KENTUCKY INJURY PREVENTION AND RESEARCH CENTER

Kentucky Resident Emergency Department Visits for Nonfatal Drug Overdoses, 2021–2025

Annual Report, Updated July 2026

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Suggested Citation

Steel, M., Mirzaian, M., Daniels, L. (2026). *Kentucky Resident Emergency Department Visits for Nonfatal Drug Overdoses, 2021–2025.* Kentucky Injury Prevention and Research Center.

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Contents

1 Introduction

1.1 About this Report

This report presents the burden of emergency department (ED) visits due to nonfatal drug overdoses among Kentucky residents, from 2021 to 2025. Events represent encounters of care and may be greater than the total number of Kentucky residents who visited an ED for a nonfatal drug overdose. Non-Kentucky residents visiting a Kentucky ED are not included in the counts of events. This report also does not include events for Kentucky residents who visited an ED located outside of the Commonwealth. These limitations result in a likely undercount of all drug overdose ED visits that occurred in Kentucky or among Kentucky residents.

Counts greater than zero but less than 11 and rates based on counts greater than zero but less than 11 were suppressed in accordance with state data management policy. Rates based on counts less than 20 are unstable and should be interpreted with caution. Population estimates are based on the U.S. Census Bureau's Annual County Resident Population Estimates by Age, Sex, Race, and Hispanic Origin. All rates presented in this report have been age-adjusted using the U.S. Standard 2000 population.

This project is supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as part of cooperative agreement 1 NU17CE010186 totaling $16,222,256 with 0% financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, CDC, HHS, or the U.S. government. For more information, please visit CDC.gov.

1.2 Definitions

The data sources for the Kentucky resident data in this report are the Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, both owned by the Office of Data Analytics with the Cabinet for Health and Family Services. Data are provisional and subject to change. The definitions used in this report conform to the standards set by the Council of State and Territorial Epidemiologists for identifying injury events using hospital records. The identification of a drug overdose ED visit was based on ICD-10-CM codes listed under any diagnosis category and did not rely solely on the primary diagnosis. Drug overdoses of all intents (i.e., unintentional, suicide, homicide, and undetermined) were included in this report, unless otherwise stated. Only events representing initial encounters were included in this report, as determined by a seventh character in the ICD-10-CM code of "A" or missing.

Overdose visits identified by specific drug types are not mutually exclusive and will not sum to equal the "all drugs" category. A drug overdose record that includes codes for more than one drug type will be counted under each category. The following ICD-10 codes were used to identify drug overdoses:

DRUG TYPE	ICD-10-CM CODE
All Drugs	T36.X–T50.X
Any Opioid	T40.0–T40.4, T40.6
Any Stimulant	T40.5, T43.6
Heroin	T40.1
Non-Heroin Opioid	T40.0, T40.2–T40.4, T40.6
Prescription Opioid	T40.0, T40.2–T40.3
Synthetic Opioid	T40.4
Fentanyl	T40.45
Unspecified Opioid	T40.6
Cocaine	T40.5
Other Psychostimulant	T43.6
Methamphetamine	T43.61
Benzodiazepine	T42.4
Cannabis	T40.7

The first full years for which the ICD-10 codes for fentanyl and methamphetamine were available were 2021 and 2023, respectively. Prior to the introduction of these specific codes, fentanyl involvement was captured by the more general "synthetic opioids" code and methamphetamine was captured by the more general "other psychostimulants" code. The transition to the use of the fentanyl code from the synthetic opioids code and to the use of the methamphetamine code from the other psychostimulants code is not yet well understood. Please interpret the corresponding data with this in mind.

1.3 Executive Summary

- In 2025, **11,554** Kentucky residents presented at an emergency department (ED) for nonfatal drug overdoses. This is **a decrease of 5.3%** from the 12,207 drug overdose ED visits in 2024.

- Among non-Hispanic White Kentucky residents, **9,638** visited an ED for a nonfatal drug overdose in 2025. This is **a decrease of 4.4%** from the 10,084 ED visits in 2024.

- Among non-Hispanic Black Kentucky residents, **1,370** visited an ED for a nonfatal drug overdose in 2025. This is **a decrease of 11.3%** from the 1,544 ED visits in 2024.

- In 2025, people aged **15 to 24 years old** experienced the highest proportion of nonfatal drug overdoses ED visits with **2,121**. This was **a decrease of 0.1%** from the 2,123 visits in 2024.

- Number of Kentucky resident nonfatal drug overdoses involving heroin in 2025: **482**
  - Percent change from 2024: **decrease of 29.7%**

- Number of Kentucky resident ED visits for nonfatal drug overdoses involving a non-heroin opioid in 2025: **2,034**
  - Percent change from 2024: **decrease of 23.4%**

- Number of Kentucky resident ED visits for nonfatal drug overdoses involving cocaine in 2025: **142**
  - Percent change from 2024: **decrease of 24.1%**

- Number of Kentucky resident ED visits for nonfatal drug overdoses involving other psychostimulants in 2025: **575**
  - Percent change from 2024: **decrease of 12.3%**

Table 1.3.1: Kentucky counties with the highest rates of emergency department visits for nonfatal drug overdose among Kentucky residents in 2025

	Kentucky County	Rate of Visits per 100,000 Residents	Number of Visits
1	Whitley	606.6	219
2	Clay	525.8	103
3	Perry	447.2	113
4	Grayson	403.7	104
5	Estill	396.4	54
6	Rowan	381.5	82
7	Montgomery	381.4	103
8	Jackson	379.7	47
9	Floyd	379.6	126
10	Magoffin	374.1	39

Counties with rates based on counts less than 11 have been excluded from this list. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

2 Total Nonfatal Drug Overdose Among Kentucky Residents

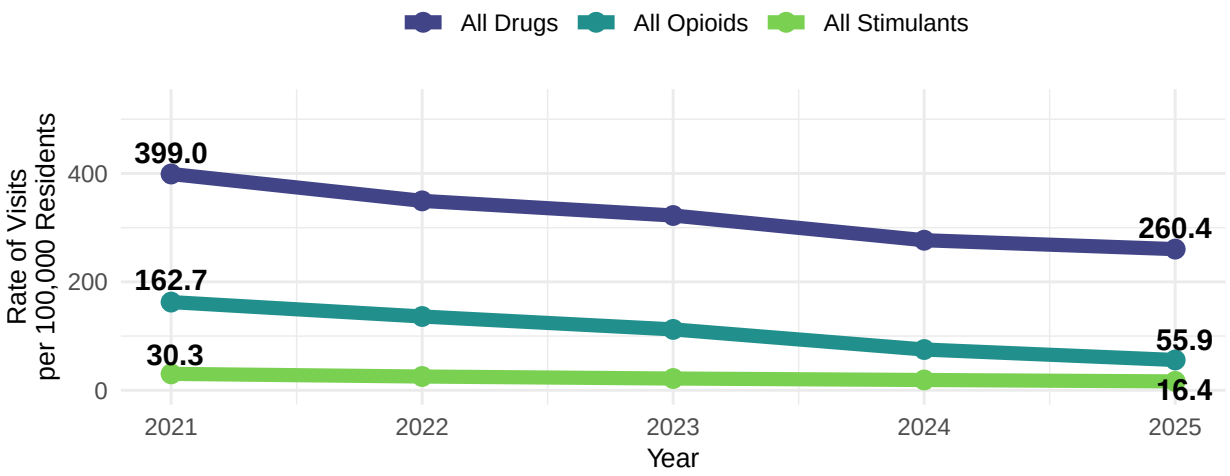
In 2025, a total of 11,554 visits were made by Kentucky residents to Kentucky EDs for nonfatal drug overdose. This is a decrease of 5.3% from the 12,207 nonfatal drug overdose visits among Kentucky residents in 2024. A total of 2,482 visits, or 21.5% of the total ED visits in 2025, involved at least one type of opioid, while 702 visits, or 6.1%, involved at least one type of stimulant. From 2024 to 2025, the total count of nonfatal opioid overdose ED visits among Kentucky residents decreased by 24.8%, from 3,302 visits in 2024 to 2,482 visits in 2025; the total count of nonfatal stimulant overdose ED visits among Kentucky residents decreased by 13.7%, from 813 visits in 2024 to 702 visits in 2025.

