



# Overview of the 2014 poll

The **Kentucky Health Issues Poll (KHIP)** provides health status and brief socioeconomic profiles of the state and five geographic regions. Interact for Health and the Foundation for a Healthy Kentucky have partnered to combine state-level public opinion polls with health assessment surveys to create a powerful tool for health policy development and advocacy in Kentucky.

The Kentucky Health Issues Poll has been conducted annually since 2008 to assess what adults in the Commonwealth of Kentucky think about a variety of health topics. It is funded jointly by the Foundation for a Healthy Kentucky and Interact for Health.

KHIP is conducted by the Institute for Policy Research at the University of Cincinnati. For more information and to view the KHIP reports, please visit [www.interactforhealth.org/kentucky-health-issues-poll](http://www.interactforhealth.org/kentucky-health-issues-poll) or [www.healthy-ky.org/presentations-reports/reports/kentucky-health-issues-poll](http://www.healthy-ky.org/presentations-reports/reports/kentucky-health-issues-poll). For the complete KHIP survey datasets, codebooks and questionnaires, please visit Online Analysis & Statistical Information System (OASIS) at [www.oasisdataarchive.org](http://www.oasisdataarchive.org).

## Survey topics

Topics on the 2014 KHIP included:

- Opinions about a statewide smoke-free law
- Awareness and knowledge of kynect, Kentucky's online marketplace for health insurance
- E-cigarette regulation and taxation
- Opinions about the Affordable Care Act (ACA)
- Knowledge and current impact of the ACA
- Usual and appropriate source of healthcare
- Type of health insurance
- Misuse of prescription drugs and heroin
- Opinions about an expanded dating violence law

- Nutrition of school lunches
- Soda and sugar-sweetened beverage warning labels and taxation

## About KHIP

A total of 1,597 randomly selected adults throughout Kentucky were interviewed by telephone between Oct. 8 and Nov. 6, 2014. This included 1,086 landline interviews and 511 cell phone interviews.

Statistical adjustments were made to correct any biases that exist because of households not having a telephone. Sample responses were weighted based on Kentucky estimates from the American Community Survey<sup>1</sup> for gender,

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## Regions in the Kentucky Health Issues Poll



race, age, educational attainment and geographic region of Kentucky. The potential sampling error for this survey is  $\pm 2.5\%$ . Caution should be used when interpreting subgroup results because the margin of error for any subgroup is higher than that of the overall survey.

KHIP classifies first- and second-generation Appalachians. First generation means the respondent was born in an Appalachian-designated county in the United States. Second generation means at least one of the respondent's parents was born in an Appalachian-designated county in the United States.

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<sup>1</sup> U.S. Census Bureau, American Community Survey, 2012 five-year estimates. Retrieved from: <http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>.

KHIP includes five regional samples (Western Kentucky, Greater Louisville, Northern Kentucky, Greater Lexington, and Eastern Kentucky) so various regions of the Commonwealth can compare local health status and public opinions to the Commonwealth as a whole.

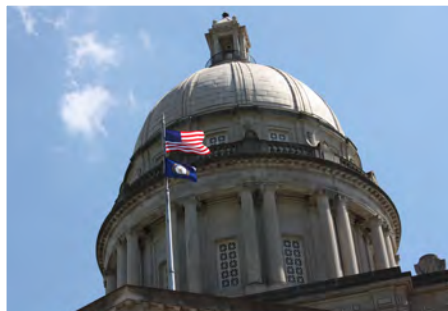
KHIP design and methodology is reviewed annually by the University of Cincinnati's Institutional Review Board.

## Why KHIP?

KHIP provides valuable state-level information to keep health on the public agenda. KHIP also supplies policymakers and advocates with state-level public opinion data to help guide their decisions. Suggestions for topics to be included on future KHIP surveys are

welcome. Please contact Jennifer Chubinski, Interact for Health's Vice President for Innovation and Learning, at [jchubinski@interactforhealth.org](mailto:jchubinski@interactforhealth.org) or Rachelle Seger, Foundation for a Healthy Kentucky's Community Health Research Officer, at [rseger@healthy-ky.org](mailto:rseger@healthy-ky.org) with your suggestions.

KHIP was featured in the September 2014 issue of Health Affairs in the Grant Watch article titled "For Two Regional Health Foundations, Returns from the Kentucky Health Issues Poll are Worth the Investments." KHIP has also been cited in the American Journal of Health Promotion, Health Affairs, the Cincinnati Enquirer, the Lexington Herald-Leader, the Courier-Journal, WAVE-3 news, WNKU radio and in additional local media reports on health.



# Most have heard of kynect, state's insurance marketplace

Enrollment for 2015 coverage via kynect, Kentucky's online marketplace for health insurance, reopened Nov. 15, 2014. Kentucky reports that more than 521,000 people enrolled in kynect in 2014.<sup>1</sup> Kynect allows uninsured Kentuckians to seek and enroll in insurance plans, including people eligible for Medicaid under Kentucky's expanded program and KCHIP, the Kentucky Children's Health Insurance Program.

The 2014 **Kentucky Health Issues Poll (KHIP)**, conducted Oct. 8-Nov. 6, 2014, found nearly 8 in 10 Kentucky adults (77%) reported hearing something about kynect. Twenty-seven percent of Kentucky adults had heard a lot about kynect. Democrats, college graduates, Lexington or Louisville residents, and registered voters were all more likely to report hearing a lot about kynect.

## Most uninsured adults have heard of kynect

Seven in 10 uninsured Kentucky adults (70%) had heard

<sup>1</sup> Governor Steve Beshear's Communications Office. (2014). kynect Open Enrollment Going Strong. [Press Release]. Retrieved from <http://migration.kentucky.gov/Newsroom/governor/20141121kynect.htm>

**How much, if anything, have you heard about this new health insurance marketplace, also known as kynect, or Kentucky's Healthcare Connection, in your state?\***

### Kentucky adults



### Uninsured



■ A lot      ■ Some      ■ Only a little

\*KHIP asked: "As you may know, the healthcare law creates health insurance exchanges or marketplaces where people who don't get coverage through their employers can shop for insurance and compare prices and benefits. How much, if anything, have you heard about this new health insurance marketplace, also known as kynect, or Kentucky's Healthcare Connection, in your state? Have you heard . . ."

something about kynect. Among uninsured Kentucky adults, 17% had heard a lot about kynect.

## 1 in 8 have sought more kynect information

KHIP 2014 asked "Over the past few months, have you tried to seek out more information about kynect?" About 1 in 8 Kentucky adults (13%) reported seeking more information about kynect.

Groups that may be eligible to enroll through kynect sought information about it slightly more often. About 1 in 6 uninsured Kentucky adults (17%) sought information about kynect. Nearly

1 in 5 Kentucky adults living at or below 138% of the Federal Poverty Level (FPL)<sup>2</sup>(19%) reported seeking information about kynect.

Kynect is viewed nationally as a very successful state insurance exchange. This success has been attributed to Kentucky's state-run website; community outreach including kynectors, Kentucky's navigators trained and certified to assist insurance shoppers; publicity and media campaigns; a call-center; and website tools such as a "show me all my options" button.

<sup>2</sup> 138% of the Federal Poverty Level in 2013 was \$32,500 for a family of four.

These findings unless otherwise noted are from the Kentucky Health Issues Poll, funded by the Foundation for a Healthy Kentucky and Interact for Health. The Kentucky Health Issues Poll was conducted Oct. 8-Nov. 6, 2014, by the Institute for Policy Research at the University of Cincinnati. A random sample of 1,597 adults from throughout Kentucky was interviewed by telephone. This included 1,086 landline interviews and 511 cell phone interviews with cell phone users. In 95 of 100 cases, the statewide estimates will be accurate to ± 2.5%. There are other sources of variation inherent in public opinion studies, such as non-response, question wording, or context effects that can introduce error or bias. For more information about the Kentucky Health Issues Poll, please visit [www.healthy-ky.org](http://www.healthy-ky.org) or [www.interactforhealth.org/kentucky-health-issues-poll](http://www.interactforhealth.org/kentucky-health-issues-poll).



# Support for smoke-free law in Kentucky remains steady

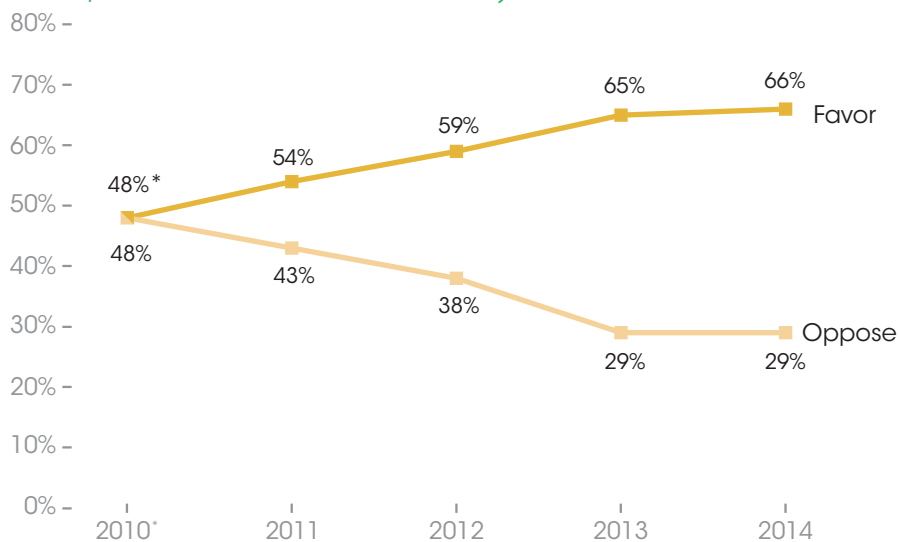
Since 2010, the **Kentucky Health Issues Poll (KHIP)**, sponsored by Interact for Health and the Foundation for a Healthy Kentucky, has reported Kentucky adults' views about a statewide, smoke-free law. Laws that provide for smoke-free indoor air in workplaces, restaurants and bars are called comprehensive laws. In the United States, 26 states and the District of Columbia have such laws<sup>1</sup>; Kentucky does not.

