made that trek to New 8 York and opened up his first store, and that store helped me go to college and for two years, while I was at NYU, I had to drop out in order to help my 10 11 grandfather and my family run that business. So we 12 are working on razor-thin margins; unfortunately, we 13 are not the pharmaceutical industry or the pharmacy. 14 CVS made over \$180 billion last year, so you're 15 commending them, but we did not make \$180 billion 16 last year -- Rite Aid made \$31 billion; Walgreens made \$118 billion. So what I'm asking everybody here 17 18 is to think about the small businesses; we are the 19 people that are working on penny margins. 20 single store out here is selling New York Post; 21 they're making 2 cents just to survive; cigarettes, 2.2 the same thing. So what we do is, we are actually 2.3 the largest unpaid civil service -- we actually collect taxes on your behalf and we pay the taxes in 24 full for cigarettes and for all other purposes as 25

well. So what I'm afraid is gonna happen is you're
gonna drive I don't wanna use the word "black
market"; I'll use the word "underground market"
you're driving people to the underground market. I
spoke to the Sheriff outside and the Sheriff and the
DCA Director said, both, that they do not go into
stores that do not have Consumer Affair license, so
you're basically not going into the stores, the
Chinese restaurants, the delis; the bodegas that
don't have Consumer Affair license and you're not
going in there and they're the ones that are selling
the cigarettes. Forget about the guy on the street,
there are stores right now without the Consumer
Affair license, that never had a Consumer Affair
license, that are selling illegal cigarettes, but
you're basically gonna punish the stores that have
signed up, paid the fine and did all the required
transaction in order to have a legal Consumer Affair
license and you're basically gonna restrict their
access to business.

Basically I'm very grateful for everything that this country has brought to my family; my grandfather had an opportunity; probably down the line I might wanna open up my own store, you

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know I have a daughter right now and I'm getting a
bigger family; we can't all survive on one store, we
wanna fill up the retail spaces and we wanna help the
New York City economy, so help us help the City.

6 Thank you.

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CHAIRPERSON JOHNSON: Council Member Cabrera.

COUNCIL MEMBER CABRERA: Look, I appreciate your concern. You mentioned your grandfather; I lost both of my grandfathers because of cigarettes, both of them; not just one...

[crosstalk]

ISSAM HASSAN: Not because of us.

COUNCIL MEMBER CABRERA: Let me finish...

[crosstalk]

ISSAM HASSAN: We're not big tobacco.

COUNCIL MEMBER CABRERA: Let me finish.

Let me finish; it's my turn. Is it a drug? Yes it is; it's a regulated drug. I will hope that as a business owner you would understand what you're selling; it would be an even greater concern for me if I'm here and you don't understand that you're selling a regulated drug; that's our business here.

Our business here is to make sure that the public

2	health goes ahead of everything else. Our first
3	concern is safety and the public health of our
4	people. My god, this is the Committee on Health;
5	this is our primary objective as elected officials.
6	So I get your concerns, but at least in my district,
7	I'm not gonna allow businesses or anybody to come in
8	and you talk about minority businesses, minority
9	communities everybody's talking about the health
10	disparities; we see, you know, all of you know,
11	the numbers are staggering and number one on top of
12	that is cigarettes, so we have to do something. And
13	I understand the enforcement piece and we will make
14	sure, we will work very hard with the Administration
15	and we will be the first ones to say that we have to
16	deal with the underground, it is a legitimate I
17	hear you and I heard Mr. Murphy and Nelson and the
18	gentleman representing all the other businesses
19	it's a legitimate issue and we have to address that,
20	but one does not negate the other and that's the big
21	issue. The research we're going by research
22	unless you come here and give us research
23	substantiating that there is a better way, we have to
24	follow empirical research because otherwise we're
25	moving blindly or we're moving by profits. I look at

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sometimes when it's being sold in my neighborhood,
I can't find healthy stuff. Bring us healthy stuff,
I mean people in our neighborhoods are saying please,
bring healthy stuff; you'll make a lot of money, just
bring us the healthy stuff, things that we really,
really want that we see in other neighborhoods that
they get and they're prospering, the city's
prospering for a reason. And so with that

ISSAM HASSAN: May I respond please?

COUNCIL MEMBER CABRERA: Sure. Sure.

Please. Please.

ISSAM HASSAN: I think the elephant in the room right now is that you're making... everybody that's spoken so far has made the assumption that the proliferation of legal tobacco retail outlets is in correlation with the increased use; that's what everybody's been saying, and the idea is to cut that in half. What I would argue and what I have seen -- and I'm pretty young, so I'm kinda hip with it, right -- people... this is 2017; not one person has talked about the internet. Any time somebody comes into a store; me or somebody will check an ID and they have to have some method of payment. Most kids that buy stuff online, they go to the Rite Aid -- those same

pharmacies and they buy a pre-paid credit card or
a debit card; whatever, and they buy everything
online and I spoke to the DCA; I spoke to the
Sheriff, right outside, and they said they are doing
absolutely nothing with regards to that. So if we
wanna really talk about stemming the flow of
cigarette and basically getting it out of the hands
of the young, I'm all for that, but let us help you,
work with us; we're the retailers; we can act as the
gatekeepers. Somebody said before that 93%, or
something like that, passed undercover operations;
that's an amazing number; you can't get that kind of
rate with anything else in government. So we're here
to work with you guys; tell us what we can do; tell
us look, if you wanna raise the minimum age, so be
it; whatever the case might be, but we're gonna
follow whatever you guys suggest, but don't hurt us.
Walk through New York City, walk through Manhattan,
walk through Brooklyn; walk through Bay Ridge,
Counselor, and you're gonna see, stores are empty,
they're going out of business, stores for rent,
stores that have been closed for two years in my own
neighborhood; we wanna do something about that, we
wanna, you know, help the economy and the way we help

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2	the economy is by	helping the	e small businesses.	And
3	that's all I have	to 8217 80	thank wou	

 $\label{eq:council_member_cabrera:} \mbox{ We are older,}$ but we're hip too...

ISSAM HASSAN: Yeah.

COUNCIL MEMBER CABRERA: and... [laugh] So let me just say that you started really with the wrong assumption; you started with the assumption that the numbers are going higher; what we're finding is that the use is going lower because of the policies that we have put forth and we know tools... [crosstalk]

ISSAM HASSAN: According to surveys.

COUNCIL MEMBER CABRERA: the tools in the box that we have been using have been effective and we're using the tools again. And with that, I give it back to...

CHAIRPERSON JOHNSON: Well I just wanna agree with everything Council Member Cabrera said and I hear the concern, I understand the tension here today between small businesses and retailers who currently make money and profit off of legal products which are... [crosstalk]

ISSAM HASSAN: Survive. [laugh]

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2 CHAIRPERSON JOHNSON: that's fine...

3 [crosstalk]

ISSAM HASSAN: Yeah.

CHAIRPERSON JOHNSON: survive off of legal products; that doesn't mean that a legislative body which is looking out for the public health of New Yorkers isn't gonna take action on further regulating the product, the way the product is sold, the way the product is displayed; the access to the product, we do that all the time, we do that on every type of thing, and that goes to the heart of the There was an article this morning (which I matter. referenced earlier) and it's a 2016 study that was published that supports Dr. Bassett's conclusion, noting that "increasing the minimum price of a pack is more effective than a tax because the policy targets people who are less likely to purchase more expensive premium brands. Nothing has proven more effective at reducing the smoking rate than increasing the price of the pack. This holds true across all races and ethnicities according to a study published in Social Science and Medicine and it does not seem to outweigh the growth in unregulated sales." So the science and the study shows the way

2	to decrease tobacco consumption, the way to decrease
3	people from starting smoking in the first place; the
4	way to increase the number that are gonna quit is
5	increasing the price. That is one bill in this
6	suite; I believe in this entire bill. I hear your
7	concerns; I think there are much bigger things the
8	City could be doing to support small businesses,
9	whether it be through property tax reductions that
10	get passed down, 'cause right now those fall on small
11	businesses there's a whole host of measures not
12	coming in and nickel and diming and fining small
13	businesses for things that don't make any sense and
14	actually letting people take corrective measures and
15	actions so there's a host of things. To me, the
16	host of things to keep these small businesses
17	thriving is not not taking action on tobacco-related
18	issues, there are other I think broader, more
19	important things that we can do; this is about
20	protecting the public health of New Yorkers. I
21	understand the tension my district The Village,
22	Chelsea, Hell's Kitchen you walk up 8th Avenue,
23	9th Avenue, 10th Avenue, Hudson Street, Bleecker
24	Street; empty small business after small business,
25	shuttered storefronts that are being unrented; most

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of them mom and pop stores that went out of business; they didn't go out of business because we were passing further regulations. When you talk to them, they went out of business because rents were too damn high and that is what was happening. So the City needs to take action on these types of things. appreciate the panel being here today and I look forward to hearing your feedback as this package of bills moves forward. Thank you very much.

> ISSAM HASSAN: Thank you.

CHAIRPERSON JOHNSON: Okay. So we're gonna go to the next panel -- Josephine Beckman, Phil Konigsberg, Stan Harmon, Regina Lee, Smitha Varghese, and Ilana Knopf.

