Kentucky Report Card



≻	Tobacco Prevention and Control Program Funding:	F
O	FY2022 State Funding for Tobacco Control Programs:	\$2,000,000
\supset	FY2022 Federal Funding for State Tobacco Control Programs:	\$1,656,354*
\vdash	FY2022 Total Funding for State Tobacco Control Programs:	\$3,656,354
Z	CDC Best Practices State Spending Recommendation:	\$56,400,000
ш	Percentage of CDC Recommended Level:	6.5%
~	State Tobacco-Related Revenue:	\$495,100,000

^{*}Includes tobacco prevention and cessation funding provided to states from the Centers for Disease Control and Prevention.

Smokefree Air:



OVERVIEW OF STATE SMOKING RESTRICTIONS:

Government Worksites: Restricted (prohibited in state government buildings)

Private Worksites: No provision

Schools: Prohibited

Child Care Facilities: No provision

Restaurants: No provision

Bars: No provision

Casinos/Gaming Establishments: No provision

Retail Stores: No provision

Recreational/Cultural Facilities: No provision

E-Cigarettes Included: Yes

Penalties: Yes

Enforcement: **No**

Preemption/Local Opt-Out: No

Citation: KY REV. STAT. ANN. §§ 61.165 (2006), 61.167 (2004), 438.050 (2019), 438.345 (2019) & EXEC. ORDER 2014-0747 (2014).

Note: The Smokefree Air grade only examines state tobacco control law and does not reflect local smokefree ordinances. Kentucky has made great strides in protecting people from secondhand smoke by passing comprehensive local smokefree ordinances that cover 37.8% of the state's population.

Tobacco Taxes:



CIGARETTE TAX:

Tax Rate per pack of 20:	\$1.10
OTHER TOBACCO PRODUCT TAXES:	
Tax on little cigars: Equalized: No; Weight-Based: No	
Tax on large cigars: Equalized: No; Weight-Based: No)
Tax on smokeless tobacco: Equalized: No; Weight-B a	ased: Yes
Tax on pipe/RYO tobacco: Equalized: No; Weight-Bas	sed: No

Access to Cessation Services:



OVERVIEW OF STATE CESSATION COVERAGE:

Tax on e-cigarettes: Equalized: No; Weight-Based: No

STATE MEDICAID PROGRAM:

Medications: All 7 medications are covered

Counseling: All 3 types of counseling are covered

Barriers to Coverage: No barriers exist to access coverage

Medicaid Expansion: Yes

STATE EMPLOYEE HEALTH PLAN(S):

Medications: All 7 medications are covered

Counseling: Some counseling is covered

Barriers to Coverage: Some barriers exist to access coverage

STATE QUITLINE:

Investment per Smoker: \$0.83; the median investment per smoker is \$2.41

OTHER CESSATION PROVISIONS:

Private Insurance Mandate: Yes

Tobacco Surcharge: Limits tobacco surcharges

Citation: See <u>Kentucky Tobacco Cessation Coverage page</u> for coverage details.



Thumbs up for Kentucky for providing comprehensive coverage for all tobacco cessation medications and types of counseling to Medicaid enrollees with no barriers.

Flavored Tobacco Products:



Restrictions on Flavored Tobacco Products: **No state law or regulation**

Kentucky State Highlights:





Tobacco use remains the leading cause of preventable death and disease in the United States and in Kentucky. To address this enormous toll, the American Lung Association calls for the

following actions to be taken by Kentucky's elected officials:

- Restore funding for the Kentucky Tobacco
 Prevention and Cessation Program to \$3.3 million
 and ensure that funding is spent according to the
 Centers for Disease Control and Prevention's Best
 Practices for Comprehensive Tobacco Control
 Programs;
- 2. Repeal state preemption of local tobacco control authority; and
- 3. Support and defend local comprehensive smokefree laws, including e-cigarettes.

During the 2021 session of the Kentucky General Assembly, the Lung Association and its partner health organizations made solid progress in the campaign to repeal the state law that prohibits local governments from passing ordinances to control the use, display, sale and distribution of tobacco products.

Assessing the vote count in the Assembly, the repeal measure appeared poised to pass in both chambers. Nonetheless, leadership never assigned the bills to be heard in committee in either chamber, resulting in no votes taking place. With less pandemic-related distraction in play, and with substantial groundwork in place, the Lung Association and its partners will resume the push to give local governments the option to appropriately regulate tobacco products, including e-cigarettes in 2022.

On a separate issue, the legislature was required to revisit the state budget during its 2021 session. This occurred because the legislature opted to pass only the first year of what is normally a biennial budget, due to predictions of revenue declines and the urgent need to fund a response to the COVID-19 pandemic.

During these budget discussions, an effort was mounted to eliminate all funding for the state tobacco control program. The Lung Association and partners were successful in responding and preserving funding at the fiscal year 2021 level of \$2 million.

Restoring tobacco control funding to the fiscal year 2020 level of \$3.3 million will be a priority in the 2022 legislative session, with the potential opportunity to supplement tobacco settlement funds with general revenue surplus funds and/or funds made available

to the Commonwealth through the federal American Rescue Plan Act, a COVID-19 relief law.

Finally, the Lung Association in Kentucky will continue its successful efforts to defend local smokefree ordinances from attempts to exempt certain types of businesses, such as cigar bars. In August and September 2021, such exemptions were successfully defeated in Louisville and Somerset, respectively. As of October 1, 2021, nearly 38% of Kentuckians are protected by smokefree laws covering all indoor workplaces and public places. The Kentucky Health Issues Poll taken October through December 2020 shows that 3 in 4 adults favor a smokefree law.

As the legislature begins its work in 2022, the Lung Association will continue its efforts to educate policymakers, business leaders and media on the importance of the American Lung Association's goals to reduce all tobacco use, including e-cigarettes, and to protect public health.

Kentucky State Facts			
Healthcare Costs Due to Smoking:	\$1,926,976,238		
Adult Smoking Rate:	21.4%		
Adult Tobacco Use Rate:	N/A		
High School Smoking Rate:	8.9%		
High School Tobacco Use Rate:	29.7%		
Middle School Smoking Rate:	N/A		
Smoking Attributable Deaths:	8,860		

Adult smoking data come from CDC's 2020 Behavioral Risk Factor Surveillance System. High school smoking and tobacco use data come from the 2019 Youth Risk Behavior Surveillance System. A current middle school smoking rate is not available for this state.

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 2005-2009 and are calculated for persons aged 35 years and older. Smoking-attributable healthcare expenditures are based on 2004 smoking-attributable fractions and 2009 personal healthcare expenditure data. Deaths and expenditures should not be compared by state.

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