In 2006, the U.S. Surgeon General's Report documented the health risks of secondhand smoke, such as sudden infant death syndrome (SIDS), heart disease and lung cancer. The report recommended eliminating all exposure to secondhand smoke.<sup>2</sup> Last year, the U.S. Surgeon General's Report, titled *The Health Consequences*

<sup>1</sup>As of Sept. 30, 2014, Centers for Disease Control and Prevention. *State Smoke-free Indoor Air Fact Sheet*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014. Available at <http://apps.nccd.cdc.gov/state-system/default/Publications.aspx>.

<sup>2</sup>U.S. Department of Health and Human Services. *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, 2006.

**Would you favor or oppose a state law in Kentucky that would prohibit smoking in most public places, including workplaces, public buildings, offices, restaurants and bars?** (Percentages do not add to 100% because the response "don't know" is not included.)



\* In 2010, KHIP asked "Would you favor or oppose a statewide smoke-free law in Kentucky?"

*of Smoking—50 Years of Progress*, offered evidence that smoke-free indoor air policies are effective in reducing exposure to secondhand smoke.<sup>3</sup>

## Majority supports smoke-free law

Support for a state law in Kentucky that would prohibit smoking in

<sup>3</sup>U.S. Department of Health and Human Services. *The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, 2014.

most public places remains steady. In 2014, nearly 7 in 10 Kentucky adults (66%) favored this type of law, while nearly 3 in 10 opposed the law (29%).

## Majorities of Democrats, Republicans and Independents favor statewide law

A majority of Democrats (68%), Republicans (67%) and Independents (64%) reported

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support for a statewide smoke-free law.

## Highest support among nonsmokers and healthiest

Support for a smoke-free law is related to smoking status. Among Kentucky adults who have never smoked, 8 in 10 (80%) favored a smoke-free law, while 7 in 10 former smokers (71%) also supported a law. Four in 10 Kentucky adults who were current smokers<sup>4</sup> (40%) favored a smoke-free law.

In addition, Kentucky adults who reported better health status were more likely to favor a statewide smoke-free law in Kentucky. More than 7 in 10 Kentucky adults (75%) who reported excellent or very good health favored such a law. More than 6 in 10 adults (65%) with good health and only 5 in 10 adults (55%) with fair or poor health favored the law.

## Highest support in Lexington, Louisville

The highest levels of support for a statewide law were in two areas of Kentucky that have had long-standing local smoke-free ordinances. More than 7 in 10 Kentucky adults in the Lexington (75%) and Louisville (74%) areas favored the law. Majorities in Western (65%), Northern (63%) and Eastern (54%) Kentucky also favored a statewide smoke-free law.

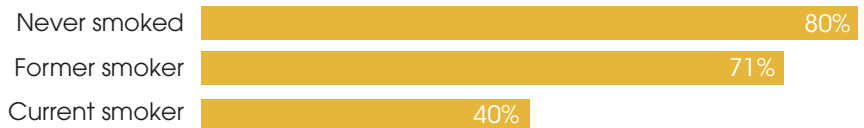
<sup>4</sup> On KHIP 2014, 29% of Kentucky adults reported being current smokers.

**Would you favor or oppose a state law in Kentucky that would prohibit smoking in most public places, including workplaces, public buildings, offices, restaurants and bars?** (Graph presents only those who favor a state law.)

### By political party identification



### By smoking status



### By general health status\*



### By region



\*KHIP asks "Would you say that, in general, your health is excellent, very good, good, fair or poor?"



# Most support expanding domestic violence law

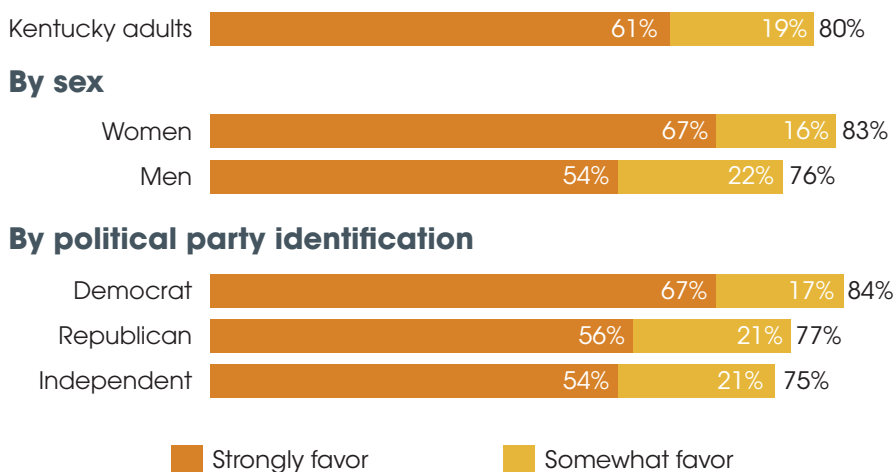
In Kentucky, dating partners are not included in domestic violence civil protection orders. Under current Kentucky law, protections cover family members, members of an unmarried couple with a child in common, and members of an unmarried couple who are living together or have formerly lived together.

The 2014 **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults whether the law should be changed in order to include dating partners who do not share a child and have not lived together.<sup>1</sup>

Eight in 10 Kentucky adults (80%) favor changing Kentucky law to allow people to file a domestic violence protection order against a current or former dating partner with whom they have not lived or

<sup>1</sup> KHIP asks, "In Kentucky, a person may not file for a domestic violence protection order against a current or former dating partner unless they share a child with that person or they lived with that person at some point in time. A proposed change to Kentucky law would allow a person to file for a domestic violence protection order against a current or former dating partner in cases where they do not share a child and have not lived together. Some people favor this change to Kentucky law, others oppose this change to Kentucky law. How about you ... would you favor or oppose this change to Kentucky law?"

## Percentage of Kentucky adults who favor a change to Kentucky law about domestic violence protection orders



do not share a child. Majorities of both women (83%) and men (76%) favor this change.

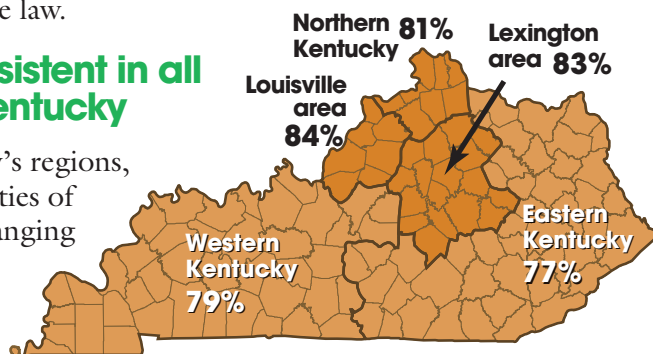
Likewise, substantial majorities of Democrats (84%), Republicans (77%) and Independents (75%) favor changing the law.

## Support consistent in all regions of Kentucky

In all of Kentucky's regions, substantial majorities of adults favored changing Kentucky law to allow people to file a domestic

violence protection order against a current or former dating partner with whom they have not lived or do not share a child.

## Percentage of Kentucky adults who favor a change to Kentucky law about domestic violence protection orders



These findings unless otherwise noted are from the Kentucky Health Issues Poll, funded by the Foundation for a Healthy Kentucky and Interact for Health. The Kentucky Health Issues Poll was conducted Oct. 8-Nov. 6, 2014, by the Institute for Policy Research at the University of Cincinnati. A random sample of 1,597 adults from throughout Kentucky was interviewed by telephone. This included 1,086 landline interviews and 511 cell phone interviews with cell phone users. In 95 of 100 cases, the statewide estimates will be accurate to  $\pm 2.5\%$ . There are other sources of variation inherent in public opinion studies, such as non-response, question wording, or context effects that can introduce error or bias. For more information about the Kentucky Health Issues Poll, please visit [www.healthy-ky.org](http://www.healthy-ky.org) or [www.interactforhealth.org/kentucky-health-issues-poll](http://www.interactforhealth.org/kentucky-health-issues-poll).



# Most Kentucky adults favor taxing, regulating e-cigarettes

In April 2014, Kentucky became one of 40 states to prohibit the sale of electronic nicotine delivery systems, also known as alternative or vapor nicotine products and e-cigarettes, to minors.<sup>1</sup> The most recent **Kentucky Health Issues Poll (KHIP)** asked what Kentucky adults think about taxing and regulating e-cigarettes.

## Most adults favor e-cigarette excise tax

Kentucky currently places both a sales tax *and* a 60 cent per pack excise tax on the sale of traditional cigarettes. E-cigarettes are subject *only* to sales taxes. KHIP asked Kentucky adults if e-cigarettes should be taxed at a rate similar to traditional cigarettes.

More than half of Kentucky adults (53%) favored an excise tax on e-cigarettes. Adults who

<sup>1</sup> Centers for Disease Control and Prevention (2014). State Laws Prohibiting Sales to Minors and Indoor Use of Electronic Nicotine Delivery Systems — United States, November 2014. MMWR (63); 1145-1150.

<sup>2</sup> KHIP asked, "Electronic cigarettes or e-cigarettes are battery-powered devices used to inhale vaporized liquid. The vaporized liquid often contains nicotine, and some have flavors and other ingredients. Users of e-cigarettes sometimes refer to the activity as 'vaping,' as opposed to smoking. Have you ever used an electronic cigarette or e-cigarette?"