After that panel is going to be the group of students from Pace University -- Chelsea, Rowan, Margaret, Erin [sp?]... and Chelsea's on here twice. Okay, so you all are next. [background comments] Ιf folks could go outside if they wanna talk; we're gonna keep goin'; there a lot of folks here to testify. Go ahead.

JOSEPHINE BECKMAN: Thank you, Chair Corey. My name is Josephine Beckman and I am the District Manager of Community Board 10 in Brooklyn,

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which encompasses the communities of Bay Ridge, Dyker

Heights and Fort Hamilton and I am here today to

support Intro 139-B, which would regulate the hookah

5 industry by adding hookah to the Smoke-Free Air Act.

I wanna first start by actually commending our local City Council Member Vincent Gentile for his tenacity and his determination to see this piece of legislation to where it is today and his work on this effort. So thank you, Councilman.

Community District 10 is home to many hookah establishments that really market to young people. Many on Community Board 10 feel that this new hookah fad over the years really turned back strikes made in our anti-smoking initiative; this is primarily because young people are not aware of the health risks associated with hookah; the data was not available years ago when [inaudible] first came to our district and we heard from parents and people who live in the community about different aspects of why hookah smoking they felt at that time was bad, but we didn't have the data. The data was not available and health evidence now shows that it is not the case; that what young people were saying hookah was fine and legal because it's a fruity, water-filled smoke

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item, that it didn't have adverse health effects; we

3 know that is different. So we congratulate the

4 Council for this piece of legislation which will go a

5 | long way to save lives.

Additionally, our Board heard from residents in adjacent buildings who were affected by the secondhand smoke produced by hookah lounges. Our pre-war buildings just create the funnel for secondhand smoke and the Community Board received calls and petitions from residents living in these buildings affected by the secondhand smoke and were happy to see the ventilation component added to this piece of legislation.

I urge members today to support this important piece of legislation, all of its aspects; we are happy where the legislation has come to. We stand with the message to the public that hookah smoke is not safe smoke. So thank you very much.

CHAIRPERSON JOHNSON: Thank you for being very patient and for being here; I know that as a district manager you are extraordinarily busy and so you taking time to come in from South Brooklyn, stay here all morning and testify in support of it is

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2 really meaningful to us and I really appreciate you
3 being here today.

JOSEPHINE BECKMAN: And thank you for your work. Thank you.

CHAIRPERSON JOHNSON: Thank you. [background comment] If you could speak into the microphone.

through? Thank you. Yeah. Thank you for the opportunity, for the invitation to be here today.

I'm gonna comment on the sale regulations in my oral testimony and my name is Ilana Knopf and I am the Director of the Public Health and Tobacco Policy

Center; we are at Northeastern University School of Law; we do receive funding from the New York

Department of Health Tobacco Control Program to provide education and legal technical assistance to develop and implement evidence-based policies that reduce tobacco-related morbidity and deaths.

So I was happy to hear in the last session several referrals to the tobacco-control policy toolkit, since one of the points I wanted to reiterate was that in tobacco control, by necessity we really do know what works and that the proposals

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before you today are overwhelmingly evidence-based and narrow and well-crafted to address the factors that we know influence tobacco consumption, because we do know what we can do to prevent tobacco initiation; we know the factors that drive continued use; and we know the environment that promotes cessation attempts, and likewise, the factors that interfere with those attempts, and again, these are narrowly tailored and appropriate proposals that you have before you; those really address the retail density, and the price, we've heard a lot about that today, so I'll leave you to the written comments and others, but those sales regulations address those.

I also wanted to address concerns we've heard today over the proposed regulations driving the illicit tobacco market and while there is indeed an underground tobacco market in New York City, there are separate efforts ongoing to aggressively combat that illicit trade and we can work in conjunction with impactful public health policies and reduce consumer demand for tobacco products while also curbing that illicit trade. So there shouldn't be, you know, one for the other and shouldn't shy away from having fear of unintended consequences; so long

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as there is a mechanism in place and it is being
aggressively addressed, there's really not
justification to not move forward on evidence-based,
well-drafted policies. So thank you for your time.

CHAIRPERSON JOHNSON: Thank you very much.

REGINA LEE: Good afternoon Mr. Chairman and members of the Committee. My name is Regina Lee and I am the Chief Development Officer at the Charles B. Wang Community Health Center. We are a federally-qualified health center that provides primary care and support services and we've been serving the Asian American community and other disadvantaged communities for more than 45 years. I'm speaking today on behalf of the Health Center as well as the Asian American Tobacco Free Community Partnership.

Our Partnership was formed several years ago to reduce the burden of tobacco use and exposure to secondhand smoke in New York City's Asian American community. In addition to the Charles B. Wang Community Health Center, the Partnership includes Asian Americans for Equality, Korean Community Services, the Chinese American Medical Society (which includes over 900 physician members), as well as the

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Department of Population Health and NYU Langone
Medical Center.

Our Partnership strongly supports state and laws to make tobacco products less affordable and less accessible. These laws have been proven effective in reducing smoking, preventing young people from starting to smoke and encouraging smokers to quit. However, there is disparity in terms of which communities benefit from these laws.

The disparate impact is seen in the high rates of smoking in the Asian American community. In 2015, the smoking rate among Asian American men was 25.4%, compared to 14.3% for New York City as a whole. Asian American men are the only group in New York City that saw an increase in smoking rate -- from 19.6% in 2002 to 25.4% in 2015.

There are many complex reasons for the high smoking rates among Asian American men -Council Member Koo mentioned a little bit earlier about the availability, the wide availability of both taxed as well as untaxed cigarettes in the Asian American community.

In a recent unpublished survey that the Partnership conducted with 250 Chinese American

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cigarettes.

residents in Manhattan's Chinatown and in Brooklyn's
Sunset Park, we found that the average price paid for
a pack of cigarettes in the community was \$7.62.
About 46% of smokers in the survey pay in fact
between \$1.00 and \$5.00 for a pack of cigarettes.
Clearly, a lot more needs to be done to stem the
proliferation of both tax as well as untaxed

Another reason for the high smoking prevalence among Asian American men is the lack of access to language-appropriate smoking cessation services. Early this morning Commissioner Bassett mentioned the New York State Quitline as a valuable resource to help people stop smoking; however, the Quitline is available only in Spanish and English. So when monolingual Asian Americans call the Quitline, [bell] they complain of being put on hold for 20 minutes and longer to connect to a translator and frequently they do not receive returned phone calls when they leave their name and contact information... [interpose]

CHAIRPERSON JOHNSON: Thank... thank you.

REGINA LEE: the Quitline is also not

widely publicized in the Asian American community.

CHAIRPERSON JOHNSON: So this is actually

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-- I mean all the testimony is very helpful, but this very specific thing about the language access issue is extraordinarily helpful as well as the rates among Asian American men not decreasing and the City needing to focus tobacco cessation efforts in that community in particular and you referencing both what Commissioner Bassett and Council Member Koo said this morning is helpful. So we're gonna take your testimony; I'm sure we'll follow up with you to get some more data, but I need to keep moving on because we have another 35 people to testify today. Phil.

REGINA LEE: Thank you very much.

PHIL KONIGSBERG: Thank you very much for allowing us to speak. My name is Phil Konigsberg, a tobacco control and smoke-free advocate for 29 years. I support and urge this Committee to approve all 10 intros on the table, but I want to specifically speak on those not particularly mentioned in Mayor de Blasio's press conference.

Working with fellow advocates and assisting New York City Smoke-Free, the Queens

Tobacco Control Coalition was successful in having 13 or 14 Queens community boards pass a Smoke-Free

2	Multiple Housing Resolution and in conjunction with
3	12 of the 14 pass a Smoking Policy Disclosure
4	Resolution which would be reflected by a passage of
5	Intros 977 and 5940. A smoke-free multiple housing
6	policy should apply for all types of apartments, both
7	market rate and subsidized. Although Intro 977 would
8	not affect market rate multiple housing as it is
9	written, if this Committee agrees with me that no
10	matter where we reside, we should be able to live in
11	our home without having to be exposed to secondhand
12	smoke then this Committee should expand the scope of
13	Intro 977 to include all types of multiple housing
14	buildings. HUD's national mandate that all public
15	housing be smoke-free by 2018 means that all NYCHA
16	apartments will be smoke-free, which is a tremendous
17	win for public health. The New York City Smoke-Free
18	Air Act protects all New Yorkers with clean indoor
19	air protection where we work, eat, drink, and shop,
20	so why don't we have the same health protections
21	where we all live? New Yorkers want to live in a
22	smoke-free home but currently many are forced to
23	breathe in someone else's tobacco smoke. Intro 5940
24	will be an added incentive for landlords to
25	voluntarily adopt a smoke-free policy for their

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2 building but should have wording to the effect that

3 the disclosure policy document does not waive any

4 form of protection the resident has should they

5 encounter any exposure from secondhand smoke after

6 they move in.

