HB06-1175 Bill Analysis
For the Health District of Northern Larimer County Board of Directors
February 15, 2006

Bill Title: Concerning Enactment of the “Colorado Clean Indoor Air Act”, and, in connection therewith, Prohibiting Smoking in Indoor Enclosed Areas, Including Places of Employment

Summary: Prohibits smoking in any indoor enclosed area including restaurants and bars with certain exceptions

Sponsors: House May M. and Pommer et al
Senate Grossman and Evans et al

Committees: Health and Human Services

History: Introduced in the House on 1/19/06, Hearing on 1/30/06 in the House HHS Committee, Amended in Committee and Passed to the Committee on the Whole, 2/3/06 Laid Over for House Second Reading; 2/8/06 House Second Reading Passed

Estimated Date of Next Action: House Third Reading set for 2/13/06

Date of Analysis: 2/09/06 Prepared by: Carrie Cortiglio Priority: 1

Background
HB06-1175 is a refile of last year’s bill, SB05-207. The bill enacts the Colorado Clean Indoor Air Act which bans smoking in most indoor enclosed spaces. Exceptions are made for private homes, residences and automobiles, retail tobacco businesses and cigar-tobacco bars. The main difference between the bills is that the final version of SB05-207 included a number of exceptions for businesses such as gaming establishments and race tracks. HB06-1175 includes a provision prohibiting smoking within a 15-foot radius around the doorway of a building that was not present in the 2005 version of the bill.

Main provisions of HB06-1175

Prohibits smoking in the following areas:
- Public meeting places
- Elevators
- Government owned or operated means of mass transportation
- Taxicabs and limousines
- Grocery stores
- Gymnasiums
- Jury waiting and deliberation rooms
- Courtrooms
- Child care facilities
- Health care facilities
- Any place of employment that is not exempted
- Food service establishments
- Bars
- Limited gaming facilities and any other facilities in which any gaming of gambling activity is conducted
- Indoor sports arenas
- Restrooms, lobbies, hallways, and other common areas in hotels and motels, and in at least 75% of the sleeping quarters within a hotel or motel that are rented to guests
- Bowling alleys
- Billiard or pool halls
- Facilities in which games of chance are conducted
- Common areas of retirement facilities and nursing homes, not including any resident’s private residential quarters
- Public buildings
- Auditoria
- Theaters
- Museums
- Libraries
- Public and nonpublic schools
- Educational and vocational institutions
Exemptions

- Private homes, private residences and private automobiles
- Limousines under private hire
- A hotel/motel room if the total percentage of such smoking rooms in the hotel/motel does not exceed 25%
- A retail tobacco business
- A cigar-tobacco bar
- Enclosed smoking areas at a municipally owned international airport that existed before Dec. 31, 2005
- The outdoor area of any business

Optional prohibitions in the bill:
Unless specifically listed as included, any place exempted can still prohibit smoking or provide smoking and non-smoking areas. The bill allows local authorities to regulate smoking as long as regulations are not less stringent that law. However, localities can decrease the radius around doorways.

Other provisions of the bill:
Employees who request a non-smoking workplace cannot be discharged or retaliated against and repeals previous law relative to smoking in public places

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<td>Defines a “tobacco bar” as a bar that generates 10% or more of total annual gross income or $100,000 in annual sales from the on-site sale of tobacco products or rental of on-site humidors.</td>
<td>Defines a “cigar-tobacco bar” as a bar that generates at least 5% or more of its total annual gross income or $50,000 in annual sales from the on-site sale of tobacco products and the rental of on-site humidors.</td>
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<td>5. Any airport smoking concession</td>
<td>5. A cigar-tobacco bar</td>
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<td>6. The room of a hospice patient in a hospice facility</td>
<td>6. Enclosed smoking areas at a municipally owned international airport that existed before December 31, 2005</td>
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<td>7. Premises of licensed gaming establishments</td>
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<td>8. Indoor premises where games of chance are conducted</td>
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<td>9. Indoor areas of greyhound, horse tracks and simulcast facilities</td>
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<td>10. Outdoor areas of any business</td>
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Amendments in Committee:
The bill was amended by the House Health and Human Services committee to include several more exemptions.
1) Casinos
2) Businesses that are not open to the public that employ 3 or fewer employees
3) A private, nonresidential building on a private farm or ranch

How the bill compares to the model ordinance:

