

SENATE THIRD READING
SB 1124 (Archuleta)
As Amended August 13, 2026
Majority vote

SUMMARY

Requires the State Department of Public Health (DPH), no later than July 1, 2027, to make available signage to raise lung cancer screening awareness, which would include, among other things, eligibility criteria for lung cancer screening and the toll-free telephone number of the Kick It California tobacco cessation program. Authorizes DPH to satisfy this requirement by including on the signage a quick response (QR) code that links to all of the information required. Requires, beginning January 1, 2028, a retailer engaged in the retail sale of cigarettes or tobacco products to prominently display the signage in its retail locations. Makes a retailer who violates the above-described requirement subject to suspension or revocation of their license or a \$500 penalty, or guilty of a misdemeanor.

COMMENTS

According to the National Cancer Institute, as of 2023 an estimated 635,547 people in the U.S. were living with lung and bronchus cancer. Lung cancer is the leading cause of cancer death for both men and women, despite being the second most common cancer after prostate cancer in men and breast cancer in women. According to 2025 estimates from the American Lung Association, California has the third-lowest rate of new lung cancer diagnoses in the nation, which may be partially explained by its comparatively low smoking rate. However, just over 25% of lung cancer cases are caught at an early stage, placing California 43rd among the 50 states in terms of early detection screening. Late detection of lung cancer is deadly: compared to the 65% five-year survival rate for lung cancer caught in early stages, cancer detected after metastasis only has a 10% five-year survival rate.

The California Tobacco Control Program (CTCP). The CTCP was created by the Tobacco Tax and Health Protection Act of 1988 (presented to voters as Proposition 99), which approved an \$0.87 cigarette tax to help fund the Health Education Account administered in part by the CTCP. The goal of the program is to change social norms around tobacco use by making a social and legal climate in which tobacco is less desirable, acceptable, and accessible by limiting tobacco-promoting influences, reducing exposure to secondhand smoke, limiting the availability of tobacco products, and promoting tobacco cessation. The CTCP includes the Kick It California program, the state's smoking cessation program. Kick It California offers a variety of free, evidence-based services to support cessation efforts, including a hotline, one-on-one coaching, text programs, and self-help reference materials.

Lung cancer screening. To detect lung cancer early, screening can be performed with low-dose computed tomography (CT) scans, which image a patient's lungs with low-dose x-rays and typically take 15 minutes or less. Radiologists review the scan and the patient's primary care physician will follow up with the patient for additional imaging or biopsies if needed. According to the United States Preventative Services Task Force (USPSTF), people eligible for lung cancer screenings are those who meet all three of the following criteria: 1) are 50 to 80 years old; 2) currently smoke or have quit within the past 15 years; and, 3) smoke at least 20 pack-years (the product of the packs of cigarettes smoked per day by the number of years smoked, i.e., two packs

a day for ten years). The USPSTF gives lung cancer screening a B grade, meaning that they recommend the screening with high certainty that the net benefit is moderate, or moderate certainty that the benefit is moderate to substantial. Cancer screenings with USPSTF A or B grades are usually covered by insurance for those who meet USPSTF eligibility criteria. Annual low-dose CT scans for lung cancer screening are covered with no cost sharing by Medicare (for those between 50 and 77 years of age) and Medi-Cal. According to a 2011 study published in *The New England Journal of Medicine* examining the outcomes of lung cancer screening on individuals with a history of tobacco and/or nicotine product use, for every 320 individuals screened for lung cancer using low-dose CT scans, one premature death from lung cancer was prevented.

According to the Author

Lung cancer is the leading cause of cancer death in California and nationally, yet California has the lowest lung cancer screening rate in the country (<1%). The author states that the primary barrier is awareness given that 62% of Americans don't even know lung cancer screening exists. To address California's particularly low screening rates and the disparities in access across communities, this bill will require signage, created by DPH, for lung cancer screening eligibility criteria at the point-of sale for tobacco products. The author concludes that this bill is an opportunity for California to inform its residents of critical, life-saving, health care options.

Arguments in Support

The American Lung Cancer Screening Initiative (ALCSI) is the sponsor of this bill and states that lung cancer remains the leading cause of cancer-related death in California and across the United States, yet screening rates remain significantly lower than those of other major cancers, such as breast, cervical, and colorectal cancer. This disparity is driven largely by a lack of awareness among high-risk populations. ALCSI notes that this bill was developed to directly address this gap. The bill would require tobacco retailers to prominently display information about lung cancer screening at the point of sale, including eligibility criteria and resources surrounding Kick It California. This approach ensures that information is delivered in high-volume areas. Crucially, when detected early, lung cancer is highly treatable, with dramatically improved survival rates compared to late-stage diagnosis.

Arguments in Opposition

None on file.

FISCAL COMMENTS

According to the Assembly Appropriations Committee, DPH states it anticipates costs of approximately \$426,000 for fiscal years (FY) 2027-28 and 2028-29, and \$275,642 ongoing beginning in FY 2029-30 for one full-time staff to develop the lung cancer screening signage, manage a graphic design contract, support regulatory development, and provide relevant content information such as lung cancer eligibility criteria (General Fund). If DPH uses existing materials or works with an existing lung cancer screening awareness campaign, costs could be significantly lower.

Possible additional costs of an unknown amount to the University of California (UC), which administers Kick It California, to integrate new call prompts and referral pathways into existing workflows for the program's cessation activities (California Healthcare, Research and Prevention Tobacco Tax Act of 2016 Fund and Cigarette and Tobacco Products Surtax Fund).

California Department of Tax and Fee Administration (CDTFA) estimates costs of \$100,000 in 2026-27, \$266,000 in 2027-28, \$242,000 in 2028-29, \$170,000 in 2029-30, and \$141,000 in 2030-31 and ongoing for providing notifications to retail licensees, answering taxpayer inquiries, and performing related administrative functions, such as issuing and processing civil penalties and handling appeals (Cigarette and Tobacco Products Compliance Fund). CDTFA also anticipates potential revenues of an unknown amount from civil penalties.

VOTES

SENATE FLOOR: 29-4-7

YES: Allen, Archuleta, Arreguín, Ashby, Becker, Blakespear, Cabaldon, Caballero, Cervantes, Cortese, Durazo, Gonzalez, Grayson, Hurtado, Laird, Limón, McGuire, McNerney, Menjivar, Padilla, Pérez, Reyes, Richardson, Rubio, Stern, Umberg, Wahab, Weber Pierson, Wiener

NO: Alvarado-Gil, Grove, Niello, Strickland

ABS, ABST OR NV: Choi, Dahle, Jones, Ochoa Bogh, Seyarto, Smallwood-Cuevas, Valladares

ASM HEALTH: 13-1-2

YES: Bonta, Addis, Aguiar-Curry, Ahrens, Caloza, Carrillo, Jeff Gonzalez, Mark González, Patel, Celeste Rodriguez, Schiavo, Sharp-Collins, Stefani

NO: Patterson

ABS, ABST OR NV: Sanchez, Johnson

ASM APPROPRIATIONS: 11-1-3

YES: Wicks, Arambula, Calderon, Caloza, Fong, Mark González, Krell, Pacheco, Pellerin, Sharp-Collins, Solache

NO: Tangipa

ABS, ABST OR NV: Hoover, Dixon, Ta

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