New York City is an international city, by passing Intro 1140, New York City would join other international venues that already protect young and vulnerable lungs from tobacco smoke while in a vehicle. The United Kingdom, France, several Canadian provinces, and Australia's various territories would join stateside venues where smoking is prohibited when a child is a passenger in Arkansas, California, Louisiana, Maine, Utah, and the Commonwealth of Puerto Rico.

CHAIRPERSON JOHNSON: Thank you, Phil. We will take your testimony; I appreciate you being here. Go ahead.

SMITHA VARGHESE: Good afternoon. My name is Smith Varghese; I'm a policy associate with New York Public Interest Research Group (NYPIRG) and a student at Queens College. Here with me today is Megan Ahearn, NYPIRG's Program Director.

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Virtually all New Yorkers have had an experience with cancer. According to the U.S. CDC, cancer is the second leading cause of death in America. Nearly one-quarter of all cancer deaths result from lung cancer, it's a cancer that's deadly and that afflicts men and women alike, and it is a cancer for which we know how to dramatically reduce its impact by reducing the use of tobacco products.

We appreciate the opportunity to testify on a number of bills proposed today. Thank you to the Council Members who sponsor the package.

Regarding Bill No. 1547: From 2013-2014, more than 2,600 tobacco retailers were penalized for violating the Tobacco Product Regulation Act. capping the number of tobacco retail licenses at 50% of the current number, this legislation will improvement enforcement of existing laws by narrowing the number of retailers that need to be monitored.

What's more, reducing tobacco retail licenses stands to reduce tobacco product marketing. For the past three years, NYPIRG has worked with students to administer a community mapping survey of tobacco advertisements.

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In the last two reports -- in 2015 and 2016 -- surveyors were ask to identify tobacco product displays -- visible displays of items for sale, such as cigarettes, cigars, chewing tobacco, e-cigarettes, and more. Surveyors observed 170 total tobacco product displays, representing about one-third of all marketing observed for those reports.

Tiffany Brown, a former Queens College

NYPIRG Project Coordinator and survey participant,

stated, "While surveying, I was really surprised at

the amount of non-traditional tobacco products I saw.

Many of the walls were covered with e-cigarette

brands and flavors, as well as multiple brands of

rolling tobacco and loose paper."

Licensing requirements act as a powerful tool to ensure compliance with tobacco control policies and protect the public health in the process. NYPIRG supports this bill.

Regarding Bill 1544: Increasing tobacco prices serves as one of the most effective ways to reduce smoking, especially among kids -- big tobacco knows this.

Pertaining to the notion of increasing tobacco prices, I could easily quote the Surgeon

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General or professors working in a tobacco control
program at Harvard University, but instead I'd like

4 to go to the source and quote big tobacco themselves.

Back in 1993, Philip Morris went on record saying -- by the way, they're one of the biggest tobacco manufacturers in the world -- Philip Morris went on record saying, "A high cigarette price... has the most dramatic impact on the share of the quitting population... price, not tar level, is the main driving force for quitting." NYPIRG supports this bill.

Bill No. 1532... okay, I'm out of time. [bell] Thank you for your time.

CHAIRPERSON JOHNSON: Thank you for that Philip Morris quote; very helpful.

SMITHA VARGHESE: Thank you.

CHAIRPERSON JOHNSON: Go ahead.

[background comment] And if you could speak into the microphone, that would be helpful.

STAN HARMON: Thank you for this opportunity to present some views.

My name is Stan Harmon; I'm an unpaid member of the board of an organization known as Action on Smoking and Health, commonly known as ASH;

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it's a nonprofit organization focused on ending death and disease caused by cigarettes and other tobacco products.

Tobacco (as we all know) as well as nontobacco shisha is certainly dangerous and we can't
ignore it. Focusing on all of the bills -- they're
all very worthwhile. In case I messed up the name of
the organization, of course it's Action on Smoking
and Health; for some reason I mumbled it.

As far as increasing the price of cigarettes, it's been shown that a 10% increase in packs will reduce consumption by adults by about 4%; by kids by 75.

Pharmacies have no place in the sale of tobacco. They should not sell a product that kills half the people that use it, I mean that's as clear as day. They're in the business of promoting health not causing terminal illness.

Action against secondhand smoke in homes and apartments is certainly most valuable. 42,000 people a year in the United States die from secondhand smoke -- more than guns, more than car accidents, people don't realize that, aside from the almost half a million people that die directly from

it.

smoking. So any reduction in secondhand smoke is particularly important. New York City should lead this. As far as pharmacies, it's already illegal in San Francisco and Boston; why not New York?

Money can always be replaced but one's health cannot, particularly illnesses which are terminal. So I mean money comes and goes, but when life goes, it's no more, so we have to look at it that way. Cigarettes cost society about \$20 a pack, so acting on this is really very important. I've wanted to do this since I was 6 years old [bell] and I'm doing it.

CHAIRPERSON JOHNSON: You did great.

STAN HARMON: Thank you. My heart is in

CHAIRPERSON JOHNSON: Healthy heart.

Council Member Gentile; followed by Council Member

Cabrera.

COUNCIL MEMBER GENTILE: Yes, I wanna thank ASH and the local Council Board for understanding the significance of the hookah legislation that we're considering today. I also wanna particularly thank Phil and your group because you worked so hard in Queens and the Community Boards

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2	to educate about tobacco, but now you've extended
3	that reach to support 139-B and I appreciate that.
4	PHIL KONIGSBERG: Yes and last year, a
5	year ago February, we were there at the initial
6	public hearing for this and we were very clear that
7	this was very important to get through. I noticed
8	some changes that were made, but it really
9	establishes a framework for existing hookah lounges
10	that are there now and it prohibits the establishmen
11	of any new ones, and we know why that needs to be
12	done.
13	COUNCIL MEMBER GENTILE: 'Kay. And I
14	must say; those changes came from the testimony that
15	some of you gave last year, including you, Phil.
16	PHIL KONIGSBERG: Joanne and I; I think
17	we were on the same panel last year [crosstalk]
18	COUNCIL MEMBER GENTILE: Right. Okay.
19	Thank you.
20	CHAIRPERSON JOHNSON: Council Member
21	Cabrera.
22	COUNCIL MEMBER CABRERA: Matter of fact
23	Phil, I wanna thank you for being the catalyst of
24	Intro 1140. When I asked what else can we do, you

put forth the idea that we should, because of the

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reasons that were just mentioned -- 42,000 -- was it 42, 44,000 people are dying, secondhand smoking...
[crosstalk]

PHIL KONIGSBERG: [inaudible] year.

mean I just got this picture in my head that I can't get off of, you know, you're a little kid, you don't wanna get your parents upset, but you know it's not good for you, and the car is filled with smoke and you're breathing that, you're going to school, you're coming from the Bronx; let's say you're gonna go... might have to go to a school someplace, a 45-minute drive there; 45-minute drive going back; do that every day; you're talkin' about 40 hours a week, you know. Can you give us some of the reasons why this makes sense and why we need to do it now?

PHIL KONIGSBERG: Well children should not be basically kept captive and that's what they are in a car; they're really a captive audience and I know I was outspoken on a lot of things; some people jump on me when I say it -- it's almost equivalent to child abuse because people... you know parents aren't really thinking about their children when they smoke in a closed vehicle, I mean there's violence and

2	other things that are considered child abuse
3	but this isn't violence, but it is filling their
4	lungs and one of the other members that is gonna
5	speak later, Eileen, she has a visual demonstration
6	to show exactly what we feel about having the smoking
7	in the car and I think we did a nice job at your
8	press conference last year where we had a baby in a
9	car and someone smoking a Honey Rose cigarette, not
10	it was an herbal cigarette, and I think when people
11	see it, it really strikes them hard. You mentioned
12	before about advocates trying you know, considering
13	raising I'm one who believes that, although the
14	[inaudible] age for it now is 8 and Assemblyman
15	Weprin mentioned that other areas have higher, so I'm
15 16	Weprin mentioned that other areas have higher, so I'm asking that the Committee consider raising it,
16	asking that the Committee consider raising it,
16 17	asking that the Committee consider raising it, because internationally and even in the states that I
16 17 18	asking that the Committee consider raising it, because internationally and even in the states that I mentioned before in the U.S., they have their ages
16 17 18 19	asking that the Committee consider raising it, because internationally and even in the states that I mentioned before in the U.S., they have their ages are I think as high as 18, but somewhere around 14.
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16 17 18 19 20 21 22	asking that the Committee consider raising it, because internationally and even in the states that I mentioned before in the U.S., they have their ages are I think as high as 18, but somewhere around 14. You really can't keep a child in a car with closed windows, they're breathing, their lungs are very you know, they're not matured yet; you've gotta do

1	COMMITTEE ON HEALTH 236
2	been support in the State, in Albany maybe the
3	State will say the City's doing it; it's about time
4	we did it.
5	COUNCIL MEMBER CABRERA: Absolutely. And
6	we'll definitely take that into consideration to pus
7	it into 17; I think it just based on the testimonie:
8	I heard today and also the Assembly Member, it will
9	make sense to modify and submit it. Thank you so
10	much.
11	COUNCIL MEMBER GENTILE: Thank you all
12	very, very much. Thank you for your testimony, and
13	thank you for waiting all this time. Thank you.
14	Alright, we're privileged to have as our
15	next panel the students of the Pace University
16	Environmental Policy Clinic Chelsea Matoof, Rowan
17	Lanning, Margaret Doyle, and Erin Masso [sp?].
18	They're all students at Pace University's
19	Environmental Policy Clinic, and with their
20	professor, right? Professor; why don't you introduce
21	yourself?
22	JOHN CRONIN: My name is John Cronin; I'm

Senior Fellow for Environmental Affairs at Pace University and these... [crosstalk]

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Great,

COMMITTEE ON HEALTH

	COUNCIL	MEMBER	GENTILE:

[inaudible]...