## Percentage of Kentucky adults who favor Kentucky placing an excise tax on the sale of e-cigarettes so that e-cigarettes are taxed at a rate similar to a pack of cigarettes\*

Kentucky adults **53%**

### By use of e-cigarettes

Never used **60%**

Have used **32%**

### By political party identification

Independent **58%**

Republican **55%**

Democrat **53%**

### By region

Lexington area **61%**

Louisville area **55%**

Northern Kentucky **54%**

Eastern Kentucky **52%**

Western Kentucky **51%**

\*KHIP asked, "The Commonwealth of Kentucky currently places both a sales tax and a \$0.60 cent per pack excise tax on the sale of cigarettes. E-cigarettes are only subject to sales taxes. Do you favor or oppose the Commonwealth of Kentucky placing an excise tax on the sale of e-cigarettes so that e-cigarettes are taxed at a rate similar to a pack of cigarettes?"

report never smoking e-cigarettes<sup>2</sup> (60%) are more likely than e-cigarette users (32%) to favor an excise tax.

Majorities of Independents (58%), Republicans (55%) and Democrats (53%) supported an

excise tax on e-cigarettes.

Majorities in each region of Kentucky favored an excise tax on e-cigarettes. Lexington area residents were most likely to favor a tax (61%).

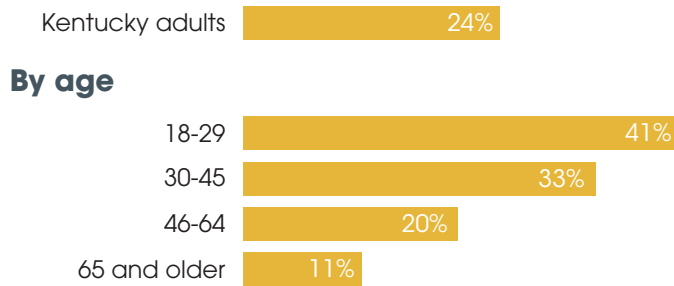
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## 6 in 10 Kentucky adults support FDA regulation of e-cigarettes

Currently, e-cigarettes are not regulated by the U.S. Food and Drug Administration (FDA). Six in 10 Kentucky adults (61%) said the FDA should regulate the sale and marketing of e-cigarettes.<sup>3</sup> Majorities of all demographic groups supported FDA regulation of e-cigarettes. Likewise, nearly 6 in 10 e-cigarette users (57%) and about 6 in 10 respondents who never used e-cigarettes (62%) said the FDA should regulate e-cigarettes.

<sup>3</sup> KHIP asked, "The U.S. Food and Drug Administration, or FDA, currently regulates the sale and marketing of cigarettes, cigarette tobacco, roll-your own tobacco and smokeless tobacco. However, the FDA does not currently regulate the sale and marketing of e-cigarettes. Some people say the FDA should regulate the sale and marketing of e-cigarettes, while other people say the FDA should not regulate e-cigarettes. What about you? Would you say the FDA should regulate the sale and marketing of e-cigarettes or the FDA should not regulate the sale and marketing of e-cigarettes?"

## Percentage of Kentucky adults who have ever used an e-cigarette



## E-cigarette use higher among younger adults

About 1 in 4 Kentucky adults (24%) reported ever using an electronic cigarette. Men (29%) were more likely than women (20%) to have used an e-cigarette. Younger adults were more likely than older adults to report using e-cigarettes. Four in 10 adults age 18-29 (41%) and more than 3 in 10 adults age 30 to 45 (33%) have used e-cigarettes. This compares with 2 in 10 adults age 46 to 64 (20%) and 1 in 10 adults age 65 or older (11%). Six in 10

current smokers of traditional cigarettes (60%) reported using e-cigarettes, while only about 2 in 10 former smokers of traditional cigarettes (19%) used e-cigarettes.

Use of e-cigarettes is not uniform across Kentucky. Fewer than 1 in 6 Lexington area adults (16%) reported using e-cigarettes. This is lower than percentages in Northern Kentucky (25%) and Eastern Kentucky (28%). It is about half the percentage in the Louisville area and Western Kentucky, where nearly 1 in 3 adults (31%) report using an e-cigarette.





# ACA understanding, support rise; most felt no impact

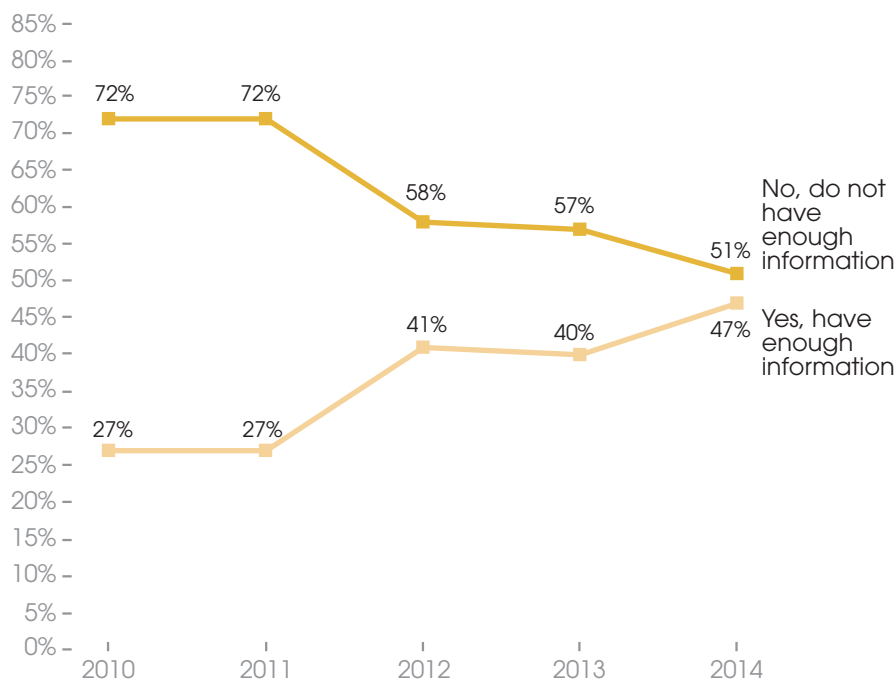
In March 2010, the Patient Protection and Affordable Care Act (ACA) became law. Since then, the **Kentucky Health Issues Poll (KHIP)** has asked Kentucky adults their opinions about the healthcare reform law.

As part of the ACA in Kentucky, kynect allows Kentuckians, including those eligible for the expanded Medicaid program and Kentucky Children's Health Insurance Program (KCHIP), to search for and enroll in insurance plans. Last year, 521,000 people enrolled through kynect, 75% of whom were previously uninsured.<sup>1</sup>

## More adults have enough information to understand law

Nearly half of Kentucky adults (47%) reported having enough information to understand how the ACA will affect them personally. More than half of adults (51%) reported not having enough information. The percentage of adults who do not

**Do you feel you have enough information about the health reform law to understand how it will impact you personally?\*** (Percentages may not add to 100% because the response "don't know" is not included.)



\*KHIP 2014 asked, "As you may know, a health reform bill called the Affordable Care Act was signed into law in 2010. Do you feel you have enough information about the health reform law to understand how it will impact you personally, or not?"

have enough information about the law continues to decline. In 2012 and 2013, 6 in 10 adults reported not having enough information.

adults living below 200% of the Federal Poverty Level (FPL)<sup>2</sup> (58%) were more likely to report not having enough information.

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Kentucky adults with less than a high school diploma (64%) and

<sup>2</sup> In 2013, 200% of the Federal Poverty Level (FPL) was \$47,100 for a family of four.

<sup>1</sup> Governor Steve Beshear's Communications Office. (2014). kynect Open Enrollment Going Strong. [Press Release]. Retrieved from <http://migration.kentucky.gov/Newsroom/governor/20141121kynect.htm>

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A majority of Democrats (52%) reported having enough information about the law, while a majority of Independents (58%) and Republicans (54%) reported *not* having enough information.

## 4 in 10 adults view law favorably

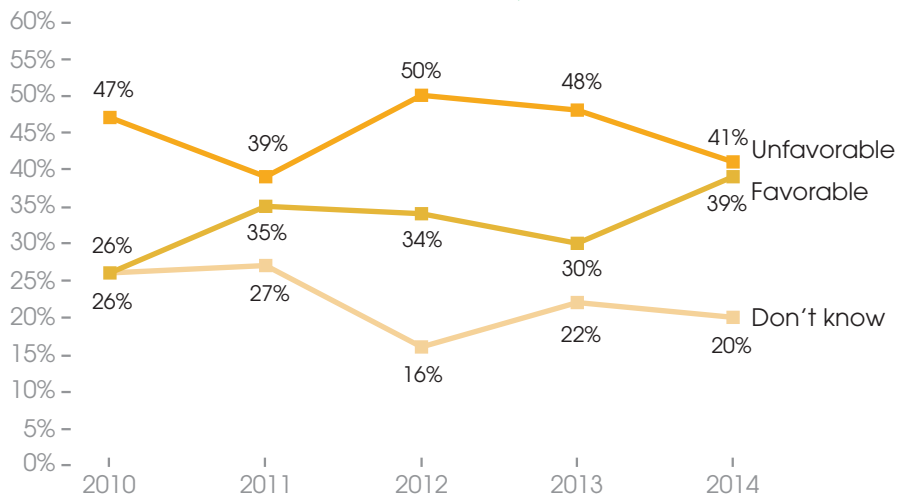
Four in 10 Kentucky adults (39%) reported favorable views of the ACA, while 4 in 10 (41%) reported unfavorable views. Two in 10 (20%) reported that they don't know. The percentage of adults who viewed the law unfavorably has declined since 2013. The percentage of adults who viewed the law favorably has increased.

