

# Kentucky Report Card

## Tobacco Prevention and Control Program Funding: **F**

|  |              |
|--|--------------|
| FY2013 State Funding for Tobacco Control Programs:         | \$2,134,200  |
| FY2013 Federal Funding for State Tobacco Control Programs: | \$1,896,628* |
| FY2013 Total Funding for State Tobacco Control Programs:   | \$4,030,828  |
| CDC Best Practices State Spending Recommendation:          | \$57,200,000 |
| Percentage of CDC Recommended Level:                       | 7.0%         |

\*Includes tobacco prevention and cessation funding provided to states from the Centers for Disease Control and Prevention and U.S. Food and Drug Administration.

## Smokefree Air: **F**

### OVERVIEW OF STATE SMOKING RESTRICTIONS:

|                                   |                     |
|-----------------------------------|---------------------|
| Government Worksites:             | <b>Restricted</b>   |
| Private Worksites:                | <b>No provision</b> |
| Schools:                          | <b>Restricted</b>   |
| Child Care Facilities:            | <b>No provision</b> |
| Restaurants:                      | <b>No provision</b> |
| Casinos/Gaming Establishments:    | <b>No provision</b> |
| Bars:                             | <b>No provision</b> |
| Retail Stores:                    | <b>No provision</b> |
| Recreational/Cultural Facilities: | <b>No provision</b> |
| Penalties:                        | <b>Yes</b>          |
| Enforcement:                      | <b>No</b>           |
| Preemption:                       | <b>No</b>           |

Citation: KY REV. STAT. ANN. §§ 61.165, 61.167, 438.050 & EXEC. ORDER 2006-0807

 Thumbs down for Kentucky for failing to pass a law in the 2012 legislative session that would have protected all workers in Kentucky from secondhand smoke.

Note: The Smokefree Air grade only examines state tobacco control law and does not reflect local smokefree ordinances. Kentucky has made great strides at protecting people from secondhand smoke by passing strong local smokefree ordinances.

## Cigarette Tax: **F**

Tax Rate per pack of 20: \$0.60

## Cessation Coverage: **F**

### OVERVIEW OF STATE CESSATION COVERAGE:

#### STATE MEDICAID PROGRAM:

Medications: **All health plans cover NRT Patch; coverage for other cessation medications\* vary by health plan**

Counseling: **Coverage of individual and group counseling varies by health plan**

Barriers to Coverage: **Limits on duration, annual limits, prior authorization requirements and co-payments vary by health plan**

#### STATE EMPLOYEE HEALTH PLAN(S):

Medications: **Covers NRT Gum, NRT Patch, NRT Lozenge, Varenicline (Chantix) and Bupropion (Zyban)**

Counseling: **Covers group and phone counseling**

Barriers to Coverage: **Limits on duration, annual limits on quit attempts, prior authorization required for some medications, co-payments required and must receive counseling to get certain medications**

#### STATE QUITLINE:

Investment per Smoker: **\$0.50; CDC recommends an investment of \$10.53/smoker**

#### OTHER CESSATION PROVISIONS:

Private Insurance Mandate: **No provision**

Citation: See [Kentucky Tobacco Cessation Coverage page](#) for specific sources.

\*These medications include: NRT Gum, NRT Nasal Spray, NRT Inhaler, NRT Lozenge, Varenicline (Chantix) and Bupropion (Zyban)

## Kentucky State Highlights:



In recent years the American Lung Association in Kentucky has been focused on making all public places and workplaces in the state of Kentucky smokefree while also supporting the passage of local smokefree workplace laws. Since January 2012, three strong local smokefree ordinances were passed in Manchester, Somerset, and Franklin County. Comprehensive local laws prohibiting smoking in almost all public places and workplaces, including restaurants and bars, protect about 34 percent of Kentucky's population from exposure to secondhand smoke.

In the 2012 legislative session, State Rep. Susan Westrom championed a comprehensive, statewide smokefree law, which will prohibit smoking in virtually all indoor workplaces and public places, including bars and restaurants. Local communities would also continue to be able to pass stronger laws going forward. The legislation passed out of the House Health and Welfare Committee, a major victory in itself, but the legislative session ended before the bill could pass both houses.

Nearly 60 percent of Kentuckians supported protecting workers and patrons from secondhand smoke in public places and workplaces, according to a 2010 public opinion poll conducted by Public Opinion Strategies, a national Republican-aligned polling firm.

With Representative Westrom returning to the legislature in 2013, she will again be introducing comprehensive smokefree legislation at the state level. Public health advocates and grassroots supporters are lining up to support the Smokefree Kentucky Act and the American Lung Association in Kentucky hopes the bill will make it much further through the legislative process in the 2013 session. Thousands of grassroots advocates and hundreds of businesses have endorsed the effort. Passing a smokefree law in Kentucky would help reduce Kentucky's highest smoking rate in the country for adults (28.8%) and high youth smoking rate of 24.1 percent as well. Additionally, a statewide smokefree law would protect Kentuckians from the needless death and disease caused by secondhand smoke exposure at work.

| Kentucky State Facts                             |                 |
|--|-----------------|
| Economic Costs Due to Smoking:                   | \$3,767,220,000 |
| Adult Smoking Rate:                              | 28.8%           |
| High School Smoking Rate:                        | 24.1%           |
| Middle School Smoking Rate:                      | 9.0%            |
| Smoking Attributable Deaths:                     | 7,848           |
| Smoking Attributable Lung Cancer Deaths:         | 2,760           |
| Smoking Attributable Respiratory Disease Deaths: | 2,003           |

Adult smoking rate is taken from CDC's 2011 Behavioral Risk Factor Surveillance System. High school smoking rate is taken from the 2011 Youth Risk Behavioral Surveillance System. Middle school smoking rate is taken from the 2010 Youth Tobacco Survey.

Health impact information is taken from the Smoking Attributable Mortality, Morbidity and Economic Costs (SAMMEC) software. Smoking attributable deaths reflect average annual estimates for the period 2000-2004 and are calculated for persons aged 35 years and older. They do not take into account deaths from burns or secondhand smoke. Respiratory diseases include pneumonia, influenza, bronchitis, emphysema and chronic airway obstruction. The estimated economic impact of smoking is based on smoking-attributable health care expenditures in 2004 and the average annual productivity losses for the period 2000-2004.

To get involved with your American Lung Association, please contact:

### American Lung Association in Kentucky

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