Table 2.1: Counts and age-adjusted rates of total emergency department visits for nonfatal drug overdose among Kentucky residents, 2021–2025

	Any Drug		Any Opioid		Any Stimulant	
Year	**Count**	**Rate**	**Count**	**Rate**	**Count**	**Rate**
2021	16,991	399.0	6,861	162.7	1,256	30.3
2022	14,998	349.4	5,789	136.1	1,068	25.4
2023	14,003	322.4	4,840	112.3	920	21.7
2024	12,207	276.8	3,302	75.2	813	19.0
2025	11,554	260.4	2,482	55.9	702	16.4

Rates are presented as the number of visits per 100,000 residents. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 2.1: Age-adjusted rates of emergency department visits for nonfatal drug overdose among Kentucky residents, 2021–2025



Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

3 Nonfatal Drug Overdose, by Sex

For the five-year period from 2021 to 2025, 50.4% of Kentucky resident nonfatal drug overdoses presenting at a Kentucky ED were men, who made up 62.8% of all nonfatal opioid overdose ED visits among Kentucky residents and 62.4% of all nonfatal stimulant overdose ED visits among Kentucky residents. The total count of nonfatal drug overdose ED visits among male Kentucky residents decreased by 9.3% (from 5,902 to 5,351) from 2024 to 2025. For this same time period, nonfatal opioid overdose ED visits among male Kentucky residents decreased by 28.2% (from 1,994 to 1,432), while nonfatal stimulant overdose ED visits among male Kentucky residents decreased by 15.4% (from 487 to 422).

From 2024 to 2025, the total count of nonfatal drug overdose ED visits among female Kentucky residents decreased by 1.6% (from 6,302 to 6,201). For that same time period, nonfatal opioid overdose ED visits among female Kentucky residents decreased by 19.6% (from 1,306 to 1,050), while nonfatal stimulant overdose ED visits among female Kentucky residents decreased by 14.1% (from 326 to 280).

Table 3.1: Counts and age-adjusted rates of emergency department visits for nonfatal drug overdose among Kentucky residents, by sex, 2021–2025

		Any Drug		Any Opioid		Any Stimulant	
Sex	**Year**	**Count**	**Rate**	**Count**	**Rate**	**Count**	**Rate**
Female	2021	8,105	378.7	2,470	115.7	478	23.4
	2022	7,199	333.5	2,018	93.4	368	17.9
	2023	6,784	310.1	1,795	81.4	336	16.1
	2024	6,302	283.9	1,306	58.0	326	15.5
	2025	6,201	278.2	1,050	45.8	280	13.3
Male	2021	8,883	419.1	4,388	208.7	778	37.1
	2022	7,798	365.2	3,770	177.8	699	32.7
	2023	7,212	334.8	3,041	142.3	583	27.1
	2024	5,902	270.1	1,994	92.0	487	22.6
	2025	5,351	243.5	1,432	65.8	422	19.4

Rates are presented as the number of visits per 100,000 residents. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 3.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving any drug, by sex, 2021–2025

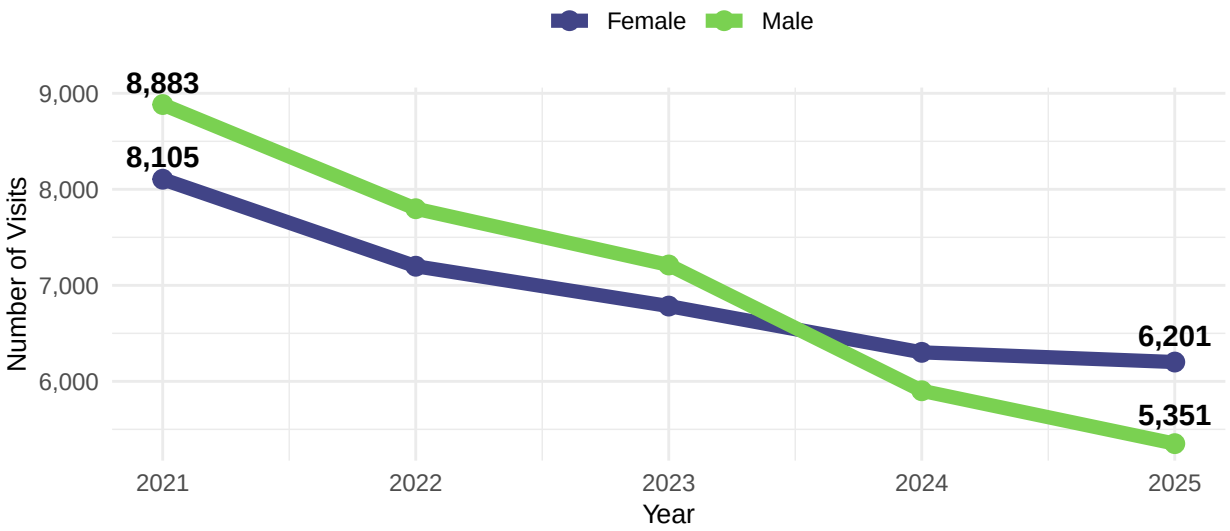


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Figure 3.2: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving any opioid, by sex, 2021–2025