A majority of Democrats (58%) had favorable views of the law, while a majority of Republicans (64%) had unfavorable views. Slightly more Independents viewed the law unfavorably (42%) than favorably (31%).

The views in Kentucky were similar to national views of the healthcare law. The October 2014 Kaiser Health Tracking Poll reported that 43% had unfavorable views, 36% had favorable views and 20% did not know/refused.<sup>2</sup>

<sup>2</sup> Henry J. Kaiser Family Foundation. Kaiser Health Tracking Poll, October 2014. Retrieved Dec. 22, 2014 from: <http://kff.org/health-reform/poll-finding/kaiser-health-tracking-poll-october-2014/>

**Given what you know about the health reform law, do you have a generally favorable or generally unfavorable opinion of it?** (Percentages may not add to 100% because of rounding.)



**Overall, which of the following statements would you say best describes the impact of the health reform law on you and your family personally?** (Percentages do not add to 100% because the responses "don't know" and "both positive and negative" are not included.)

	2011	2013	2014
The health reform law has positively affected me and my family	11%	7%	18%
The health reform law has negatively affected me and my family	16%	21%	21%
The health reform law has not had an impact on me and my family	64%	66%	57%

## Majority reports no impact from law

Six in 10 Kentucky adults (57%) reported that the ACA has not had an effect on their family. This is down from 7 in 10 (66%) in 2013.

The percentage of Kentucky adults who reported that the

law had a positive impact has increased. Two in 10 adults (18%) reported the law has had a positive effect on their family, compared with just 1 in 10 adults in 2011 (11%) and 2013 (7%). The percentage of adults (21%) who report that the law had a negative impact on their family has remained stable.



# Heroin use and prescription drug misuse in Kentucky

Kentucky ranks fifth worst in the nation for drug overdose deaths, behind only New Mexico, West Virginia, Nevada and Utah.<sup>1</sup> Drug overdose deaths per capita quadrupled between 1999 and 2010.<sup>2</sup> They now surpass motor vehicle accidents as the leading cause of accidental death in Kentucky.<sup>3</sup> The Kentucky Injury Prevention and Research Center (KIPRC) reported 980 overdose deaths in 2013.<sup>4</sup> KIPRC found that while prescription drug overdose deaths have declined 10% from last year, deaths because of heroin use rose 55% from 129 in 2012 to 200 in 2013.<sup>5</sup>

<sup>1</sup> Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2013 on CDC WONDER Online Database, released 2015. Data are from the Multiple Cause of Death Files, 1999-2013, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Retrieved Jan. 23, 2015, from <http://wonder.cdc.gov/mcd-icd10.html>.

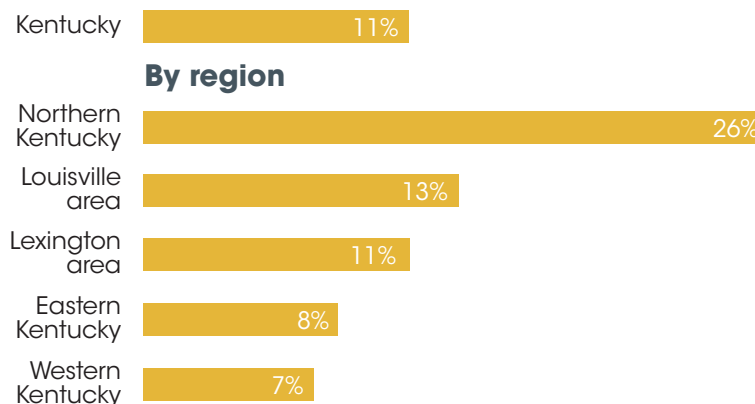
<sup>2</sup> In Trust for America's Health. (Oct. 7, 2013). Prescription Drug Abuse: Strategies to Stop the Epidemic. Retrieved Jan. 2, 2014, from <http://healthyamericans.org/assets/files/TFAH-2013RxDrugAbuseRptFINAL.pdf>.

<sup>3</sup> Ibid.

<sup>4</sup> Kentucky Injury Prevention and Research Center (Oct. 2014). Special Emphasis Report: Drug Poisoning (Overdose) Deaths, 2000-2013. Retrieved Dec. 3, 2014, from [www.safekentucky.org/images/documents/reports/substance\\_abuse/KY\\_Drug\\_Overdose\\_Death\\_Special\\_Emphasis\\_Report\\_2013\\_KIPRC.pdf](http://www.safekentucky.org/images/documents/reports/substance_abuse/KY_Drug_Overdose_Death_Special_Emphasis_Report_2013_KIPRC.pdf)

<sup>5</sup> Ibid.

**Have any of your family members or friends experienced problems as a result of using heroin?** (Graph shows only those who said yes.)



The **2014 Kentucky Health Issues Poll (KHIP)** asked Kentucky adults about the influence of drug misuse on their family members or friends.

**1 in 10 knows someone who has had problems because of heroin use**

Overall, 1 in 10 Kentucky adults (11%) reported family or friends who have experienced problems as a result of heroin use. This is similar to 2013, when 9% of adults knew someone who had experienced a problem due to heroin use. However, the rate is much higher in some parts of the state. Three in 10 Northern Kentucky adults (26%) knew

someone who has experienced problems as a result of heroin use.

**Misuse of prescription pain relievers continues to decline**

Nearly 1 in 4 adults (24%) reported that a family member or friend has experienced problems as a result of abusing prescription pain relievers such as OxyContin, Vicodin, Percocet or codeine. This is down from previous years.

Since 2011, the percentage of adults who reported knowing friends and family members who have experienced problems as

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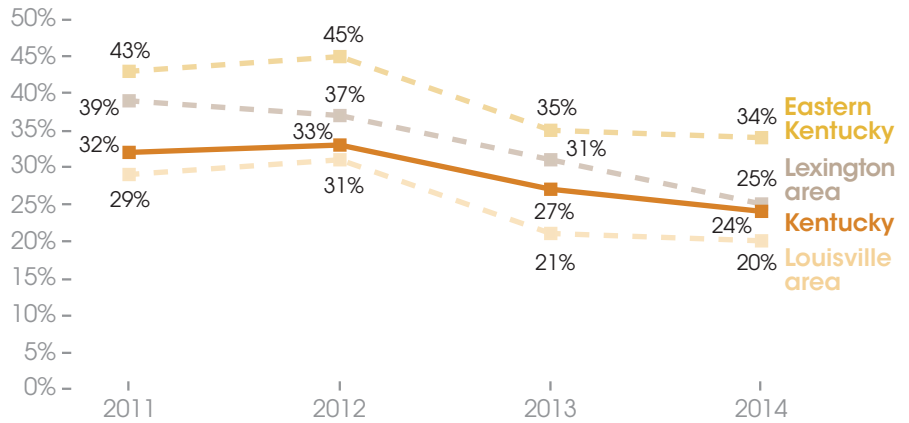
a result of abusing prescription pain relievers has declined in all five regions of the state. Eastern Kentucky and the Lexington and Louisville areas had significant declines.

## Young adults more likely to know of drug abuse

Older Kentucky adults are less likely to report having friends or family members who have experienced problems as a result of drug abuse. Adults 18 to 29 are more likely than older adults to report knowing someone who has experienced problems as a result of using prescription pain relievers or heroin.

### Have any of your family members or friends experienced problems as a result of abusing prescription pain relievers?\*

*(Includes only the state and regions with significant changes 2011-2014.)*

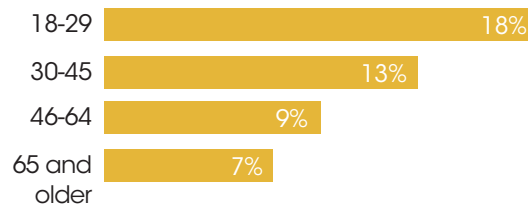


\*KHIP asked "Thinking about your friends and family ... have any of your family members or friends experienced problems as a result of abusing prescription pain relievers such as OxyContin, Vicodin, Percocet or codeine?" Graph shows only those who said yes.