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JOHN CRONIN: these are my stu... these are my students. Some of them had to go to other classes, but we still have [inaudible]... [crosstalk]

COUNCIL MEMBER GENTILE: [inaudible] testifying then; right?

JOHN CRONIN: Yes.

COUNCIL MEMBER GENTILE: Okay. Great. Why don't we start...

and members of the City Council. Thank you for allowing us the opportunity to appear before you today. My name is Chelsea MATOOF and I am a member, as you said, of the Pace University Environmental Policy Clinic. On behalf of my fellow clinicians, Erin Masso, Rowan Lanning, Madeline Gray, Margaret Doyle, Juan Trinidad, and Anthony Rosario, present here today, I offer our enthusiastic support for the package of City Council bills aimed at further curbing tobacco usage and smoking. In addition, we encourage you to adopt a measure that will outlaw the purchase and possession of tobacco by underage youth.

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Our Environmental Policy Clinic has spent this semester studying various state programs aimed at prohibiting possession and purchase of tobacco products by those underage. New York is currently one of four states in the nation that allows the possession and the usage of tobacco products by those below the allowable age for sale; indeed, even the leading tobacco-producing states, including North Carolina, Kentucky, Virginia, and Tennessee, have instituted a ban for underage possession.

In other words, while it is illegal for a store owner to sell tobacco products to a child, any 15-year-old can stand on a street corner and smoke a cigarette with impunity. It would be illegal for that same child to possess liquor or drive a car. Yet smoking at a young age is the start of most lifelong tobacco addictions, leading to a range of fatal and debilitating diseases, including cancer, heart disease and lung disease.

Just this week, we submitted a proposal to New York State Assembly Member Linda Rosenthal and Senator Diane Savino urging them to add a purchase and possession prohibition to their Tobacco-21 bill, which raises the state smoking age to 21. We now

2 urge the City Council to adopt the same measure
3 citywide.

states, "The key to reducing the number of smokers in New York is to stop them before they start." We agree wholeheartedly. As youth who are part of the targeted age for tobacco laws, it is our position that New York City and New York State should institute every measure possible to prevent underage youth from being introduced to tobacco products. The traditional approach of preventing sales alone is not enough. The law should not allow the purchase, attempted purchase, possession, and attempted possession of tobacco products by children,

The current memo for the Tobacco-21 bill

Some statistical research purports to cast doubt on the efficacy of tobacco possession laws in reducing the number of smokers. However, this research [bell] misses the point.

adolescents, teens, and young adults.

COUNCIL MEMBER GENTILE: You can finish.

CHELSEA MATOOF: Okay. Outdated and

decades old, it was conducted before states and cities instituted aggressive public educational

campaigns. It is a confusing message to underage

1	COMMITTEE ON HEALTH 240
2	youth that the law bans sale to those underage while
3	enabling any child to possess and use tobacco
4	products. Nearly 90% of adult smokers indicate they
5	first started smoking before the legal age of sale.
6	In fact, most smokers began in their teen years, and
7	approximately 80% of adult smokers became addicted by
8	the time they were 18. Meanwhile, most who do not
9	take up smoking usually never will. It is
10	incongruous… [crosstalk]
11	COUNCIL MEMBER GENTILE: Okay, we're
12	gonna… can you wrap up?
13	CHELSEA MATOOF: that there is a
14	continuing national debate about outlawing tobacco
15	products generally, when immediately
16	COUNCIL MEMBER GENTILE: Okay. Great,
17	thank you.
18	CHELSEA MATOOF: go ahead.
19	MADELINE GRAY: Hi there, my name is
20	Madeline Gray; I'm speaking on Rowan's behalf.
21	5.6 million of those under 18 today will
22	die from tobacco-related diseases; roughly one-third
23	of those who will eventually die from smoking. In
24	addition, research indicates that a majority of

underage youth are introduced to tobacco products by

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friends and acquaintances, rather than through

illegal sale. In addition, evidence also shows that

smoking can be a first step toward other substance

abuse. New York City law should take every

precaution to halt that first step and thereby reduce the risk that kids will progress to other substances.

We examined the law in other states with a primary focus on South Carolina and Washington

State. The legislative findings of the Washington

law capture well the spirit in which this provision should be incorporated into New York City's municipal law:

The legislature finds that the protection of adolescents' health requires a strong set of comprehensive health and law enforcement interventions. We know that youth are deterred from using alcohol in public because of existing laws making possession illegal. However, while the purchase of tobacco by youth is clearly prohibited, the possession of tobacco is not. It is the legislature's intent that youth hear consistent messages from public entities, including law enforcement, about public opposition to their illegal use of tobacco products.

The approaches of the two states are of special interest because they did not criminalize the possession. While the fines are modest, the penalty provisions put in the hands of court the authority to

require tobacco education and/or community service.

And Erin will talk about the summary of the provisions of South Carolina and Washington State. Thank you.

ERIN MASSO: Hi, my name is Erin Masso; I'm also a fellow clinician for the Environmental Policy class.

So South Carolina's language... [interpose]

COUNCIL MEMBER GENTILE: Would you speak

into the mic, please?

ERIN MASSO: The language South Carolina uses regarding the penalties of possession are as follows:

A minor under the age of 18 years must not purchase, attempt to purchase, possess, or attempt to posses a tobacco product or an alternative nicotine product, or present or offer proof of age that is false or fraudulent for the purpose of purchasing or possessing these products.

A minor who knowingly violates a

provision will be subject to a civil fine of \$25.00.

In lieu of this fine, the court may require a minor

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successfully complete a tobacco prevention program, or to perform not more than five hours of community If a minor fails to pay the civil fine,

successfully complete a smoking cessation or tobacco prevention program, or perform the required hours of community service as ordered by the court, the court may restrict the minor's driving privileges to driving only to and from work, school and church, or as the court considers appropriate for a period of 90 days.

If the minor does not have a driver's license or permit, the court may delay the issuance of the minor's driver's license or permit for a period of 90 days beginning from the date the minor applies for a driver's license or permit.

Washington State's language also states:

A person under the age of 18 who purchases or attempts to purchase, possess, or obtains or attempts to obtain cigarettes or tobacco products commits a class 3 civil infraction, and this

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is subject to a fine or up to four hours of community restitution, or both. The court may also require

4 participation in a smoking cessation program.

Such an amendment prohibiting tobacco possession and purchase will communicate New York City's intent to close any gap that allows youth legal access to tobacco, and communicate as well that society at-large should embrace the same values. It will establish a consistent set of policies for this and future generations. It will ensure a better and healthier life for teens in particular, as well as significantly decrease the risks associated with the inhalation of secondhand smoke by non-smoking youth.

We respectfully request that you add to your list of anti-tobacco legislation an additional measure to prohibit possession, attempted possession, purchase and attempted purchase of tobacco products by those under the minimum legal age. In this way, New York City will close a significant loophole in its campaign to keep tobacco products out of the hands of the city's youth. [bell]

Thank you for your attention to our proposal. My colleagues and I are happy to address questions that you may have.

2 JOHN CRONIN: I'll add to that, if you 3 don't mind. Our arm at the Policy Clinic teaches 4 students policymaking and advocacy skills; they have 5 a bill that's been introduced in both houses of the State Legislature this session to ban elephants in 6 7 entertainment; they have an executive order in front of the Governor right now for restoration of oyster 8 in New York Harbor to create state policies to support that. And this semester, when they looked 10 11 through eight different issues, ranging from dam 12 removal to requiring composting, the issue that rose 13 to the top was the issue we're testifying about today 14 -- purchase and possession of tobacco products by 15 youth. And as I looked at the research that our students found, something jumped out at me that was 16 17 pretty remarkable -- it's old research, it questions 18 the need for this by saying there wasn't necessarily 19 substantial evidence that it reduced smoking. 20 is very odd; the laws that were instituted to prohibit minors from using alcohol were not 21 instituted to reduce alcohol use; there isn't an age 2.2 2.3 for driving a car to reduce the mortality in cars; it's because they're not prepared to drive cars and 24

they're not prepared to drink. Youths are not

prepared to smoke tobacco, they're not prepared to
use tobacco products or even make the decision, but I
can tell you this from my own experience at Pace
University, I was the co-chair of our smoking
committee; we're one of many universities and
colleges that still allow smoking on our campus; the
single largest argument against our having a no-
smoking campus that was raised by teachers and
students was very simply that it is not against the
law for them to have tobacco; it's not against the
law for them to use tobacco; why should we tell them
whether or not they can smoke it? And as we looked
at other colleges and universities, and other
institutions, the single biggest argument that is
used against smoke-free environment is that you're
telling people they can't use something that's legal
for them to own. And at colleges and universities
we're talking about a bulk of here at Pace
University, right across the street, the bulk of the
population is under the legal age New York City
allows, but what's essentially a technicality is that
they're allowed to own it, they're allowed to possess
it, they're allowed to trade it; they're allowed to

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buy it; the stores are not allowed to sell it to
them.