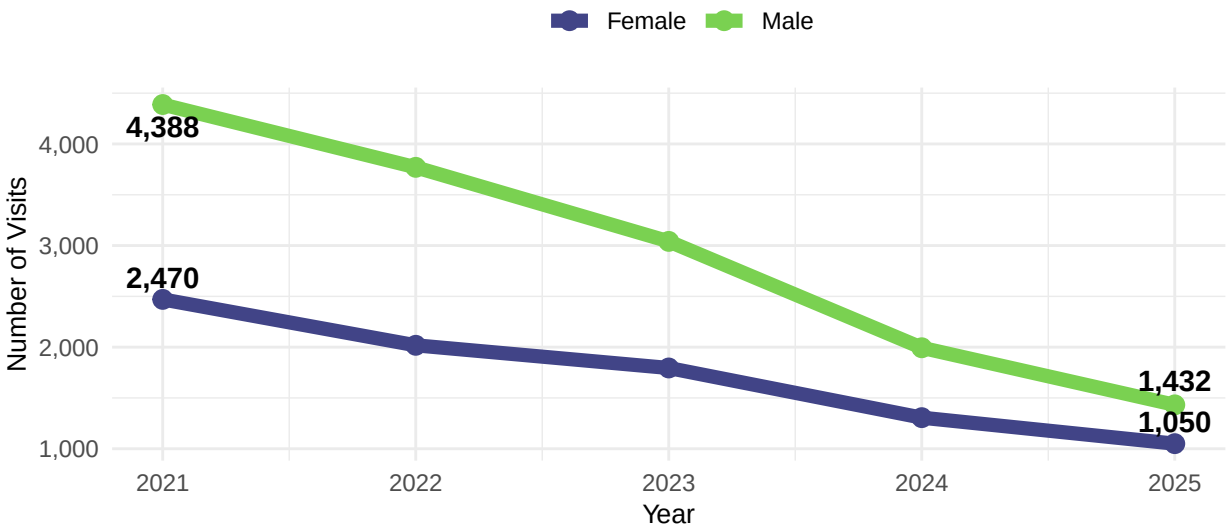

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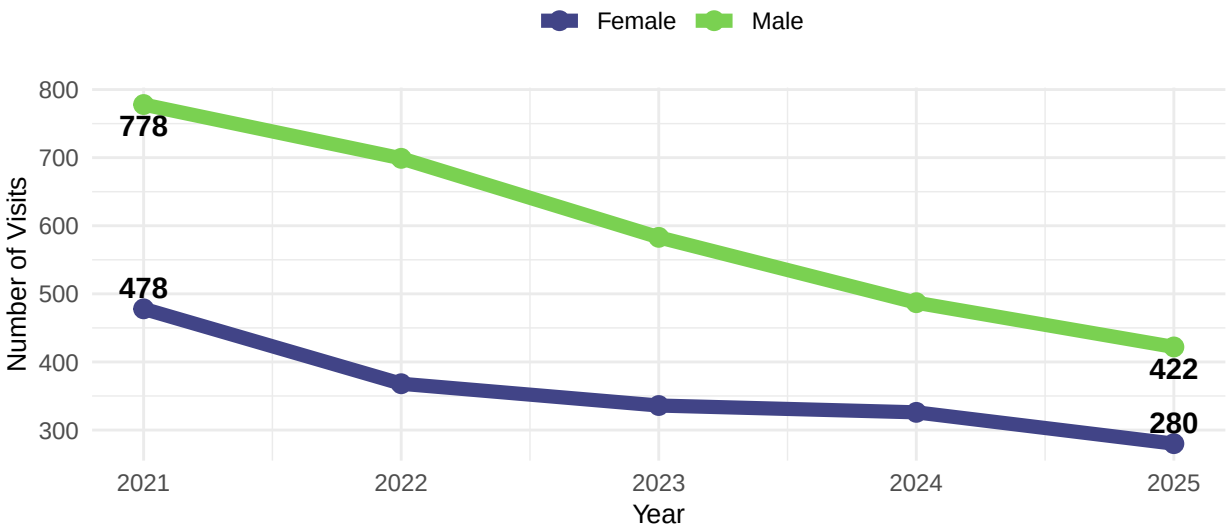
Figure 3.3: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving any stimulant, by sex, 2021–2025



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4 Nonfatal Drug Overdose, by Race and Ethnicity

The nonfatal drug overdose rate among non-Hispanic Black Kentucky residents surpassed that of non-Hispanic White Kentucky residents for the first time in 2020 and remained higher in 2025 (340.2 visits per 100,000 non-Hispanic Black residents vs. 271.6 visits per 100,000 non-Hispanic White residents). In 2025, non-Hispanic White patients accounted for 83.4% of Kentucky resident nonfatal drug overdose ED visits, while non-Hispanic Black patients accounted for 11.9% of visits. Non-Hispanic White patients made up 85.1% of all nonfatal opioid overdose ED visits among Kentucky residents (57.7 visits per 100,000 non-Hispanic White residents) and 83.5% of all nonfatal stimulant overdose ED visits among Kentucky residents (17.1 visits per 100,000 non-Hispanic White residents). The percentages of nonfatal opioid and stimulant overdose patients who were non-Hispanic Black were 12.3% (83.1 visits per 100,000 non-Hispanic Black residents) and 2.7% (24.2 visits per 100,000 non-Hispanic Black residents), respectively. Hispanic patients accounted for 2.5% of visits, with a rate of 127.6 visits per 100,000 Hispanic residents. The percentages of nonfatal opioid and stimulant overdose patients who were Hispanic were 1.5% (14.7 visits per 100,000 Hispanic residents) and 0.4% (6.6 visits per 100,000 Hispanic residents), respectively.

From 2024 to 2025, the total count of nonfatal drug overdose ED visits among non-Hispanic White Kentucky residents, decreased by 4.4% (10,084 to 9,638). For that same time period, nonfatal opioid overdose ED visits among non-Hispanic White Kentucky residents decreased by 24.6%, from 2,775 in 2024 to 2,092 in 2025, while nonfatal stimulant overdose ED visits among non-Hispanic White Kentucky residents decreased by 13.5%, from 667 in 2024 to 577 in 2025.

From 2024 to 2025, the total count of nonfatal drug overdose ED visits among non-Hispanic Black Kentucky residents decreased by 11.3% (1,544 to 1,370). For that same time period, nonfatal opioid overdose ED visits among non-Hispanic Black Kentucky residents decreased by 23%, from 430 in 2024 to 331 in 2025, while nonfatal stimulant overdose ED visits among non-Hispanic Black Kentucky residents decreased by 18.5%, from 119 in 2024 to 97 in 2025.

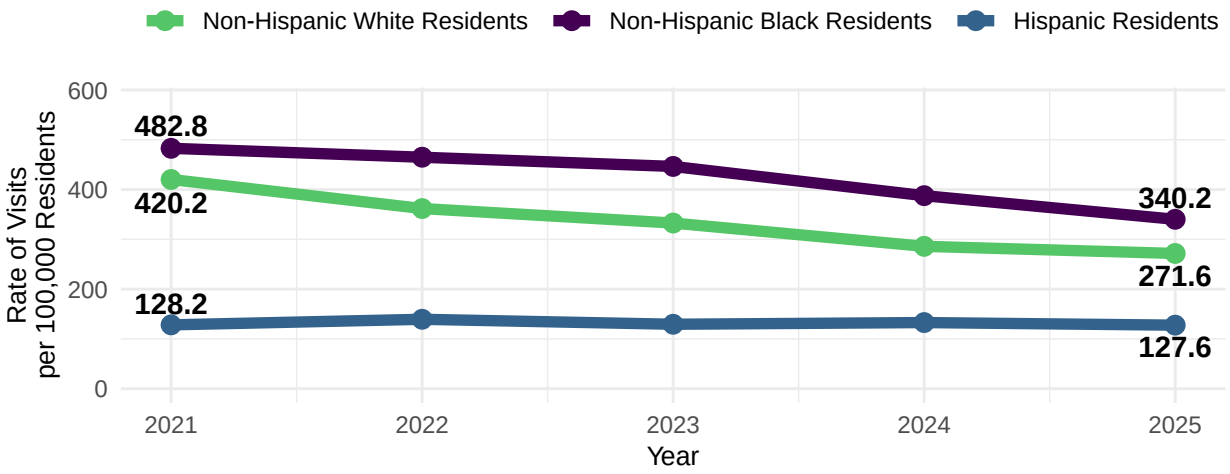
Among Hispanic Kentucky residents, the total count of nonfatal drug overdose ED visits decreased by 2.4%, from 373 in 2024 to 364 in 2025. For that same time period, nonfatal opioid overdose ED visits among Hispanic Kentucky residents decreased by 37.9%, from 58 in 2024 to 36 in 2025, while nonfatal stimulant overdose ED visits among Hispanic Kentucky residents increased by 26.7%, from 15 in 2024 to 19 in 2025

Table 4.1: Counts and age-adjusted rates of emergency department visits for nonfatal drug overdose among Kentucky residents, by race and ethnicity, 2021–2025