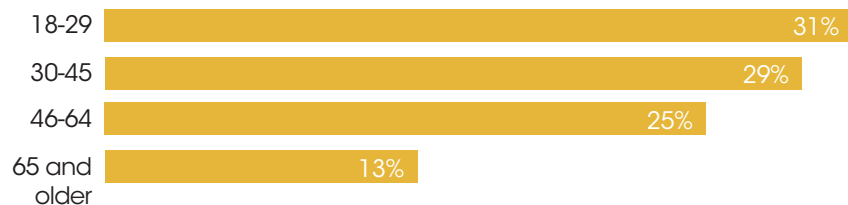
### Percentage who reported having family members or friends who experienced problems as a result of using heroin or abusing prescription pain relievers, by age

*(Graph shows only those who said yes.)*

#### Heroin



#### Prescription pain relievers







# Employer-provided insurance rises; uninsured rate drops

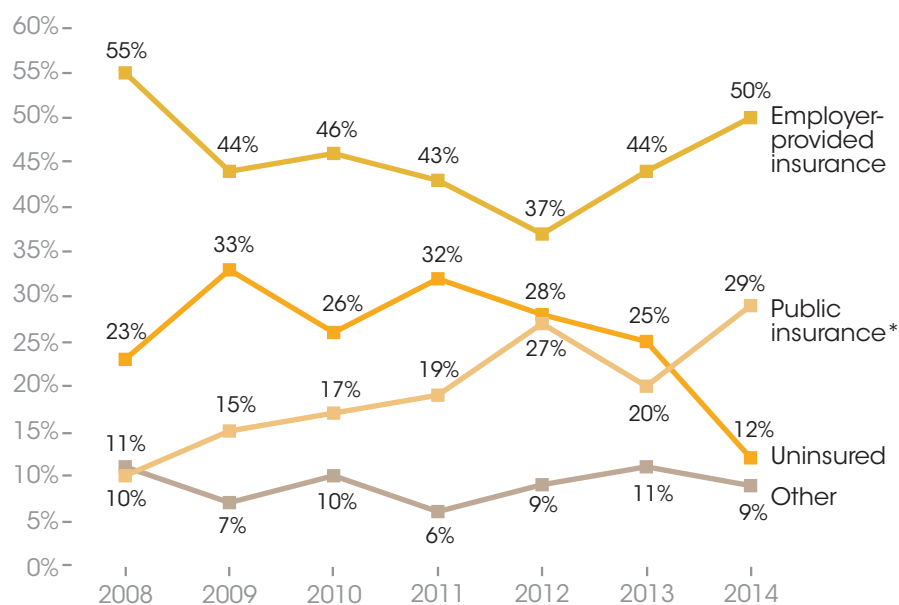
Having health insurance is an important factor in being able to get needed healthcare. Since 2008, the **Kentucky Health Issues Poll (KHIP)** has included questions about health insurance coverage to learn about the insurance status of Kentucky adults. Because nearly all Kentuckians 65 and older (97%) are insured, this summary focuses on Kentucky adults ages 18-64.

## More working-age Kentucky adults have employer-provided health insurance

Five in 10 working-age adults (50%) reported being insured through their employer or their spouse's employer. Three in 10 (29%) had some type of public health insurance.<sup>1</sup> Only 1 in 10 working-age adults (9%) reported having some other type of health insurance.

The percentage of adults with employer-provided insurance has steadily risen since a low point in 2012. That year fewer than 4 in 10 adults (37%) were insured through their employer or their

**Type of insurance coverage for Kentucky adults ages 18-64** (Percentages may not add to 100% because the response "don't know" is not included.)



\* Medicare, Medicaid, military benefits and combinations of the three.

spouse's employer.

## Steep drop in the percentage of uninsured adults

Stability of health insurance, measured as continuous insurance coverage for the past 12 months, is an important factor in accessing healthcare. KHIP found that 1 in 10 adults ages 18 to 64 (12%) reported being currently uninsured. An additional 1 in 10

adults (12%) were insured but had lacked health insurance at some point in the previous year.

The percentage of adults with unstable insurance has declined considerably since 2013, when 3 in 10 Kentucky adults (33%) had been uninsured in the previous 12 months. This decline may be in part due to kynect, which began enrollment in October

**Continued on back**

<sup>1</sup> Includes Medicare, Medicaid, military benefits and combinations of the three.

These findings unless otherwise noted are from the Kentucky Health Issues Poll, funded by the Foundation for a Healthy Kentucky and Interact for Health. The Kentucky Health Issues Poll was conducted Oct. 8-Nov. 6, 2014, by the Institute for Policy Research at the University of Cincinnati. A random sample of 1,597 adults from throughout Kentucky was interviewed by telephone. This included 1,086 landline interviews and 511 cell phone interviews with cell phone users. In 95 of 100 cases, the statewide estimates will be accurate to ± 2.5%. There are other sources of variation inherent in public opinion studies, such as non-response, question wording, or context effects that can introduce error or bias. For more information about the Kentucky Health Issues Poll, please visit [www.healthy-ky.org](http://www.healthy-ky.org) or [www.interactforhealth.org/kentucky-health-issues-poll](http://www.interactforhealth.org/kentucky-health-issues-poll).

2013. As part of the Affordable Care Act in Kentucky, kynect allows Kentuckians, including those eligible for the expanded Medicaid program and Kentucky Children's Health Insurance Program (KCHIP), to search for and enroll in insurance plans. Last year, 521,000 people enrolled through kynect, 75% of whom were previously uninsured.<sup>2</sup>

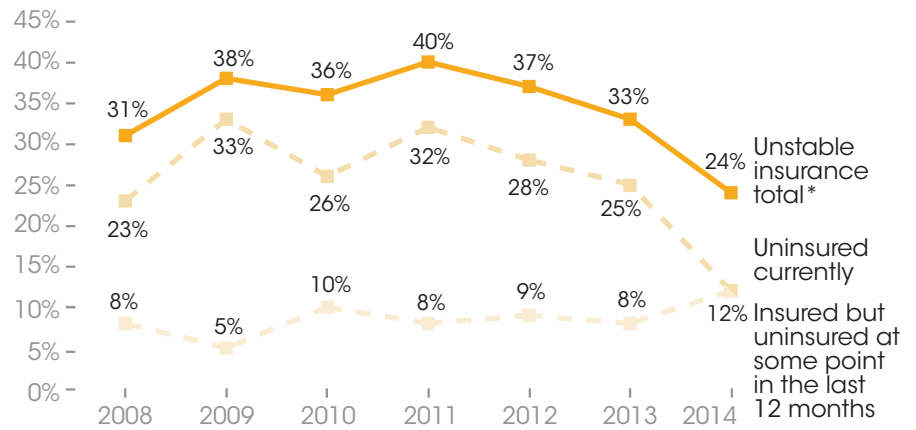
## Uninsured rates for lower-income adults decline

The rate of Kentucky adults living at or below 138% of the Federal Poverty Level (FPL)<sup>3</sup> who are uninsured has declined considerably. Only 1 in 10 adults living at or below 138% FPL (12%) reported being uninsured. This compares with 3 in 10 adults (34%) in 2013. In 2014, 2 in 10 adults living between 138% and 200% FPL (20%) and about 1 in 10 adults living above 200% FPL (9%) reported being uninsured.

<sup>2</sup> Governor Steve Beshear's Communication's Office. (2014). kynect Enrollment Continues to Climb in the New Year. [Press Release]. Retrieved from <http://migration.kentucky.gov/Newsroom/governor/20150107kynect.htm>

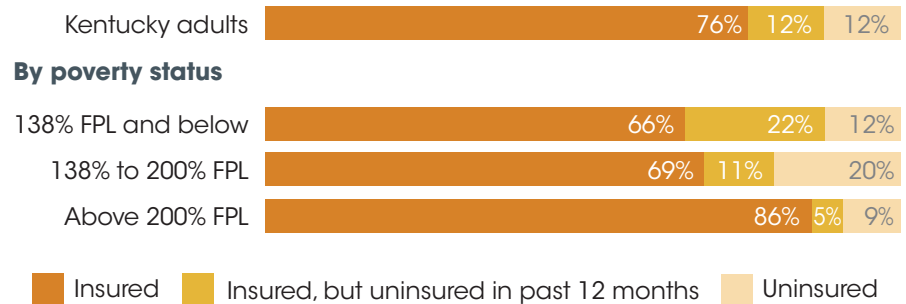
<sup>3</sup> In 2013, 138% of the Federal Poverty Level (FPL) was \$32,499 for a family of four.

## Percentage of Kentucky adults ages 18-64 with unstable insurance\*



\* Unstable insurance is defined as lacking insurance any time in the last 12 months, including currently.

## Percentage of Kentucky adults ages 18-64 with unstable insurance, 2014



Legend: Insured (dark orange), Insured, but uninsured in past 12 months (medium orange), Uninsured (light orange)



# Cost and source of care among Kentucky adults

Many obstacles can prevent access to healthcare. Being able to afford needed medical care and having access to a usual and appropriate<sup>1</sup> source of care are just two barriers that may prevent someone from receiving healthcare.

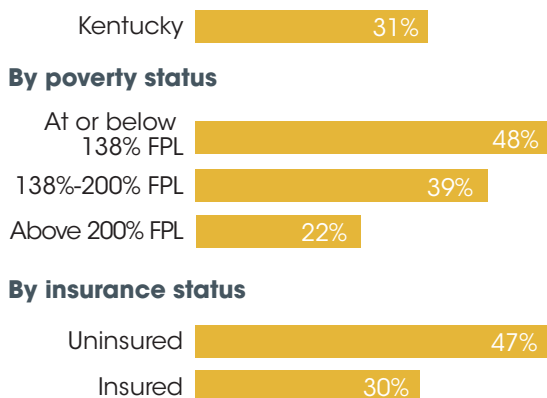
The 2014 **Kentucky Health Issues Poll (KHIP)** asked questions about the financial burden of healthcare costs and where Kentucky adults receive healthcare.

## Two in 10 households have forgone or put off care due to cost

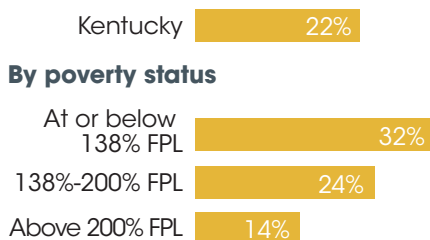
Some people may forgo or delay medical care because they can't afford it. Two in 10 Kentucky adults (22%) reported a time in the last 12 months when they or a member of their household needed medical care but did not get it or delayed getting it due to cost. This is much lower than in 2009, the last time this question was asked. That year, 3 in 10 adults (32%) reported forgoing or delaying medical care due to cost.

<sup>1</sup> For this analysis, private doctors' offices, community-based health clinics, public health clinics, clinics at retail stores, and hospital outpatient departments are considered usual and appropriate sources of healthcare.

**In the past 12 months, did you or another family member in your household have any problems paying medical bills?**  
(Graph shows only those who said yes.)