COUNCIL MEMBER GENTILE: Right. Is there any way we can quantify the extent of the problem; where those who cannot buy it are actually possessing it and using it?

JOHN CRONIN: Almost all the evidence suggests that most people who are addicted to tobacco products as adults started at a young age, younger than legal age, and almost all the evidence suggests that there's three ways they get it -- from a friend, an acquaintance or from an illegal seller -- as opposed to somebody in a store selling it to them, who has a permit selling it to them, or a license selling it to them illegally. So one of the things to note, and I was listening to testimony today; it was very interesting, is that because underage youth are allowed to possess tobacco products, smoke it and trade it if they want to, they are a primary customer for the illegal trade in tobacco products and you can't question them about it because they're allowed to own it and they're part of that trail that leads back to illegal sale.

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COUNCIL MEMBER GENTILE: Now you say

we're one of how many states that...

CHELSEA MATOOF: One of four.

COUNCIL MEMBER GENTILE: One of four

states that still allow... [crosstalk]

CHELSEA MATOOF: Yes. The other ones are Massachusetts, Nevada, New Jersey, and New York.

Wait... oh that's four, yes.

COUNCIL MEMBER GENTILE: Right. And there is currently a proposal in the State Legislature, you said?

CHELSEA MATOOF: We put an amendment on the Tobacco-21 bill with Rosenthal and Savino.

JOHN CRONIN: Yeah, we've... the clinic students wrote to them last week and formally asked Assembly Member Rosenthal and Senator Savino to add this as an amendment to their Tobacco-21 bill. As you know, the State is following the City's lead in trying to raise the age of tobacco purchase to 21, but again, even so, it does not outlaw the purchase and it does not outlaw the possession.

COUNCIL MEMBER GENTILE: Well very interesting and I'm sorry, Professor, the rest of your students couldn't stay, but it's clear you're

let... Yeah, go ahead...

CHERYL RICHTER: Hi.

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COMMITTEE	ON	${ t HEALTH}$

2 COUNCIL MEMBER GENTILE: let's go down

3 the row. Go ahead, yeah.

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CHERYL RICHTER: My name is Cheryl
Richter; I am the Executive Director of the New York
State Vapor Association; I am also a business owner
of a vape business; most of my clients, my best
clients are here in New York City, and we're here to...
actually, if possible, if I could yield my time to my
associate who is a Technical Science Director.

COUNCIL MEMBER GENTILE: Sure, just...

CHERYL RICHTER: Thank you.

COUNCIL MEMBER GENTILE: identify

yourself for the record and then speak in to the mic.

15 SPIKE BABAIAN: My name is Spike Babaian;

16 I am Technical Analysis Director for New York State

17 | Vapor Association. I had requested to come in and

18 present scientific data to the Council and to

19 | yourself and the Chairman, who are both chairmen from

20 | my own business, but there was a lot of information

21 | to provide and so I was hoping I would have more than

22 | three minutes; thank you for giving me your time ...

23 [crosstalk]

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COUNCIL MEMBER GENTILE: Well you can submit it to us, to the Sergeant at Arms; we will take it in.

SPIKE BABAIAN: We did and we also requested private meetings, but we were unable to get a response, so we're hoping that we can give you some scientific information.

Regarding Bill 1532, there are a lot of e-cigarette retailers in the country, but there are not so many in New York; the rent is high. So maybe 100; 120, that's our estimate based on the numbers that we have; there are, as we heard earlier today, 8,200 tobacco retailers. So I would like to think that most of the Council Members would understand that e-cigarettes are not tobacco, do not contain tobacco, are not combustible, do not make smoke, do not create the levels of benzene and volatile organic compounds and polycyclic aromatic hydrocarbons, and all of the other toxins that cigarette smoke does produce and that hookah, which when it's tobacco smoke, does produce.

So we're taking a product that doesn't make smoke, that doesn't encourage smoking; that actually is shown as a smoking cessation product to

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take people away from tobacco, away from combustibles
and to be a substitute and a good alternative to
cigarettes and we're saying that you can only have
120 e-cigarette retail shops, but it's okay to have
-- well you're saying half, we're saying we're gonna
50% -- the licensing says we're gonna 50% for tobacco

8 licenses and e-cigarette licenses on Bill 1532...

[interpose]

COUNCIL MEMBER GENTILE: Right.

in-half; we're saying instead of 120 we can only have 60, but we can still have 4,000 tobacco licenses. So you're now taking a product that will allow people to stop smoking and have an alternative that's safer and healthier, which I'm not allowed to say in my store, but I can say here, and we're saying, let's make sure people can't get access to this product.

I had a whole thing written; [bell] it's already provided, you have it, so I would like to use my own time to tell a very brief story about a 70-year-old woman who came into my store yesterday.

COUNCIL MEMBER GENTILE: Okay, just briefly. Go ahead.

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2	SPIKE BABAIAN: Yes. She came into my
3	store and said, "I live on 72nd Street and I'm losing
4	my home. I own my apartment on 72nd Street and I
5	don't know what I'm gonna do; I'm gonna have to move
6	out because they told me I have to stop smoking. Car
7	you please help me; can you give me one of these
8	things? Can you teach me how to use this so that I
9	don't smoke cigarettes?" And I said to her, "You
10	know, a lot of the laws in New York that restrict
11	cigarette smoking also restrict e-cigarette use and
12	so you can't use your e-cigarette in your home if you
13	can't smoke in your home, that's the City ordinance'

COUNCIL MEMBER GENTILE: Right.

nobody will know; it doesn't make any smoke." And that's pretty evident to all of us that you don't really know the difference. We also... there are dozens and dozens of studies that are provided in the packet that I gave to you that show that it doesn't make smoke; it doesn't release the compounds that are released by cigarettes.

My biggest concern here is that you're making it harder for people to quit smoking. This bill is intended to prevent youth uptake, to prevent

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combustible tobacco use; to make New York healthier,

and instead we have 1532 that's making it harder for

people to quit, making it harder for people to get

alternative products, and making people continue to

alternative products, and making people continue to smoke; that's not okay.

COUNCIL MEMBER GENTILE: Okay. Thank you. Thank you very much.

ABDUL MUBAREZ: Good afternoon. Is it on? Good afternoon. My name is Abdul Mubarez; I'm the head of Yemeni American Merchant Association, which we represent around 4,000 convenience stores in New York City. I wanna thank the Council Members for allowing me to testify in front of them, to explain to them what the effects of Intro 1547 and Intro 1544 to our members of the organization that own small businesses in the five boroughs of New York City, and in underserved neighborhoods, most of them.

So I strongly oppose the two bills that are considered today. As a business owner and merchant myself and close friend of many other people that have this kind of business, from firsthand I experience how negatively these bills would affect our community and our merchants in New York City and New York City as a whole.

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In today's environment where the profit of margin in our businesses is already being reduced daily by online retailers we are fighting to survive. One of our main generators of profit that has not been affected by online retailers and can be bought locally in our local stores. By increasing prices and taxes, you are essentially killing the business as a whole. These businesses, mostly located in low-income neighborhoods, are also selling hundreds of other products for the communities.

If we are unable to maintain our business because of these increases of taxes and price on tax as proposed by this bill, our communities will lose access to all of these essential products.

If you limit the amount of licenses distributed, you would eliminate the incentive to open business in these low-income neighborhoods. The market for sale or transfer of these businesses is gonna be harsh; will be completely destroyed.

The Yemeni American Merchants in New York City are a major staple in New York City, as clearly noted by recent events and demonstrations. We are a big community that provides major contributions to the communities. This bill will create serious harm

to our businesses, communities and families. 2 3 would not only move the advantage completely to bigname retailers but will also open the door wider for 4

black market sales of cigarettes.

The assumption that this bill is that by raising the price of cigarettes you are directly impacting the cigarette smoker's pocket which will in turn encourage them to quit smoking. The only pocket that will be affected by this bill would be the local [bell] business owner whose pockets are already affected enough.

This bill actually provides further incentive for tobacco users to find alternative use... [interpose]

> CHAIRPERSON JOHNSON: Thank you, sir.

ABDUL MUBAREZ: Thanks.

Muslim Ban. The YAMA serves as a nonprofit

CHAIRPERSON JOHNSON: Thank you.

ZAID NAGI: Good afternoon. My name is Zaid Nagi; I am a businessman and a board member of the Yemeni American Merchants Association (YAMA). YAMA was formed after the Bodega Strike and rally we organized on February 2, 2017 in response to the

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organization providing education and advocacy services for Yemeni American merchants.