		Any Drug		Any Opioid		Any Stimulant	
Ethnicity/ Race	**Year**	**Count**	**Rate**	**Count**	**Rate**	**Count**	**Rate**
Non-Hispanic White	2021	14,629	420.2	6,043	174.4	1,069	31.7
	2022	12,639	361.8	4,857	139.4	903	26.6
	2023	11,681	332.7	4,031	114.7	759	22.4
	2024	10,085	285.9	2,775	78.1	667	19.6
	2025	9,641	271.6	2,092	57.7	577	17.1
Non-Hispanic Black	2021	1,830	482.8	666	176.6	160	43.0
	2022	1,782	464.9	778	203.8	129	33.3
	2023	1,745	446.4	668	172.5	134	34.5
	2024	1,544	387.7	430	108.1	119	30.4
	2025	1,370	340.2	331	83.1	97	24.2
Hispanic	2021	295	128.2	84	39.9	<11	*
	2022	335	139.4	77	35.5	24	10.3
	2023	346	129.4	85	34.7	**	**
	2024	373	132.8	58	21.6	15	6.2
	2025	364	127.6	36	14.7	**	**
Other	2021	237	135.0	68	42.8	**	**
	2022	242	132.8	77	46.1	12	7.1
	2023	231	119.0	56	31.5	<11	*
	2024	205	99.2	39	21.7	12	6.1
	2025	179	86.7	23	11.1	<11	*

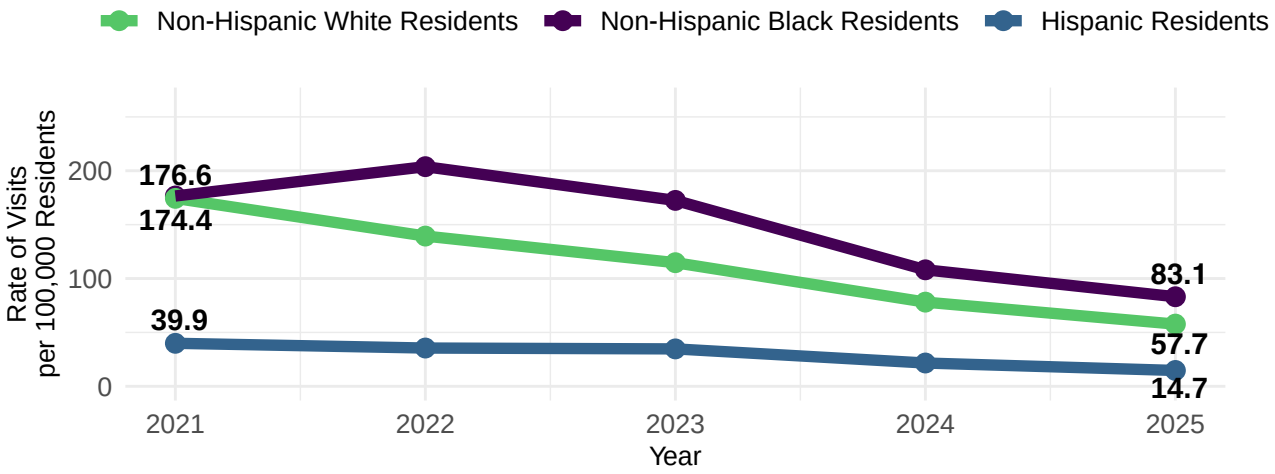
Counts greater than zero but less than 11 (<11) and rates based on counts less than 11 (*) have been suppressed in accordance with state data management policy.
For some years, the second lowest value has been censored to protect a suppressed count (**).
Rates are presented as the number of visits per 100,000 residents. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 4.1: Age-adjusted rates of Kentucky resident emergency department visits for nonfatal drug overdose involving any drug, by race and ethnicity, 2021–2025



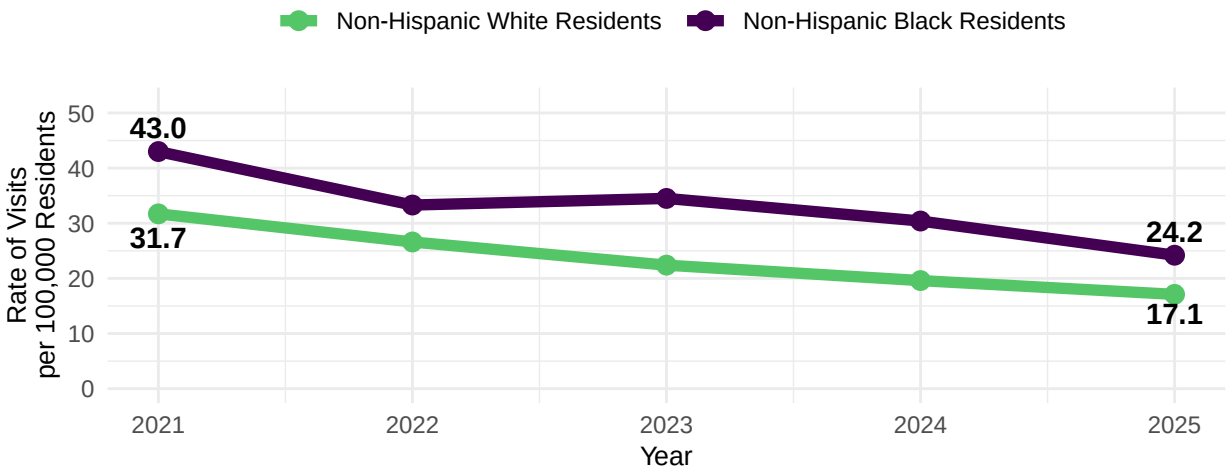
Patients of other races were excluded from this graph as their rates were not reportable for several years due to the low numbers of visits (n=1,094).
Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 4.2: Age-adjusted rates of Kentucky resident emergency department visits for nonfatal drug overdose involving any opioid, by race and ethnicity, 2021–2025



Patients of other races were excluded from this graph as their rates were not reportable for several years due to the low numbers of visits (n=263).
Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 4.3: Age-adjusted rates of Kentucky resident emergency department visits for nonfatal drug overdose involving any stimulant, by race and ethnicity, 2021–2025



Hispanic patients and patients of other races were excluded from this graph as their rates were not reportable for several years due to the low numbers of visits (n=145). Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

5 Nonfatal Drug Overdose, by Age Group

5.1 All Ages

In 2025, people aged 15 to 24 years old had the greatest number of visits due to nonfatal drug overdose, with 2,121 visits representing 18% of the total ED visits for nonfatal drug overdose among Kentucky residents. This is a decrease of 0% from the 2,123 ED visits for nonfatal drug overdose involving patients 15 to 24 years old in 2024. Those who were 35 to 44 years old made up the second-largest group represented among ED visits for nonfatal drug overdose, with 1,833 visits, also representing 16% of the total ED visits for nonfatal drug overdose among Kentucky residents in 2025.