**In the past 12 months, was there a time when you or another member of your household needed medical care but did not get it, or delayed getting it because of the cost?**  
(Graph shows only those who said yes.)



Adults living at or below 138% of the Federal Poverty Level (FPL)<sup>2</sup> (32%) were more likely to report forgoing or delaying medical care

<sup>2</sup> In 2013, 138% of the Federal Poverty Level (FPL) was \$32,499 for a family of four, 200% FPL was \$47,100.

in the past year because of cost. This is significantly higher than adults living between 138% and 200% FPL (24%) and those living above 200% FPL (14%).

## Three in 10 adults had trouble paying medical bills

Three in 10 Kentucky adults (31%) said they had trouble paying medical bills in the past 12 months. Some groups were more likely to have trouble paying medical bills. Nearly 5 in 10 adults living at or below 138% FPL (48%) and nearly 5 in 10

**Continued on back**

uninsured adults (47%) reported trouble paying medical bills in the past 12 months.

## More than 7 in 10 have a usual and appropriate source of care

A usual and appropriate source of care provides more consistent care. This can help address health problems before they become more serious. More than 7 in 10 Kentucky adults (75%) said they have a usual and appropriate source of care. This compares with fewer than 1 in 10 (5%) who reported having an inappropriate source of care, such as an emergency room or urgent care center. The remaining 2 in 10 (21%) did not have a usual source of care. These percentages have remained relatively stable since 2009, the last time this question was asked.

Uninsured adults are significantly less likely to have a usual and appropriate source of care. About 5 in 10 uninsured Kentucky adults (51%) have a usual and appropriate source of care, compared with nearly 8 in 10 (77%) insured adults.

**When you are sick or need advice about your health, to which one of the following places do you usually go? (Percentages may not add to 100 because of rounding.)**

Kentucky  75% 5% 21%

### By insurance status

Insured  77% 4% 18%

Uninsured  51% 8% 41%

 Appropriate source\*  Inappropriate source\*\*  No usual place

\*Private doctors' offices, community-based health clinics, public health clinics, clinics at retail stores or hospital outpatient departments.

\*\*Hospital emergency room or urgent care center.





# Few use ehealth; most think they can find health charges

Healthcare reform and changes in the healthcare system are changing the way Kentucky adults receive care. Some of these changes are the result of ehealth, which is the intersection of health, healthcare, the Internet and other electronic technologies.

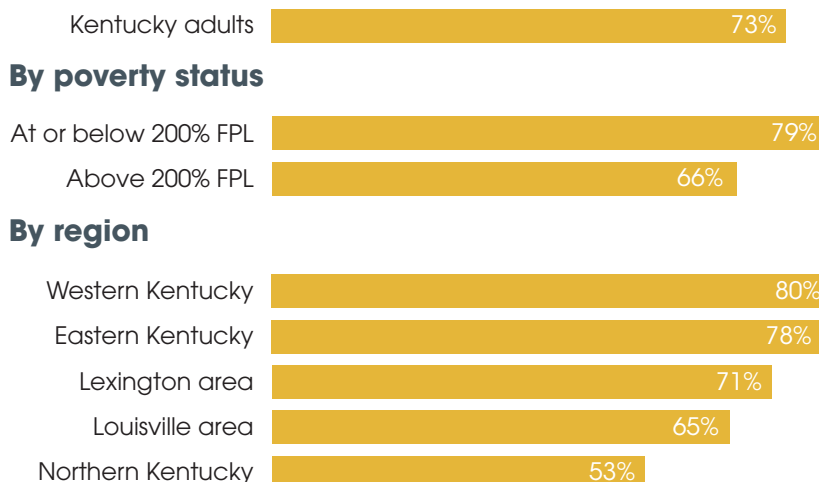
Nationally, nearly 9 in 10 adults in the United States said it is important to get their own medical information electronically.<sup>1</sup> The Kentucky Health Information Exchange (KHIE) is piloting myhealthnow.<sup>2</sup> This program allows some Kentucky patients to access their health records through a secure Internet portal. There is interest in electronic communication between patient and doctor because research has shown that patients are more engaged when they are provided more in-depth information about their health and they understand what their healthcare will cost.<sup>3</sup>

<sup>1</sup> U.S. National Institutes of Health, National Cancer Institute. (2013). [Interactive map showing percentage of respondents] Health Information National Trends Survey HINTS 4, Cycle 3. Retrieved from <http://hints.cancer.gov/>

<sup>2</sup> Kentucky Cabinet for Health and Family Services. (2014). KHIE Unveils myhealthnow website [Press release]. Retrieved from <http://chfs.ky.gov/news/myhealthnow.htm>

<sup>3</sup> Dentzer, S. (Ed.). (2013). New Era of Patient Engagement. *Health Affairs*, 32 (2).

## Kentucky adults who have had **no** electronic communication with their personal doctor in the past year\*



\*KHIP asked, "Thinking about your communications with your doctor during the past year, has your doctor communicated with you about your medical care using electronic means such as texting, email or through information made available on a web site?" Graph shows only those answering "no."

The 2014 **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults whether they communicate electronically with their doctor and about their confidence in accessing charges for healthcare procedures.

## Most have not communicated electronically with their doctor

About 7 in 10 Kentucky adults (73%) had not communicated

with their doctor using text, email or a web site during the past year. Experiences in Kentucky were similar to those nationally. The 2013 Health Information National Trends Survey<sup>4</sup> reported 7 in 10 U.S. adults (70%) have had no electronic communication with their doctor.

In Kentucky, adults of all ages reported similar rates of

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<sup>4</sup> Ibid.

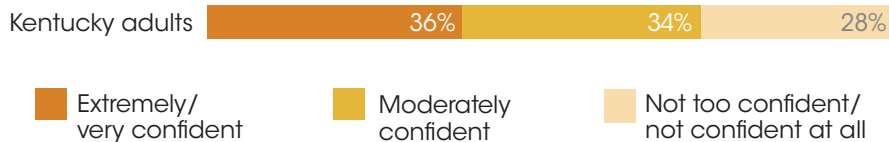
These findings unless otherwise noted are from the Kentucky Health Issues Poll, funded by the Foundation for a Healthy Kentucky and Interact for Health. The Kentucky Health Issues Poll was conducted Oct. 8-Nov. 6, 2014, by the Institute for Policy Research at the University of Cincinnati. A random sample of 1,597 adults from throughout Kentucky was interviewed by telephone. This included 1,086 landline interviews and 511 cell phone interviews with cell phone users. In 95 of 100 cases, the statewide estimates will be accurate to ± 2.5%. There are other sources of variation inherent in public opinion studies, such as non-response, question wording, or context effects that can introduce error or bias. For more information about the Kentucky Health Issues Poll, please visit [www.healthy-ky.org](http://www.healthy-ky.org) or [www.interactforhealth.org/kentucky-health-issues-poll](http://www.interactforhealth.org/kentucky-health-issues-poll).

electronic communication with their doctor. However, adults living below 200% of the Federal Poverty Level (FPL)<sup>5</sup> (79%) were much more likely than adults living above 200% FPL (66%) to report having no electronic communication with their doctor.

Rates also differed significantly by region. Eight in 10 adults in Western Kentucky (80%) and Eastern Kentucky (78%) reported no electronic communication with their doctor. About 7 in 10 adults had no electronic communication with their doctor in the Lexington (71%) and Louisville (65%) areas. Only 5 in 10 Northern Kentucky adults (53%) reported no electronic communication with their doctor.

<sup>5</sup> In 2013, 200% of the Federal Poverty Level (FPL) was \$47,100 for a family of four.

### How confident are you that you could get information about the amount different doctors or other healthcare providers in your area would charge you to provide a certain treatment or procedure if you needed it? (Percentages do not add to 100% because the response "don't know" is not included.)



### Most confident they can find information about healthcare charges

KHIP asked, "How confident are you that you could get information about the amount different doctors or other healthcare providers in your area would charge you to provide a certain treatment or procedure if you needed it?"

More than 1 in 3 Kentucky adults (36%) were extremely or very confident they could find healthcare charges associated with certain treatments or procedures. About 1 in 3 adults (34%) were moderately confident. Fewer than 1 in 3 adults (28%) were not too confident or not confident at all. Responses did not differ significantly by income, age or region.



# Kentuckians' views on soda and sugary drink policies

The February 2015 report by the Dietary Guidelines Advisory Committee summarizes the strong evidence that eating diets high in added sugars and drinking sugar-sweetened beverages increase a person's chance of developing diabetes.<sup>1</sup> Among U.S. adults, 63% report trying to avoid soda and 52% report trying to avoid sugar in their diets.<sup>2</sup> The 2014 **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults what they think about taxing and requiring health warning labels on soda and other sugar-sweetened beverages.

## Kentucky adults evenly divided on soda tax

KHIP asked Kentucky adults whether they favor or oppose taxing the sale of soda and other sugary drinks to pay for school nutrition and physical activity programs.<sup>3</sup> Kentucky adults

<sup>1</sup> U.S. Department of Agriculture and U.S. Department of Health and Human Services (USDA/HHS). Scientific Report of the 2015 Dietary Guidelines Advisory Committee, February 2015. Washington (DC): USDA. Retrieved from [www.health.gov/dietaryguidelines/2015-scientific-report/PDFs/Scientific-Report-of-the-2015-Dietary-Guidelines-Advisory-Committee.pdf](http://www.health.gov/dietaryguidelines/2015-scientific-report/PDFs/Scientific-Report-of-the-2015-Dietary-Guidelines-Advisory-Committee.pdf)

<sup>2</sup> Gallup. 2014. Americans More Likely to Avoid Drinking Soda than Before. Retrieved from [www.gallup.com/poll/174137/americans-likely-avoid-drinking-soda.aspx](http://www.gallup.com/poll/174137/americans-likely-avoid-drinking-soda.aspx)

**Would you favor or oppose taxing the sale of soda and other sugary drinks and using the money for school nutrition and physical activity programs in the schools?** (Percentages do not add to 100% because the responses "no opinion" and "don't know" are not included.)