First, I would like to thank you for giving me the opportunity to speak on behalf of approximately the 4,000 Yemeni American merchants.

We would like to go on record in opposition of the recent tobacco regulation that has been introduced in City Council (Into Nos. 1131, 1462, 1544-A, and 1540).

We recognize the noble goals behind these proposed regulations; however, I and most Yemeni American merchants believe, drawing on our long experience, that these bills, if passed, will lead to business closures, devalued businesses, loss of jobs, increased prices of other goods, and most importantly, it will lead to more crime.

Without a cigarette license, which will become a reality for many businesses if Intro 1547 (license cap) is passed, it is almost impossible for bodegas to survive, especially when the sales of cigarettes contribute an important percentage of income and it will be equally difficult to start new bodegas and similar types of businesses.

Needless to say, that if businesses are closing, and no new businesses are opening, not only jobs will be lost, but also new jobs will not be created.

Additionally, when businesses are closed, this will lead to increased prices of other goods; as well due to a semi-monopoly that will exist in most neighborhoods because of licenses being kept by only a few as this proposed regulation calls for.

Yemeni American Merchants, who are in the front lines, have zero doubts that these proposed regulations, if passed, will expand the illegal trade of tobacco and other related products which in turn will crate competition in the streets between criminals who will seize this golden opportunity which these regulations are handing to them.

And of course, when that happens, and it is bound to happen as a direct result of enforcing Intro 1547 and Intro 1544-A, our police will be preoccupied by working to limit these illegal activities. This will also lead to wasting resources as they work toward diffusing the growing conflicts as a result of the in-fighting between the illegal traders.

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In short, we do not want other Eric Garner moments.

Once again, we appreciate the noble intentions of these bills, but not only the Yemeni American community will be hit, a variety of small businesses will be affected.

Also, I wanna add [bell]... I'm asking for a minute to add this and this is... [crosstalk]

CHAIRPERSON JOHNSON: Go ahead.

ZAID NAGI: these words are coming from someone who lost his dad in 2009 to lung cancer, who for four months took him from hospital to hospital; also, it comes from a nonsmoker, it comes from someone who tells his kids every day not to smoke, but also in the mix, and even before I come here to testify, there was the religious element of it; my religion prohibits me from coming and testifying here to promote anything that harms individuals; however, and going back to our religion text: exchanging a wrong — this is an Islamic text — exchanging a wrong, leading to more wrong, leading the wrong and change [sic] is better. We talked a lot about people who lost their lives, and, of course, people do lose their life, but we never talked about the effect of

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disrupting people's lives by closing their
businesses, which most of these bills will lead; we
never talked about how many... the indirect effects,
the crimes that will be in the street... [interpose]

CHAIRPERSON JOHNSON: I hear you, sir.
Thank you.

ZAID NAGI: Okay.

 $\label{eq:chairperson Johnson: Thank you for your testimony. } \\$

GREGORY CONLEY: Councilman Johnson and Councilman Gentile, good afternoon. My name is Gregory Conley; I am the President of a nonprofit health advocacy group called The American Vaping Association which advocates for the rights of adults to access these lower-risk smoke-free products and the rights of small business owners to help smokers get off of smoking and create jobs.

I am here today to urge you to oppose

Intro 1532, as its enactment would actually set back recent gains that have been made in lowering New York City's adult smoking rate. Let's be clear; no one here today opposes simple retail licensing. Simple retail licensing is something that we have supported, when written appropriately, at the state level in

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multiple states, as well as cities, but this is not just simple licensing, this bill would prohibit the issuance of new retail e-cigarette licenses; it is, in effect, a ban by attrition and even worse, there are many districts in New York City, particularly minority and poor districts, that do not have a functioning vape shop, a shop that can actually talk a smoker through the process; not just have it on a shelf and you pick it up and it's on you to learn it; an actual shop with expertise to teach smokers who need this knowledge to know how to quit.

Before we move forward with something like this, shouldn't we actually be examining the evidence? We talked at length today about smoking, but nothing about the work that's been done by the Royal College of Physicians, by Public Health England, by the University of Victoria in Canada. Royal College of Physicians, which reported the dangers of smoking three years before the U.S. Surgeon General did, came out with this lengthy report by researchers with no conflicts of interest saying vaping is at least 95% less hazardous than smoking. Councilman Johnson, as a smoker, I hope you will take the point made by a doctor earlier today —

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otine, disconnected from smoke, is not a cinogen. Anything we can do to take America's 44 lion smokers and truthfully inform them that ke-free products can save their lives is a itive step forward. And so I agree with what ncilman Cabrera said earlier -- smoking is a blem and we have to do something, but you're ing the most used smoking cessation product in rica, according to the CDC, and making it harder adults to access. And Councilman Johnson, you d, "it's important; we wanna be on the cutting e of this issue," but when you act without full dence, being on the cutting edge can actually lead more disease and death. So I would urge you to ase reconsider [bell] 1532. Thank you. CHAIRPERSON JOHNSON: Thank you for you y much; I appreciate your testimony here today. appreciate the good advice.

GREGORY CONLEY: Please consider vaping.

CHAIRPERSON JOHNSON: Thank you very Okay, take care. Okay, up next is Stan Goldstein, Eileen Miller and Phyllis Goldstein. those three folks here? [background comments] [background comments] Come on up. It's okay; he'll

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take it for you. [background comments] There's
still many more.

Okay, after this panel is Lou Ruggeri,

Alex Clark, Issam Nassan [sic], Philip Roseman,

Anowarul Haque, and Ian Poulos; that's the next

panel. We have props. [background comments] 'Kay;

is Stan Goldstein here? Oh yeah. So if you wanna

come up, sir, we're gonna start. Go ahead, begin.

just want to show you this car; it's the children in the car -- the mother, the father and the baby -- as the smoke circulates, it goes round and round. This is a baby; this is the little lungs that the smoke goes in when the parents are smoking in the car.

My name is Eileen Miller; I'm a Nurse Practitioner. I am speaking on behalf of all the children and babies who have no say in what adults do.

When I was younger I had a sister who died of a brain tumor at age 7. I had a brother who devastated our entire family by dying at 2 years old from new sudden onset asthma. Many years we struggle with this horrendous loss and never understood why this happened. As an adult I did my own extensive

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research on secondhand smoke in the home.

4 secondhand smoke, I was shocked to learn the number

advanced with the knowledge of the hazards of

5 of carcinogens in cigarette smoke.

On reflection, I quickly realized that my compassionate loving parents, who smoked non-filtered cigarettes their entire life, had no idea of the hazards of the children living in their home. mother died of lung cancer; my father also died of cancer. How can we allow children, small babies who have small lungs, to breathe air containing chemicals such as arsenic, formaldehyde, benzene, ammonia; vinyl chloride, just to name a few. The air inside a car with cigarette smoke becomes quickly concentrated and the levels of the chemicals are continually recirculated. Poisons in the tobacco smoke can damage the cell's DNA -- DNA; that is the instruction manual that controls normal cell growth. When DNA is damaged the cell can begin growing out of control and create cancerous tumors. E-cigarettes cause constriction of the lung and the vapor contains nitrosamines that are also carcinogenic. As adults and parents, it is our responsibility to protect our children at any cost. With our modern fast-paced

CHAIRPERSON JOHNSON: Miss Goldstein.

[background comment]

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2 PHYLLIS

PHYLLIS GOLDSTEIN: Okay. Thank you.

Good afternoon Council Member Johnson and members of the Committee on Health. My name is Phyllis Goldstein and I live in North Shore Towers and Country Club in Floral Park, Queens... [interpose]

CHAIRPERSON JOHNSON: Council Member Grodenchik's district.

PHYLLIS GOLDSTEIN: You bet. Thank you for allowing me these few minutes to speak. I heartily endorse and support the resolutions that will curb smoking in New York City. We should be on the forefront of healthy living.

I particularly applaud the bill that requires rental apartment buildings, as well as coops and condo buildings, to create a smoking policy for the building. I also support the bill banning smoking in the common areas of all multiple dwellings.

I am a Director on the Board of North

Shore Towers and Country Club, a complex of three 33

floors containing 1,844 units on a 110 acres.

As of January 1, 2017, our community has been smoke-free in all interior areas including apartments, balconies and terraces.

We amended our proprietary lease by voting and getting the requisite 66 2/3% shares necessary to make this ban happen. Actually, 72% voted in the affirmative. People said it couldn't be done; we did it. We are thought to be the largest private co-op in the country to go smoke-free. We took this path because we had a problem with secondhand smoke traveling and impacting units in our buildings. Smoke travels through the vents, seeps under doors and walls and cannot be isolated or contained in the smokers' units.

We put together a group of 50 residents

-- two building captains in each of the three

buildings, and the remaining volunteers were floor

captains in their respective buildings. These people

were committed and focused to get the vote out.