Table 5.1.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose, by age group, 2021–2025

Age Group	2021	2022	2023	2024	2025
14 years or younger	1,579	1,547	1,548	1,681	1,745
15 to 24 years old	2,859	2,567	2,375	2,123	2,121
25 to 34 years old	3,763	3,057	2,649	2,025	1,671
35 to 44 years old	3,636	3,015	2,675	2,131	1,833
45 to 54 years old	2,232	1,987	1,935	1,581	1,462
55 to 64 years old	1,650	1,514	1,426	1,285	1,233
65 years or older	1,272	1,311	1,395	1,381	1,489

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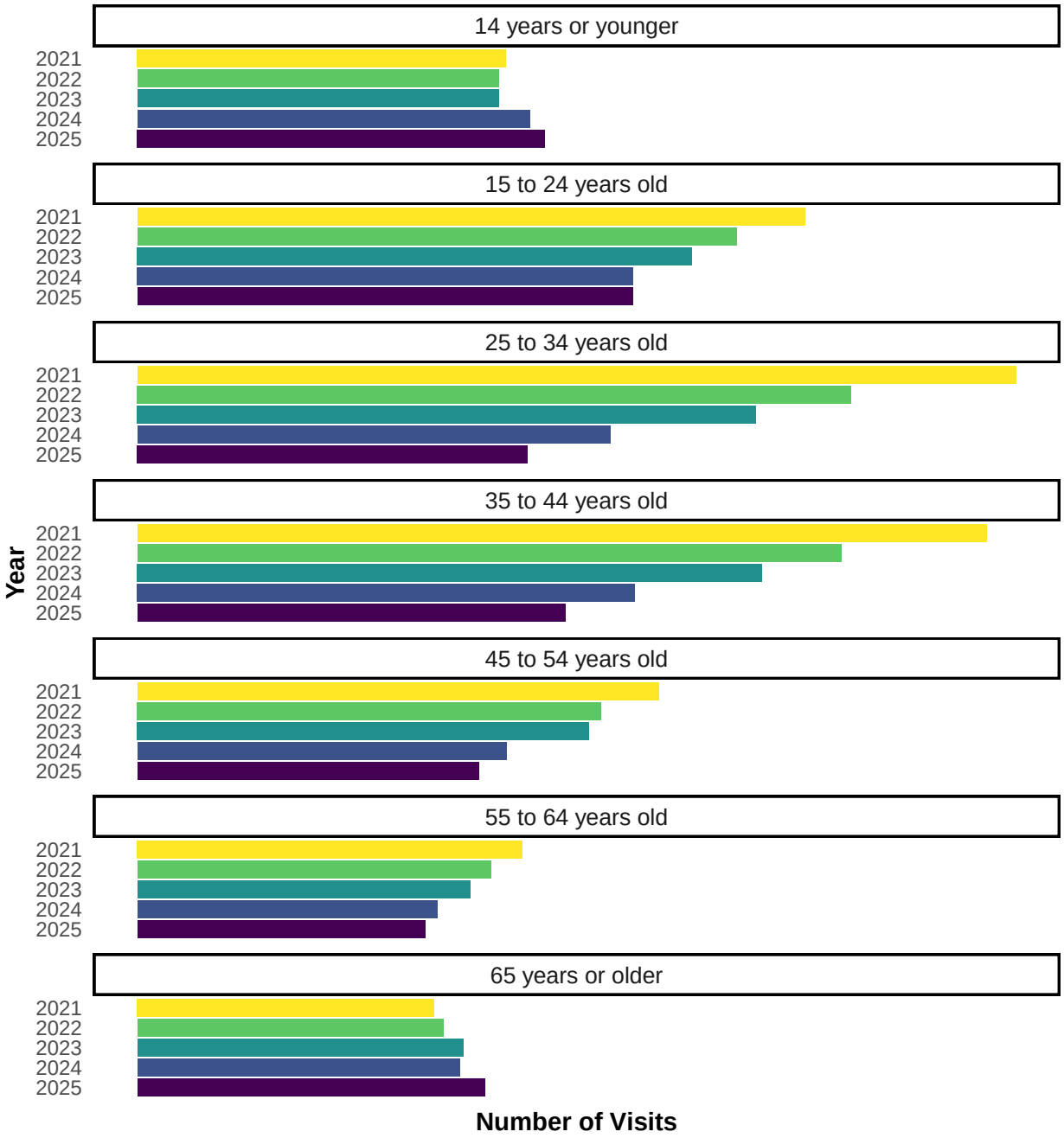
Figure 5.1.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose, by age group, 2021–2025



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5.2 Persons 17 and Younger

Of the 11,554 ED visits for nonfatal drug overdose among Kentucky residents in 2025, 2,586 (22.4%) involved a patient 17 years old or younger. This is an increase of 3.6% from the 2,496 visits involving a patient in that age range in 2024. Of all patients 17 years old or younger who visited an ED for nonfatal drug overdose in 2025, those who were 0 to 4 years old made up the highest portion of visits, with 915 (35.4% of visits in 2025 involving a person age 17 or younger). The age group with the second highest number of visits for nonfatal drug overdose were those 15 to 17 years old, with 841 (32.5% of the visits in 2025 involving a person age 17 or younger). Over the five-year period from 2021 to 2025, the highest portion of visits for nonfatal drug overdose among patients 17 years old or younger involved cannabis, with 796 visits, followed by other psychostimulants, with 467 visits. Synthetic opioids were involved in 223 visits.

Table 5.2.1: Counts of emergency department visits for nonfatal drug overdose among Kentucky residents aged 17 and younger by age group, 2021–2025

Age Group	2021	2022	2023	2024	2025
0 to 4 years old	780	721	792	886	915
5 to 9 years old	94	120	135	181	180
10 to 14 years old	705	706	621	614	650
15 to 17 years old	902	854	827	815	841

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 5.2.2: Counts of emergency department visits among Kentucky residents aged 17 and younger by age group and drug type, 2021–2025 combined years

Drug Type	0 to 4 years old	5 to 9 years old	10 to 14 years old	15 to 17 years old
Heroin	<11	0	<11	<11
Prescription Opioids	72	<11	19	93
Synthetic Opioids	155	12	<11	46
Unspecified Opioids	23	<11	<11	43
Cocaine	16	<11	<11	<11
Other Psychostimulants	131	41	141	154
Benzodiazepines	49	16	38	111
Cannabis	371	108	121	196

Counts greater than zero but less than 11 (<11) have been suppressed in accordance with state data management policy. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

6 Nonfatal Drug Overdose, by Drug Type

Drug type categories presented in this report are not mutually exclusive. If discharge records include codes for multiple drug types, each drug type will be counted as an overdose. For this reason, adding the counts for each drug type will not give the total number of overdoses involving those drugs.

6.1 All Drug Types

Of the 11,554 nonfatal drug overdose ED visits in 2025, heroin was listed as being involved in 482 visits (4.2%), a decrease of 29.7% from the 686 visits in 2024. An opioid other than heroin was listed as being involved in 2,034 (17.6%) of the nonfatal drug overdose ED visits in 2025, a decrease of 23.4% from the 2,656 visits in 2024. Nonfatal drug overdoses involving benzodiazapines increased by 7.6%, from 675 visits in 2024 to 726 in 2025, representing 6.3% of the nonfatal drug overdose ED visits in 2025. There were 142 ED visits for nonfatal drug overdoses involving cocaine in 2025, a decrease of 24.1% from the 187 visits in 2024. Finally, nonfatal drug overdoses involving psychostimulants other than cocaine decreased by 12.3%, from 656 visits in 2024 to 575 in 2025, representing 5% of the nonfatal drug overdose ED visits in 2025.

Beginning October 1, 2020, the ICD-10-CM coding system included a new, more specific code for drug overdoses involving fentanyl or an analog. This code is under the broader coding category of drug overdoses involving a synthetic opioid. The uptake of the use of the more specific fentanyl code may not be uniform across the jurisdiction and may be underutilized in the ED setting. Overdoses involving these drugs may be assigned the codes for heroin (T40.1) or other/unspecified opioids (T40.6). For this reason, examining the trends for all three opioid types likely will provide a more complete picture of the involvement of fentanyl in nonfatal drug overdoses presenting at Kentucky EDs.

Similarly for methamphetamine involvement in nonfatal drug overdose, the drug-specific code was added on October 1, 2022. Previously, methamphetamine-involvement was recorded under the broader ICD-10 code for drug overdose involving a psychostimulant other than cocaine (T43.6). Like the code for fentanyl, the use of the methamphetamine-specific form of T43.6 varies in the reliability of its application by jurisdiction and time.