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<th>Model Ordinance</th>
<th>HB 1175</th>
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<td>• Prohibits all smoking in restaurants, bars and any enclosed facility that is a place of employment, including cigar bars</td>
<td>• Allows exemptions for casinos cigar/tobacco bars, and retail tobacco businesses and businesses not open to the public with 3 or fewer employees.</td>
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<td>• Prohibits smoking within 20 feet of entryways</td>
<td>• Prohibits smoking within 15 feet of entryways</td>
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Why is this issue important?
Secondhand smoke is a mixture of the smoke given off by the burning end of a tobacco product (sidestream smoke) and the smoke exhaled by the smoker (mainstream smoke). According to the National Cancer Institute, secondhand smoke contains an estimated 4,000 chemicals and more than 60 chemicals that have been classified as carcinogens, including formaldehyde, cyanide, arsenic, carbon monoxide, methane, benzene, and radioactive polonium-210. The U.S. Environmental Protection Agency (EPA) has classified secondhand smoke as a "Class A" carcinogen.

The threat to human health resulting from secondhand smoke exposure is known. Secondhand smoke causes an estimated 53,000 deaths annually in the United States, including:
- 3,000 lung cancer deaths.
- 2,000 SIDS deaths (Sudden Infant Death Syndrome).
- 35,000 deaths from coronary heart disease.

In Colorado:
- Costs attributable to secondhand smoke are estimated to be $180 million for direct medical expenditures.
- Costs attributable to secondhand smoke exposure and loss of life in Colorado are $19 million.

Locally:
- More than 85% of local adult residents choose not to smoke (2004 Community Health Survey). While Fort Collins enacted a smoking ordinance in 2003, residents of other areas in the district boundaries are not protected from second hand smoke in public places and worksites.
- According to the 2004 Community Health Survey, there was a decrease by half in the percent of respondents who perceive secondhand smoke to be a problem in the community from 50.2% in 2001 to 25.9 in 2004. There is a geographical difference in that 26% of those in the Health District service area feel that secondhand smoke is a problem in the community, compared to 48% of those in south Larimer County. This difference is likely due to the fact that a public ordinance banning smoking in worksites in Fort Collins went in to effect in 2003.

Reasons for supporting this bill:
- According to the Task Force on Community Preventive Services and the Guide to Community Preventive Services, there is strong scientific evidence that smoking bans and restrictions reduce exposure to secondhand smoke in the workplace.
- Smoke-free laws help the seven out of every ten smokers who want to quit smoking by providing them with public environments free from any pressure or temptation to smoke.
- A 2003 study in the journal Tobacco Control offered a comprehensive review of all available studies on the economic impact of smoke-free workplace laws and concluded that: “All of the best designed studies report no impact or a positive impact of smoke-free restaurant and bar laws on sales or employment.”
- According to the National Cancer institute, workplace smoking restrictions is accompanied by an increase in cessation attempts and a reduction in number of cigarettes smoked per day by continuing smokers.
A study in the May 2000 issue of the *American Journal of Public Health* on the impact of California’s clean indoor air laws on cessation efforts found that laws with comprehensive restrictions led to more worksites with smoking policies and increased the likelihood that workers would quit smoking.

A statewide smoking ban would "level the playing field" for businesses around the state, eliminating the temptation for smokers in a "smoking ban" community to take their business elsewhere.

**Reasons for opposing this bill:**

- Some say that: local communities and not the state should determine policy regarding secondhand smoke exposure in the workplace.
- Business owners—particularly owners of restaurants and bars—are most familiar with how to accommodate the needs of their patrons and should be awarded the opportunity and flexibility to determine the smoking policy for their establishment.
- In indoor public places where smoking is permitted, business owners should have the flexibility to decide how best to address the preferences of non-smokers and smokers through separation, separate rooms and/or high quality ventilation.
- Opposition to statewide smoking bans note that such bans infringe on personal freedom and property rights.

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**About this Analysis**

This analysis was prepared by Health District of Northern Larimer County staff to assist the Health District Board of Directors in determining whether to take an official stand on various health-related issues. Analyses are based on bills or issues at the time of their consideration by the Board and are accurate to the best of staff knowledge. It is suggested that people check to see that a bill has not changed during the course of a legislative session by visiting the Colorado General Assembly web page at [www.state.co.us/gov_dir/stateleg.html](http://www.state.co.us/gov_dir/stateleg.html). To see whether the Health District Board of Directors took a position on this or other policy issues, please visit [www.healthdistrict.org/policy](http://www.healthdistrict.org/policy).

**About the Health District**

The Health District is a special district of the northern two-thirds of Larimer County, Colorado, supported by local property tax dollars and governed by a publicly elected five-member board. The Health District provides medical, mental health, dental, preventive and health planning services to the communities it serves.

For more information about this analysis or the Health District, please contact Carrie Cortiglio at [ccortiglio@healthdistrict.org](mailto:ccortiglio@healthdistrict.org) or (970) 224-5209.

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