On August 1, 2016, we had a presentation to our residents by the Queens team -- Joel Bhuiyan,

Nancy Copperman, Phil Konigsberg, and Eileen Miller
- about the harmful effects of secondhand smoke. We also had a resident engineer describe the impossibility of sealing a smoker's apartment. The stage was set for an all-out push to eliminate smoke in the interiors of our complex. At the end of the

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2	voting	period,	September	30,	the	community	spoke.
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Our commitment to and execution of [bell] amending
the proprietary lease was the March cover story in

5 Habitat magazine. We receive calls from other

6 communities to ask how to do it.

When people understand that secondhand smoke is destructive to people and property, the only answer is to eliminate it. It is the only positive approach.

North Shore Towers and Country Club is proud to be on the forefront of this issue. [bell] Thank you so much.

CHAIRPERSON JOHNSON: Thank you, Miss Goldstein for being here. Congratulations.

PHYLLIS GOLDSTEIN: Thank you.

CHAIRPERSON JOHNSON: Go ahead, sir.

STAN GOLDSTEIN: Thank you for the opportunity to speak. My name is Stan Goldstein; I live in Flushing, New York. I want to speak in favor of Intro 799, the smoke-free apartment building law and also support Intro 5930, known as the smoke-free policy declaration.

I live in a private house and I don't have the same restrictions or problems that people in

apartment houses do, but I notice, or I'm aware that public housing is coming more and more under the smoke-free laws and I think that people in private apartments should have the same health advantages as these people of there.

My other concern, which has been raised by others here, is that many people are buying cigarettes from non-dealers, from unauthorized purchasers, and I think that much more must be done to stop that. There are several problems here; not only the increased availability of cigarettes to minors, but also the in-roads that organized crime has with this type of opportunity.

Thank you for the opportunity to speak... [crosstalk]

CHAIRPERSON JOHNSON: Thank you very much for being here. Thank you all for being patient; for spending the day here at the Council. I really appreciate you all taking the trek in from Queens to be down at City Hall today. Thank you very much. Okay.

So next up is -- let's see if they're here -- Ian Poulos. [background comment] Yes, great. Anowarul Haque. No. Philip Roseman. Yes,

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2	sir. Thank you. Issam Hassan. He already spoke.
3	Alex Clark. Lou Ruggeri. [background comment]
4	Great; that's four. Igor Gromadskiy. Yeah. And
5	Michael Bowens. Michael Bowens here? No. Okay. I
6	apologize if I pronounce your name wrong. Fessle
7	Alonzo. Mr. or Mrs. Alonzo. No. Jamal Shaith
8	[sp?]. No. Omar Farraj. No. Drew. No. Andrew
9	Rahiman. No. Stewart Bowers. Come on up, sir.
10	Sergeant, if you could pull one additional chair
11	over. Is there anyone that's here today that wanted
12	to testify but didn't have the opportunity to? Okay,
13	this is our final panel. Just make sure the red
14	light is on and you speaking directly in; that would

be great. Thank you very much.

members of the Committee, thank you for affording this opportunity for us to comment today. My name is Ian Poulos from Gotham Government Relations on behalf of Logic Technology Development, one of the largest retailers of electronic cigarettes in the United States. We're here to comment on 1131-A, 1532, 1547, and if we have a moment, 1462, which isn't on the agency, but we'd like to get on record about that bill as well.

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Logic opposes these four bills for the following reasons:

pharmacies and they establish, as many others have said, a retail cap on the number of retail dealers. Should the cap be instituted, no new licenses will be issued and the number of licenses will decrease by attrition and under the proposed law, stricter caps may be instituted by the Department of Health if further restrictions are recommended.

Now, like the Mayor and many others,

Logic believes that minors should not vape, minors
should not smoke and minors should not be able to
obtain tobacco products. Everyone should be informed
about the health risks of smoking. These principles
are at the core of Logic's business, but Logic
fundamentally disagrees with the proposed
restrictions.

If the goal is to reduce youth smoking;

let's focus on what's existing on the books and crack

down on people who sell to underage youth; why not

increase those penalties; that's what really what

we're after here?

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1131-A and 1547 will affect adults and businesses, especially small businesses -- it's been said over and over again today. And let's face it; adults are adults and they have the right to choose and purchase legal products. Additionally, so long as tobacco products are legal and licensed, businesses should be able to sell them.

According to the proposal, "Pharmacists are dedicated to improving health so they should not sell cigarettes." By that same reasoning, pharmacists and pharmacies shouldn't sell many other things as well -- maybe they shouldn't sell candy, maybe they shouldn't sell energy drinks, maybe they shouldn't sell soda. Pharmacies sell all those things and none of them improve one's health. So is that the rule; are we gonna ban these things as well? Just a question.

So what are a few of the negative consequences? You have unregulated sales, right, with the increase in the black market; we're gonna push sales online where things already are unregulated; counterfeit electronic cigarettes; you're gonna affect distribution channels because

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you're gonna create pockets where there is no product in some spaces and not others.

I'll move on to 1532, 'cause I'm running short on time, which creates a licensing scheme on electronic cigarettes.

known, they should be identified and they should be appropriately licensed, but what we'd like to do is see something more along the lines of checking a box on a form. If you hold a license already on tobacco products, it should be one license and you check a box whether you sell tobacco or you sale vapor or you sell both and the kind of products that you sell.

One last thought -- 1462 is a display ban; Logic believes that it's neither appropriate nor necessary; these bans freeze and damage competition by creating barriers to entry, making brand-switching more difficult but not the actual brand recognition, so people just remember the one they saw but it makes it harder for new businesses to come in. [bell]

Thank you for your time; we appreciate the opportunity to speak.

CHAIRPERSON JOHNSON: Thank you for your patience, thank you for your testimony. Yes, sir.

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ALEX CLARK: Chairman Johnson, and I apologize for the typo on my written testimony...

CHAIRPERSON JOHNSON: It's okay. I go by Jones as well.

ALEX CLARK: Okay, great. My name is Alex Clark; I'm the Executive Director of The Consumer Advocates for Smoke-free Alternatives Association (CASAA), we are a nonprofit grassroots organization and our mission is to promote accurate information and protect access to smoke-free tobacco and nicotine products, and we are here on behalf of our more than 2,400 members in the City of New York and we would like to express opposition to Intro 1532, 1544, 1547, and 1131. The bulk of my testimony I will focus on 1532.

I did wanna, as a personal note, extend some gratitude and appreciation for your honesty at the beginning of this hearing -- sometime yesterday -- and admitting your own struggles with tobacco; as myself; someone who has a history with substance misuse recovery, I also appreciate you publicly sharing that, and that really is the core of our opposition to 1532, by enacting a cap on e-cigarette

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retailers. Unfortunately, the independent vapor shop gets caught up in that cap, and as my friends from the New York State Vapor Association very clearly stated, you would be effectively reducing consumer access to these retail shops, and while it's important for consumers to visit a retail shop and receive expert instruction and quidance about the products -- these very complicated products that they're hopefully transitioning to after smoking for years and decades -- it is perhaps more important that consumers, smokers are finding peer to peer support within these shops. Now as Spike had mentioned, in the shop, the guy behind the counter can't stand there and talk to you about the health benefits of switching to these products or even promote these products as a cessation device, but it is not uncommon to be in a shop with another customer who has experienced the same thing that that new customer is going through; to be able to share that story of how I quit smoking, the struggles that I have had is perhaps more important and has a bigger impact than any of the messaging that we see out in the public, any of the anti-smoking campaigns. take that away disadvantages smokers and generally

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disadvantages the greater public health of New York

City. So again, I would urge you to review our

written testimony for some of our comments about the

other bills. Thank you again for your time. Thank

CHAIRPERSON JOHNSON: Thank you, Mr. Clark. Go ahead, sir.

you for being here all day long. Thank you.

PHILIP ROSEMAN: My name is Philip

Roseman; I am a vape shop owner in Forest Hills,

Queens. We opened our store up about four years ago

now; we were one of the first vape shops to open and

certainly the first one in that area.

I oppose 1532 and I'm kind of curious about it because I actually have an e-cigarette retail license. I have a picture of it and it's signed by Mary Bassett and if anybody wants to see it, I can certainly make sure that you see it. But I'm already licensed to sell electronic cigarettes; I'm not quite sure what this whole thing is all about, other than limiting the number of licenses, which as Alex has said, and everyone else has said, is certainly going to be difficult not only for the consumers who are looking for these products, who are trying to get away from cigarettes and using these as

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alternatives, but for someone like me who has been growing my business slowly but surely over all these years, I'm getting to a point where I would like to open another location, possibly in a place where it's really needed and there are certainly some areas in the city that are just prevalent with smoking that could benefit from an alternative to traditional cigarettes.

Having a cap on this and having a 30-day period means that either I do it right now and just borrow all the money in the world that I need in order to do such a thing or I say forget it and I don't open another location and I continue to grow myself as an entrepreneur.

I'd also like to mention that it's been

-- I know it was brought up that cigarette smoking
and youths going into stores and being able to buy
them; when it comes to electronic cigarettes, from
the very beginning we've always been a very selfregulated industry, but I can tell you, right now you
can't walk into a vape shop, a real vape shop and get
an electronic cigarette without ID showing you are of
age, and that is 100% across the board in New York,
100%.