The broader code T43.6 is already underutilized in ED setting data as fewer events with multiple substance involvement receive an ICD-10 code for more than one substance. Despite this limitation and due to the underutilization of the more specific code, the broader code for drug overdose involving other psychostimulants can be used as a reference measure for the involvement of methamphetamine across time.

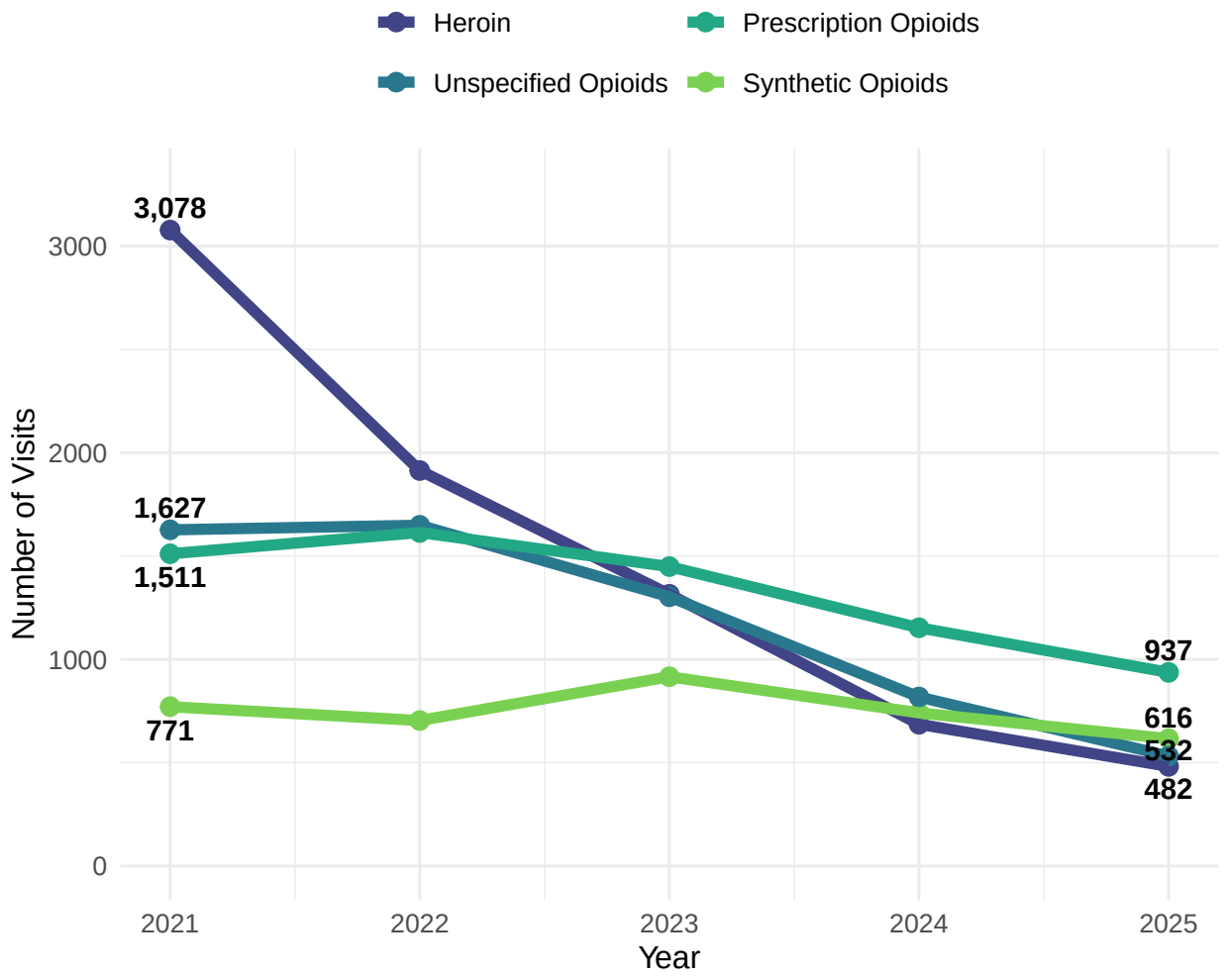
Table 6.1.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose, by drug type, 2021–2025

Drug Type	2021	2022	2023	2024	2025
Heroin	3,078	1,914	1,315	686	482
Prescription Opioids	1,511	1,614	1,449	1,153	937
Synthetic Opioids	771	704	916	741	616
Fentanyl	558	554	777	630	519
Unspecified Opioids	1,627	1,649	1,303	818	532
Cocaine	207	188	214	187	142
Other Psychostimulants	1,078	902	730	656	575
Methamphetamine[1]	0	80	332	300	232
Benzodiazepines	1,096	748	725	675	726
Cannabis	334	306	475	598	552

[1] The ICD-10 code specific to methamphetamine was introduced on October 1, 2022. Accordingly, 2023 is the earliest available annual count for nonfatal drug overdose involving methamphetamine.

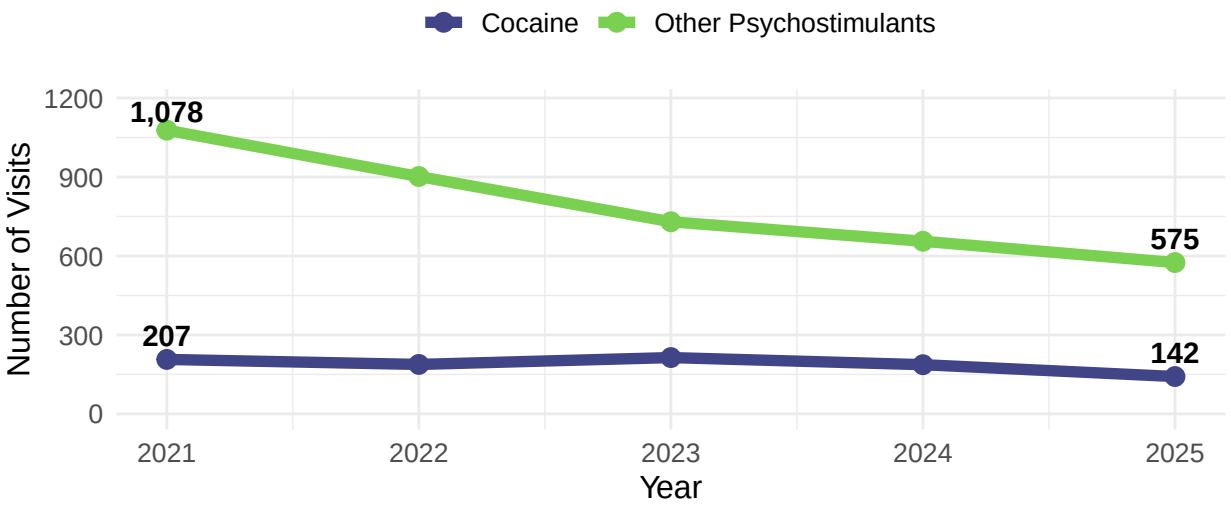
Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 6.1.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving an opioid, by opioid type, 2021–2025



Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 6.1.2: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving a stimulant, by stimulant type, 2021–2025



Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

6.2 Fentanyl

The code for a drug overdose involving fentanyl was included for 519 ED visits in 2025, a decrease of 17.6% from the 630 visits in 2024. This number accounted for 20.9% of the 2,482 visits involving any opioid overdose and 84.3% of the 616 visits involving a synthetic opioid overdose in 2025. For that same year, the average age for a person who visited an ED for a nonfatal fentanyl overdose was 38.6, which was higher than the average age among all patients visiting an ED for a nonfatal drug overdose of 37.2.