### Kentucky adults



were nearly evenly divided on this question. Fifty-one percent favored and 47% opposed taxing soda and other sugary drinks to pay for school nutrition and physical activity programs.

Opinions differed among some groups. Women (55%) were more likely than men (46%) to favor a tax. African American adults (67%) were more likely than white adults (50%) to favor taxing soda and sugary drinks to pay for school nutrition and physical activity programs.

Louisville (60%) and Lexington (57%) area residents were more

<sup>3</sup> KHIP asked, "I am going to read some actions that government and communities can take to try to reduce diabetes among children and residents in your community. For each, please tell me whether you favor or oppose... taxing the sale of soda and other sugary drinks and using the money for school nutrition and physical activity programs in the schools?"

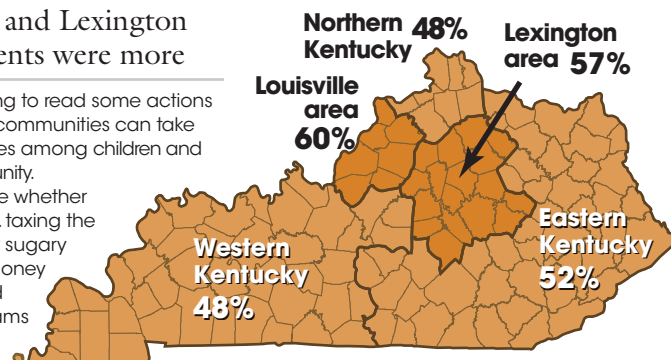
likely to favor taxing the sale of soda and sugary drinks. Residents of Western Kentucky (48%), Northern Kentucky (48%) and Eastern Kentucky (52%) were less likely to favor this type of tax.

## Most favor soda health warning labels

KHIP asked Kentucky adults whether they favor or oppose

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### Percentage of Kentucky adults who favor taxing the sale of soda and other sugary drinks



requiring health warning labels on soda and other sugary drinks. The warning label states, “Studies show that daily consumption of soda and other sugary drinks contributes to diabetes, obesity and tooth decay.”<sup>4</sup>

Seven in 10 Kentucky adults (71%) favored requiring this type of health warning label on soda and other sugary drinks.

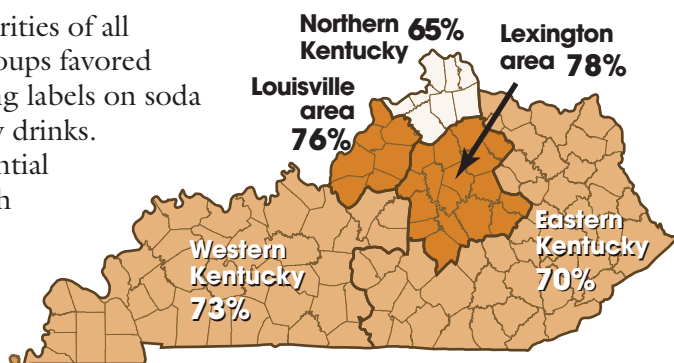
Substantial majorities of all demographic groups favored requiring warning labels on soda and other sugary drinks. Likewise, substantial majorities in each of Kentucky’s regions favored such health warning labels on soda and other sugary drinks.

**Do you favor or oppose requiring health warning labels on soda and other sugary drinks stating that “Studies show that daily consumption of soda and other sugary drinks contributes to diabetes, obesity and tooth decay”?** (Percentages do not add to 100% because the responses “no opinion” and “don’t know” are not included.)

### Kentucky adults



### Percentage of adults who favor requiring health warning labels on soda and other sugary drinks



<sup>4</sup> KHIP asked, “What about require [sic] health warning labels on soda and other sugary drinks stating that ‘Studies show that daily consumption of soda and other sugary drinks contributes to diabetes, obesity and tooth decay.’ Would you favor or oppose this?”





# Parents: more school lunches should be made from scratch

The Centers for Disease Control and Prevention (CDC) says that children and adolescents who eat a healthy diet have a reduced risk of heart disease, high blood pressure, diabetes, osteoporosis and several types of cancer.<sup>1</sup> A nutritious diet can help students maintain a healthy body weight and develop healthy behaviors.

Schools play a major role in feeding America's children. Approximately 95% of public schools participate in the National School Lunch Program. In 2013, 532,791 Kentucky children participated in the program.<sup>2</sup>

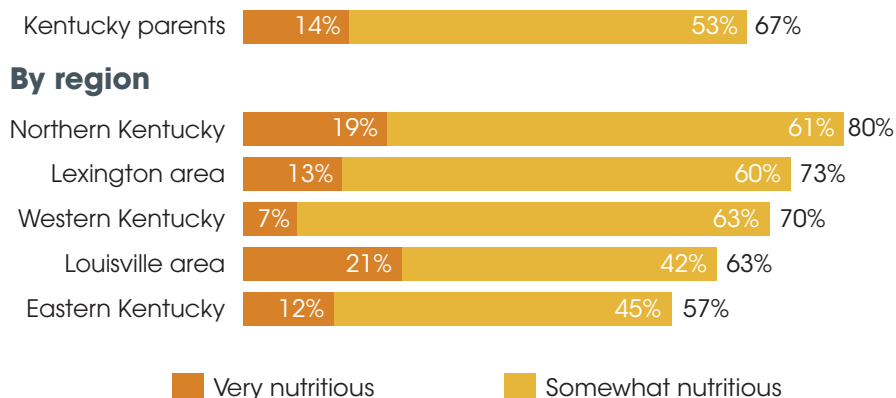
The 2014 **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults with children living in their household about school lunches. For this report, "parents" are adult respondents with school-aged (kindergarten through 12th grade) children living in their household.<sup>3</sup>

<sup>1</sup> [www.cdc.gov/healthyyouth/nutrition/facts.htm](http://www.cdc.gov/healthyyouth/nutrition/facts.htm)

<sup>2</sup> [www.fns.usda.gov/pd/child-nutrition-tables](http://www.fns.usda.gov/pd/child-nutrition-tables)

<sup>3</sup> Respondents were asked only about the school lunch of their oldest child younger than 18 who currently lives in their household and is enrolled in kindergarten through 12th grade. This is approximately 25% of all KHIP respondents. The margin of error for the "parents" subgroup is ±4.7.

## Percentage of parents who describe lunches served in their child's school as very nutritious or somewhat nutritious



## 6 in 10 Kentucky parents say school lunches are nutritious

More than 6 in 10 Kentucky parents (67%) said their oldest child's school lunch is very nutritious or somewhat nutritious.<sup>4</sup> Only 23% said their child's lunch is not that nutritious or not nutritious at all. However, responses varied across the state.

Parents in Northern Kentucky (80%), the Lexington area (73%) and Western Kentucky (70%) were more likely to say their child's lunch is very nutritious

<sup>4</sup> KHIP asked, "Thinking about the oldest child in your household ... generally speaking, how would you describe the lunches served in the school your oldest child attends?"

or somewhat nutritious. Parents in the Louisville area (63%) and Eastern Kentucky (57%) were less likely to say this.

## 7 in 10 think schools should offer more food made from scratch

Some schools serve fresh whole foods cooked from scratch. About 7 in 10 Kentucky parents (69%) said their child's school should offer more lunch options made from scratch.<sup>5</sup> Only 20% said that

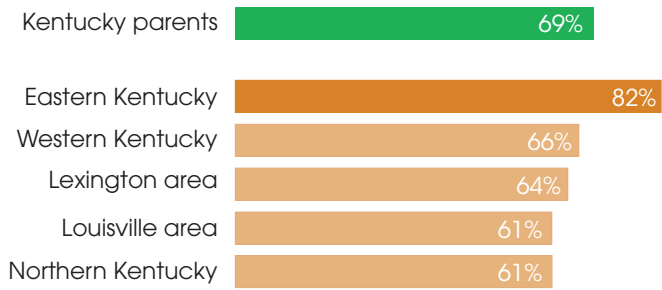
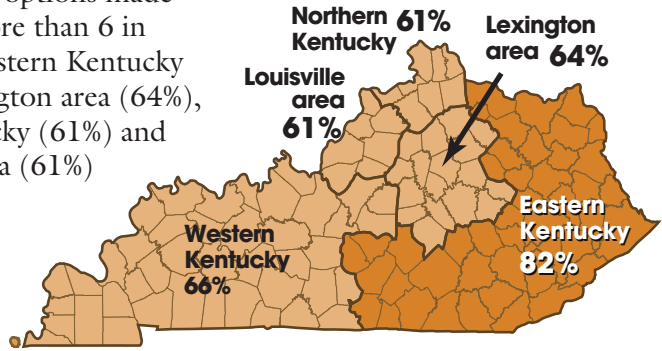
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<sup>5</sup> KHIP asked, "Do you think ... your oldest child's school offers enough lunch options made from scratch or your oldest child's school should offer more lunch options that are made from scratch?"

their child's school offers enough lunch options made from scratch.

Opinions about scratch-made lunch options varied across the state. A large majority of Eastern Kentucky parents (82%) said their child's school should offer more lunch options made from scratch. More than 6 in 10 parents in Western Kentucky (66%), the Lexington area (64%), Northern Kentucky (61%) and the Louisville area (61%) said their child's school should offer more lunch options made from scratch.