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I'd also like to say -- I know the Mayor suggests that 12,000 New York residents die each year from tobacco-smoking illnesses; I wonder if anyone can guess how many have died globally from using vapor products from illness caused by the products in the last 14 years, and that number is zero. I just wanna make sure that everyone's aware of that. Thank you for your time.

CHAIRPERSON JOHNSON: Thank you, Mr. Roseman.

LOU RUGGERI: Good afternoon Council

Member. Thank you everyone for taking the time to be
here today, I know it's been a long session.

I wanna state my support on behalf of the New York City Vapor Alliance for Intro 1532. We all agree that children's well-being is our top priority and in the last few years we've seen a drastic increase in the number of youth having access to electronic cigarettes. And we think that distinctions between tobacco retailers and electronic cigarette retailers are key to limiting access by youth, but we would take it even a step further; we would recommend that in addition to having separate licensing that the licenses are mutually exclusive;

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that a tobacco retailer cannot carry electronic cigarettes in their store. By doing so and including language that would require all electronic cigarette retailers to not carry snacks and drinks and the kinds of items that bring children to their stores and not allowing anyone to the store who is under 21. Currently, the way that the language exists, anyone can come into the store, but only 21 and up can purchase. We would seek to see that language be changed so that only 21+, legal purchasing age adults can enter a vape shop and only vapor products could be sold. Someone who would seek to sell tobacco would have to make a decision on whether to sell tobacco products or whether to sell vapor products.

I think this would greatly reduce the access of youth to these products and also reduce the amount that youth are even interested in them. If we can get them out of the store; if we can get these vapor products -- which we all recognize as appealing to youth -- out of their sight; then we've taken a big step forward in reducing youth access and the use of these products by children. I think we missed that opportunity with tobacco regulation and from the testimony I've heard, one of the biggest concerns is

that children are looking at tobacco products because
they're in there for a snack or a soda and although
that's a lost cause now I don't think we could
regulate that out I think it's important now to
make a distinction between a shop that specializes in
retailing electronic cigarettes and a shop that's
there for conveniences and snacks.

I know some of the other panel members mentioned that they are involved in the electronic cigarette retail industry, and I have a feeling that they probably share the same sentiment; I don't think the majority of their business is coming from snacks and grocery items and I don't even think most people that operate an electronic cigarette retail operation have any interest in carrying tobacco products.

I wanna finish by thanking you for your time and that's about it. Thanks for letting me speak today.

CHAIRPERSON JOHNSON: Thank you very much.

22 [bell]

23 LOU RUGGERI: Pleasure.

IGOR GROMADSKIY: ...share your microphone.
[background comment] Good afternoon, City Council

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Members and thank you very much for having me today
and having me able to speak. My name is Igor
Gromadskiy; I am with the Nextgen Vapeshop, which is
a vape shop in south Brooklyn opened about three
years ago, with a direct mission to actually teach
consumers, because electronic cigarettes had started
to come out and they were already getting some
traction, but there was no knowledge, it was really
lacking in that specific deal. So what we did is,
you know we are here educate and make sure that
consumers know exactly what the difference is between
smoking, what vaping is and smokeless tobacco and
what other tobacco kind of products there are.

One of the things that was actually mentioned was that vape shops need to educate and that there needed to be more education, especially in low-income neighborhoods, and that was one of the reasons why there were more smokers at that point, so why not introduce vape shops, which will educate the consumers and allow them to have an alternative, something that wasn't around -- if you take a look, about 15 years ago there was no e-cigarettes, so you had a choice of whether you're gonna smoke cigarettes, cigars or maybe even chew on some

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smokeless tobacco, or hookah, 'cause that's been around for thousands of years.

So the underground market obviously won't care if we actually let Bill 1532 pass; the underground market will be created because of the limiting of licenses; they won't really care about the laws and rules and regulations because they don't work within that sphere, they work outside of that, and we wanna make sure that we limit that, and raising the price I believe on tobacco products won't necessarily, I guess stop the person from smoking, because one of the things like was mentioned earlier was that people smoke because they're uneducated, so what better way to actually help the consumers is by educating them and maybe spending those resources on specialty stores, which I believe that I have. nobody under the age of 21 even enters the store -- I already took initiative of that, as was mentioned earlier -- it's not necessary; there's a lot of adult smokers who need help and that's what we're here for, we're here to help consumers and smokers to switch to an alternative and we're not here to educate kids or even, for that matter, sell to them anything of that nature.

2	The foundation of vaping as an industry
3	was to help smokers switch, to have an alternative,
4	something that wasn't, again, it wasn't around
5	earlier, and I believe with that goal is why we're
6	here, you know we're here not to stop businesses from
7	growing and from expanding, and then maybe you know
8	educating; we're here to make sure that the smokers
9	get the right tools, techniques and everything else
10	that's needed for them to make a better educated
11	decision in their future. And we don't target kids,
12	never were, never will; I think that the kids [bell]
13	get their information elsewhere. Thank you very
14	much.
15	CHAIRPERSON JOHNSON: Thank you very
16	much. Yes, sir.
17	STEWART BOWERS: Hi, my name is Stewart
18	Bowers. You'll have to excuse me; I'm not the most
19	eloquent speaker goin' [interpose]
20	CHAIRPERSON JOHNSON: Take your time;
21	it's totally fine… [crosstalk]
22	STEWART BOWERS: Okay. I run a vape NY
23	store in Brooklyn, it's a dedicated vape store; I
24	sell no tobacco or smokable products in the store.]

understand that the Council is looking to curb

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smoking, yet they want to limit the amount of vape stores in the city. I'm pretty much on the front lines at stopping youth from getting our products when they come into the store; it's my job to make sure that I do not sell to underage; if I do so, I can be fined for that, yet I still get New York City's innocent youth coming into the store with fake IDs to buy these products.

After I ask them to leave the store, my first thought is -- well where are the parents that are involved with this; why are their kids walking around with fake ID; it's a parent's job to -- if you don't want your child to smoke; don't smoke. If you don't want your kid to drink; then you teach them not to drink; that's not my job, my job is to stop your kid from receiving our product if he's underage.

I take offense when the Mayor stated that the e-cigs are not a fine alternative to smoking, and if you think that, you're wrong. I have hundreds of customers who have children that are happy that their parents don't smoke, customers who have decided to get their nicotine by using an alternative smoking. You'll hear a mantra coming from most of the vapers that it's the smoke that kills you; it's not the

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than anything else.

nicotine that kills you. You'll also hear that it's the dose that makes the poison; everybody's whippin' out big names here that's in the cigarettes and that is in e-cigarettes; there's a big difference between 100% and 5%. So it leans into a harm reduction more

I'm gettin' to the point here where I doubt that any of the Council Members -- maybe 10% -have met with anybody in a vape store or have spoken to any vapers -- the Mayor hasn't done that; the New York City Health Commissioner; the New York State Health Commissioner has not sat down with any vapers to discuss these products, but yet they wanna regulate us. Limiting the access to these products without proof of harm makes absolutely no sense. Nicotine is nicotine, whether it's sold in CVS or it's used in an e-cig, but magically, somehow the nicotine that's approved by the FDA is okay; it could be sold in flavors in gums and lozenges and be given away from New York City because of their smoke-free I'm not here to market to children, I'm not program. an ad executive, but I know you market to your audience. The 45 million smokers in the U.S. are our base customers; that's who we're looking for, I'm not

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2	looking for your children. If it got to the point
3	where there was only one vape store in all of New
4	York City; [bell] some knucklehead kid would walk in
5	there with fake ID trying to get the product; I don't
6	see how this bill is in any way going to stop that;
7	it doesn't fix the problem.

CHAIRPERSON JOHNSON: Thank you very much for your testimony. I appreciate you as a small business owner and all of you as well from Forest Hills who took a day off to be here and to testify and to give us your feedback. For the particular bills that you have concern over, you should reach out to the prime sponsor of that piece of legislation and talk to them about potential edits or modifications to those bills. The main sponsor is the controlling sponsor, so they're the ones that have the opportunity to make changes to those bills. Yes, go ahead.

STEWART BOWERS: I was just wondering -I know that they don't want smoking in cars with
underage; I'm wondering why the e-cigs got thrown
into that; was it because of...

CHAIRPERSON JOHNSON: It's not my bill.

STEWART BOWERS: So I'd have to ...

1	COMMITTEE ON HEALTH 287
2	CHAIRPERSON JOHNSON: So you should reach
3	out to Council Member Cabrera, whose bill it is
4	[crosstalk]
5	STEWART BOWERS: Okay, I just wanna find
6	out if it's from proof of harm or if they got thrown
7	under the bus [crosstalk]
8	CHAIRPERSON JOHNSON: Yeah, you should
9	reach out to Council Member Cabrera's office and
10	speak to either him or his legislative director
11	STEWART BOWERS: Thank you.
12	CHAIRPERSON JOHNSON: Great. Thank you
13	for your testimony; I appreciate it.
14	After five hours and 35 minutes
15	[background comment] oh, five hours and 45 minutes,
16	this hearing is adjourned.
17	[gavel]
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World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date June 2, 2017