The Kentucky counties with the highest counts of residents visiting an ED for nonfatal fentanyl-involved overdose in 2025 were 1) Jefferson, with 163 visits; 2) Fayette, with 42 visits; 3) Kenton, with 33 visits; 4) Boone, with 17 visits; and 5) Pike, with 15 visits.

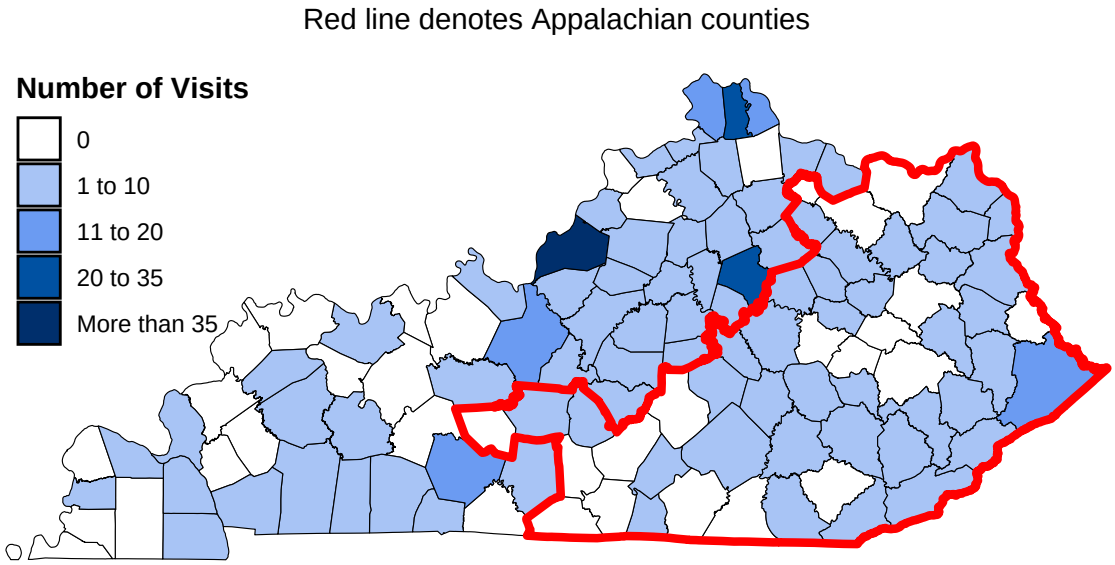
To view counts of nonfatal drug overdose involving fentanyl by Kentucky county of residence, please visit: https://kiprc.uky.edu/resources

Table 6.2.1: Counts of Kentucky resident emergency department visits for nonfatal overdose involving any synthetic opioids and fentanyl, 2021–2025

Drug Type	2021	2022	2023	2024	2025
Total Nonfatal Opioid Overdoses	6,861	5,789	4,840	3,302	2,482
Nonfatal Overdoses Involving a Synthetic Opioid	771	704	916	741	616
Nonfatal Overdoses Involving Fentanyl	558	554	777	630	519
Percentage of Nonfatal Opioid Overdoses that Involved Fentanyl	8.1%	9.6%	16.1%	19.1%	20.9%
Percentage of Nonfatal Synthetic Opioid Overdoses that Involved Fentanyl	72.4%	78.7%	84.8%	85.0%	84.3%

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 6.2.1: Map of nonfatal drug overdose emergency department visits involving fentanyl among Kentucky residents by county of residence, 2025



Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 6.2.2: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving fentanyl, by sex, 2021–2025

Sex	Year	Drug Overdose Visits Involving Fentanyl	Percentage of All Drug Overdose Visits that Involved Fentanyl
Female	2021	172	2.1%
	2022	141	2.0%
	2023	231	3.4%
	2024	226	3.6%
	2025	181	2.9%
Male	2021	385	4.3%
	2022	412	5.3%
	2023	543	7.5%
	2024	404	6.8%
	2025	338	6.3%

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 6.2.3: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving fentanyl, by race and ethnicity, 2021–2025

Ethnicity/Race	Year	Drug Overdose Visits Involving Fentanyl	Percentage of Total Drug Overdose Visits that Involved Fentanyl
Non-Hispanic White	2021	501	3.4%
	2022	468	3.7%
	2023	629	5.4%
	2024	524	5.2%
	2025	423	4.4%
Non-Hispanic Black	2021	43	2.3%
	2022	67	3.8%
	2023	118	6.8%
	2024	85	5.5%
	2025	80	5.8%
Hispanic	2021	<11	N/A
	2022	<11	N/A
	2023	*	N/A
	2024	*	N/A
	2025	<11	N/A
Other	2021	<11	N/A
	2022	<11	N/A
	2023	<11	N/A
	2024	<11	N/A
	2025	<11	N/A

Counts less than 11 (<11) have been suppressed in accordance with state data management policy.

For some years, the group with the second lowest count has been censored to protect a suppressed value, indicated by an asterisk (*).

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 6.2.4: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving fentanyl, by age group, 2021–2025

Age Group	Year	Drug Overdose Visits Involving Fentanyl	Percentage of Total Drug Overdose Visits that Involved Fentanyl
0 to 14	2021	<11	N/A
	2022	<11	N/A
	2023	11	0.7%
	2024	11	0.7%
	2025	<11	N/A
15 to 24	2021	67	2.3%
	2022	97	3.8%
	2023	120	5.1%
	2024	90	4.2%
	2025	64	3.0%
25 to 34	2021	183	4.9%
	2022	186	6.1%
	2023	220	8.3%
	2024	168	8.3%
	2025	143	8.6%
35 to 44	2021	158	4.3%
	2022	145	4.8%
	2023	196	7.3%
	2024	190	8.9%
	2025	160	8.7%
45 to 54	2021	77	3.4%
	2022	72	3.6%
	2023	130	6.7%
	2024	100	6.3%
	2025	82	5.6%
55 to 64	2021	50	3.0%
	2022	41	2.7%
	2023	73	5.1%
	2024	53	4.1%
	2025	50	4.1%
65+	2021	*	N/A
	2022	*	N/A
	2023	27	1.9%
	2024	18	1.3%
	2025	*	N/A

Counts greater than zero but less than 11 (<11) have been suppressed in accordance with state data management policy. For some years, the group with the second lowest count has been censored to protect a suppressed value, indicated by an asterisk (*).

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 6.2.5: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving fentanyl, by Appalachian region, 2021–2025

Region	Year	Drug Overdose Visits Involving Fentanyl	Percentage of Total Drug Overdose Visits that Involved Fentanyl
Appalachian[1]	2021	115	2.6%
	2022	84	2.2%
	2023	157	4.1%
	2024	128	3.9%
	2025	114	3.4%
Non-Appalachian	2021	443	3.5%
	2022	470	4.2%
	2023	620	6.1%
	2024	502	5.6%
	2025	405	4.9%

[1] The Appalachian region includes the Kentucky counties of Adair, Bath, Bell, Boyd, Breathitt, Carter, Casey, Clark, Clay, Clinton, Cumberland, Edmonson, Elliott, Estill, Fleming, Floyd, Garrard, Green, Greenup, Harlan, Hart, Jackson, Johnson, Knott, Knox, Laurel, Lawrence, Lee, Leslie, Letcher, Lewis, Lincoln, McCreary, Madison, Magoffin, Martin, Menifee, Metcalfe, Monroe, Montgomery, Morgan, Nicholas, Owsley, Perry, Pike, Powell, Pulaski, Robertson, Rockcastle, Rowan, Russell, Wayne, Whitley, and Wolfe.