Percentage of parents who say their child's school should offer more lunch options made from scratch





# The link between poverty and health in Kentucky

There are many ways to assess a person's health. One way is to ask people to evaluate their own health. The **Kentucky Health Issues Poll (KHIP)** asks Kentucky adults "Would you say that, in general, your health is excellent, very good, good, fair or poor?" Research has found a powerful link between people's response to this question and the predicted length and quality of their lives.<sup>1</sup>

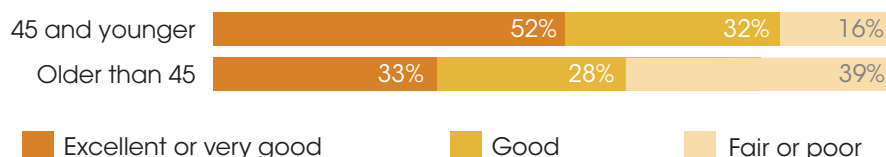
## Current health status of Kentucky adults

In 2014, 4 in 10 Kentucky adults (41%) reported that their health, in general, was "excellent" or "very good." About 3 in 10 Kentucky adults (29%) said their health was "good." Another 3 in 10 (29%) reported "fair" or "poor" health.

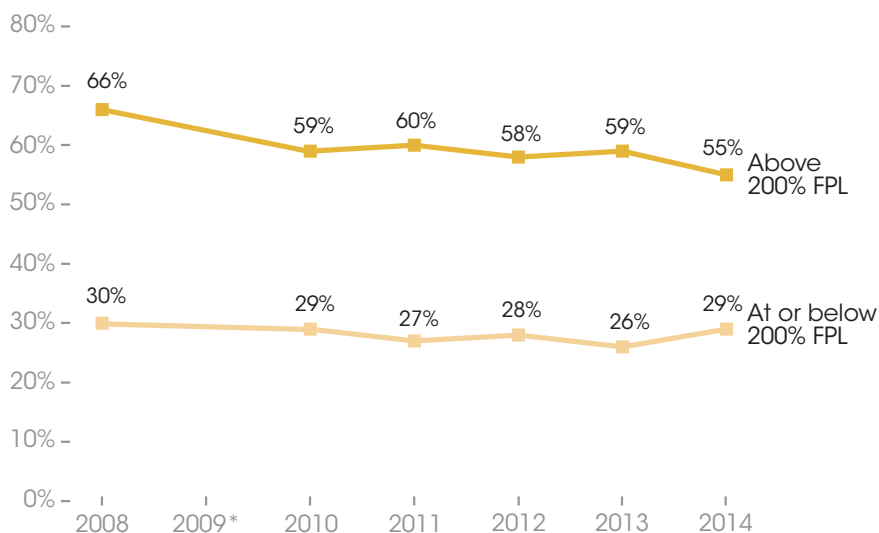
Adults 45 years old and younger were more likely than adults older than 45 to report "excellent" or "very good" health. About 5 in 10 adults age 45 and younger (52%) reported "excellent" or "very good" health. Only 3 in 10 adults older than 45 (33%) reported this.

<sup>1</sup> DeSalvo, K.B., et al. (2006) Clinical Review: Mortality Prediction with a Single General Self-Rated Health Question. *Journal of General Internal Medicine*. 21 (3): 267-275.

## Self-reported health status, by age



## Kentucky adults reporting "excellent" or "very good" health, by household income, 2008-2014\*



\* The question "Would you say that in general your health is excellent, very good, good, fair or poor?" was not asked on the 2009 KHIP.

## Better health reported by higher-income adults

In 2014, more than 5 in 10 Kentucky adults living above 200% of the Federal Poverty Level

(FPL<sup>2</sup>) (55%) said their health was "excellent" or "very good." Only 3 in 10 Kentucky adults living at or below 200% FPL (29%) said this.

Since KHIP began, Kentucky adults with higher incomes have

**Continued on back**

<sup>2</sup> In 2013, 200% of the Federal Poverty Level (FPL) was \$47,100 for a family of four.

consistently reported better health status than those with lower incomes.<sup>3</sup> About 6 in 10 Kentucky adults living above 200% FPL reported being in “excellent” or “very good” health each year since 2008. This compares with about 3 in 10 Kentucky adults living at or below 200% FPL in those years. However, the percentage of adults living above 200% FPL reporting “excellent” or “very good” health has declined significantly since 2008.

Overall, the percentage of Kentucky adults reporting their health as “excellent” or “very good” has dropped significantly from almost half (49%) in 2008 to only 4 in 10 (41%) in 2014 (not shown).

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<sup>3</sup> For information on income and health, please see the Centers for Disease Control and Prevention’s report, *CDC Health Disparities and Inequalities Report — United States, 2011*. Access at [www.cdc.gov/mmwr/preview/ind2011\\_su.html](http://www.cdc.gov/mmwr/preview/ind2011_su.html)



# Should smokers or the obese pay more for insurance?

The Patient Protection and Affordable Care Act (ACA) allows insurance companies to charge up to 50% more for adults who self-identify as smokers, as long as those insurance companies provide smoking cessation aids at no additional charge.<sup>1</sup> The 2014 **Kentucky Health Issues Poll (KHIP)** asked Kentucky adults their opinions about charging higher rates for people who smoke or are significantly overweight.<sup>2</sup>

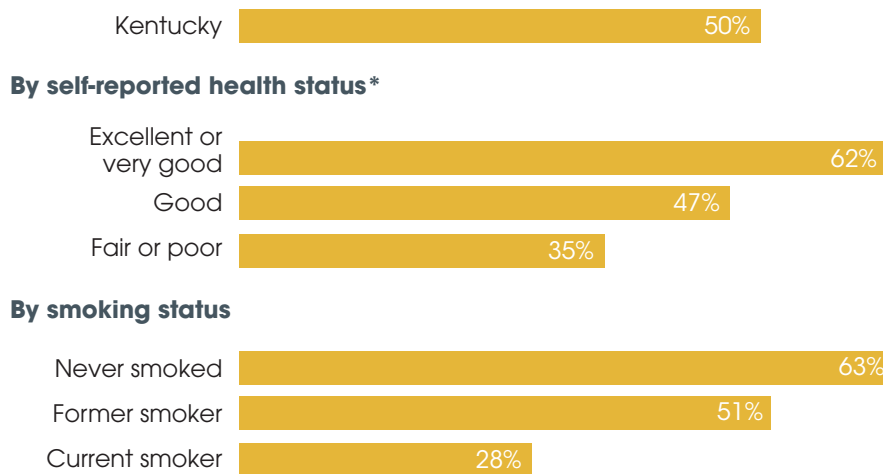
## 5 in 10 say higher insurance rates for smokers justified

Half of Kentucky adults (50%) said it would be justified to set higher insurance rates for people who smoke. Fewer than half (45%) said higher insurance rates for smokers would be unjustified. Fewer than 1 in 10 (5%) were undecided. Nationally, 58% of Americans said higher health

<sup>1</sup> Kaiser Family Foundation. "Summary of the Affordable Care Act." Retrieved Feb. 6, 2015, from: <http://kff.org/health-reform/fact-sheet/summary-of-the-affordable-care-act/>.

<sup>2</sup> KHIP asked, "Do you think it would be justified or unjustified to set higher insurance rates for people who smoke?" and "Do you think it would be justified or unjustified to set higher insurance rates for people who are significantly overweight?"

### Percentage of Kentucky adults who think it would be justified to set higher insurance rates for people who smoke



\*KHIP asks "Would you say that, in general, your health is excellent, very good, good, fair or poor?"

insurance rates for smokers would be justified.<sup>3</sup>

Six in 10 Kentucky adults with excellent or very good health (62%) said it would be justified to set higher insurance rates for people who smoke. Only 5 in 10 adults in good health (47%) and 3 in 10 adults in fair or poor health (35%) said this.

<sup>3</sup> Riffkin, Rebecca. (July 22, 2014) "Hiring Discrimination for Smokers, Obese Rejected in U.S." *Gallup*. Retrieved Mar. 25, 2015, from: [www.gallup.com/poll/174035/hiring-discrimination-smokers-obese-rejected.aspx](http://www.gallup.com/poll/174035/hiring-discrimination-smokers-obese-rejected.aspx).

A majority of former smokers (51%) and adults who have never smoked (63%) said higher rates for smokers would be justified, compared with only 3 in 10 current smokers (28%).

## 3 in 10 say higher rates for significantly overweight people justified

Three in 10 Kentucky adults (30%) said it would be justified to set higher insurance rates

**Continued on back**



for people who are significantly overweight. About 7 in 10 (67%) said higher insurance rates would be unjustified. Fewer than 1 in 10 (4%) were undecided. Nationally, 39% said higher rates for those who are significantly overweight would be justified.<sup>3</sup>

Unlike with smoking, no subgroup in Kentucky has a majority that thinks higher insurance rates for the significantly overweight would be justified.

Almost 4 in 10 adults with excellent or very good health (37%) said it would be justified to set higher insurance rates for those who are significantly overweight. Only about 3 in 10 adults with good health (28%) and 2 in 10 adults with fair or

### Percentage of Kentucky adults who think it would be justified to set higher insurance rates for people who are significantly overweight

Kentucky 30%

#### By self-reported health status\*



\*KHIP asks "Would you say that, in general, your health is excellent, very good, good, fair or poor?"

poor health (20%) said it would be justified.

### Insurance status does not influence views

Insurance status does not influence Kentucky adults' views about setting higher insurance rates for smokers and people who are significantly overweight.

About half of both insured (50%) and uninsured adults (47%) said it would be justified to set higher insurance rates for people who smoke. Similarly, about 3 in 10 insured (29%) and uninsured adults (32%) said it would be justified to set higher insurance rates for people who are significantly overweight.