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

6.3 Methamphetamine

The code for a drug overdose involving methamphetamine was included for 232 ED visits in 2025, a decrease of 22.7% from the 300 visits in 2024. This number accounted for 40.3% of the 575 visits involving a nonfatal overdose for a stimulant other than cocaine in 2025. For that same year, the average age for a person who visited an ED for a nonfatal methamphetamine overdose was 41.9, which was higher than the average age among all patients visiting an ED for a nonfatal drug overdose of 37.2.

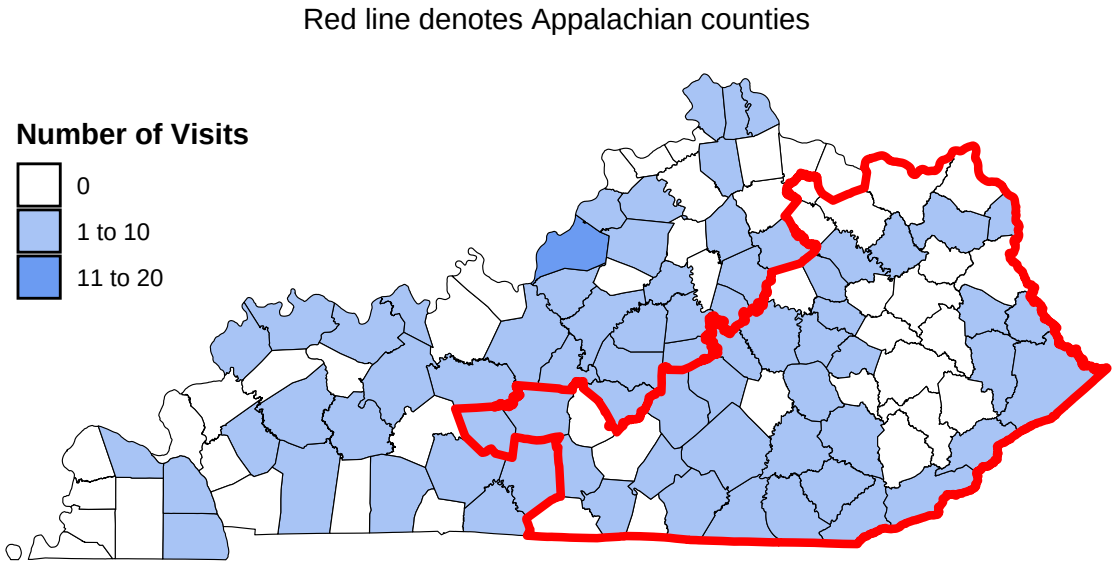
To view counts of nonfatal drug overdose involving methamphetamine by Kentucky county of residence, please visit: https://kiprc.uky.edu/resources

Table 6.3.1: Counts of Kentucky resident emergency department visits for nonfatal overdose involving psychostimulants and methamphetamine, 2023–2025

Drug Type	2023	2024	2025
Nonfatal Overdoses Involving a Psychostimulant	730	656	575
Nonfatal Overdoses Involving Methamphetamine	332	300	232
Percentage of Nonfatal Psychostimulant Overdoses that Involved Methamphetamine	45.5%	45.7%	40.3%

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 6.3.1: Map of nonfatal drug overdose emergency department visits involving methamphetamine among Kentucky residents by county of residence, 2025



Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 6.3.2: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving methamphetamine, by sex, 2023–2025

Sex	Year	Drug Overdose Visits Involving Methamphetamine	Percentage of Drug Overdose Visits that Involved Methamphetamine
Female	2023	111	1.6%
	2024	98	1.6%
	2025	81	1.3%
Male	2023	221	3.1%
	2024	202	3.4%
	2025	151	2.8%

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 6.3.3: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving methamphetamine, by race and ethnicity, 2023–2025

Ethnicity/Race	Year	Drug Overdose Visits Involving Methamphetamine	Percentage of Drug Overdose Visits that Involved Methamphetamine
Non-Hispanic White	2023	312	2.7%
	2024	275	2.7%
	2025	219	2.3%
Non-Hispanic Black	2023	18	1.0%
	2024	20	1.3%
	2025	<11	N/A
Hispanic	2023	<11	N/A
	2024	<11	N/A
	2025	<11	N/A
Other	2023	<11	N/A
	2024	<11	N/A
	2025	<11	N/A

Counts less than 11 (<11) have been suppressed in accordance with state data management policy.

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 6.3.4: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving methamphetamine, by age group, 2023–2025

Age Group	Year	Drug Overdose Visits Involving Methamphetamine	Percentage of Drug Overdose Visits that Involved Methamphetamine
0 to 14	2023	<11	N/A
	2024	<11	N/A
	2025	<11	N/A
15 to 24	2023	24	1.0%
	2024	18	0.8%
	2025	13	0.6%
25 to 34	2023	91	3.4%
	2024	66	3.3%
	2025	46	2.8%
35 to 44	2023	91	3.4%
	2024	97	4.6%
	2025	83	4.5%
45 to 54	2023	70	3.6%
	2024	65	4.1%
	2025	50	3.4%
55 to 64	2023	44	3.1%
	2024	36	2.8%
	2025	27	2.2%
65+	2023	<11	N/A
	2024	<11	N/A
	2025	<11	N/A

Counts greater than zero but less than 11 (<11) have been suppressed in accordance with state data management policy.

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Table 6.3.5: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving methamphetamine, by Appalachian region, 2023–2025

Region	Year	Drug Overdose Visits Involving Methamphetamine	Percentage of Drug Overdose Visits that Involved Methamphetamine
Appalachian[1]	2023	134	3.5%
	2024	111	3.4%
	2025	91	2.7%
Non-Appalachian	2023	198	1.9%
	2024	189	2.1%
	2025	141	1.7%

[1] The Appalachian region includes the Kentucky counties of Adair, Bath, Bell, Boyd, Breathitt, Carter, Casey, Clark, Clay, Clinton, Cumberland, Edmonson, Elliott, Estill, Fleming, Floyd, Garrard, Green, Greenup, Harlan, Hart, Jackson, Johnson, Knott, Knox, Laurel, Lawrence, Lee, Leslie, Letcher, Lewis, Lincoln, McCreary, Madison, Magoffin, Martin, Menifee, Metcalfe, Monroe, Montgomery, Morgan, Nicholas, Owsley, Perry, Pike, Powell, Pulaski, Robertson, Rockcastle, Rowan, Russell, Wayne, Whitley, and Wolfe.

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6.4 Polysubstance

Due to the difficulty of identifying the involvement of multiple drug types involved in overdoses in an ED setting, the number of overdoses involving more than one drug type from this data set likely results in an undercount.

In 2025, 24.7% of ED visits for nonfatal drug overdose that involved fentanyl also involved at least one additional type of drug. The most common drugs listed alongside fentanyl among those who visited a Kentucky ED in 2025 were 1) other psychostimulants, with 34 visits; 2) prescription opioids, with 28 visits; and 3) heroin, with 25 visits. Similarly, 30.6% of nonfatal drug overdoses that involved a psychostimulant other than cocaine also involved at least one additional type of drug, as did 46.5% of nonfatal drug overdoses that involved cocaine, 40.2% of nonfatal drug overdoses that involved benzodiazepines, and 24.3% of nonfatal drug overdoses that involved a prescription opioid.

Table 6.4.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose involving fentanyl and additional drugs, by drug type, 2021–2025

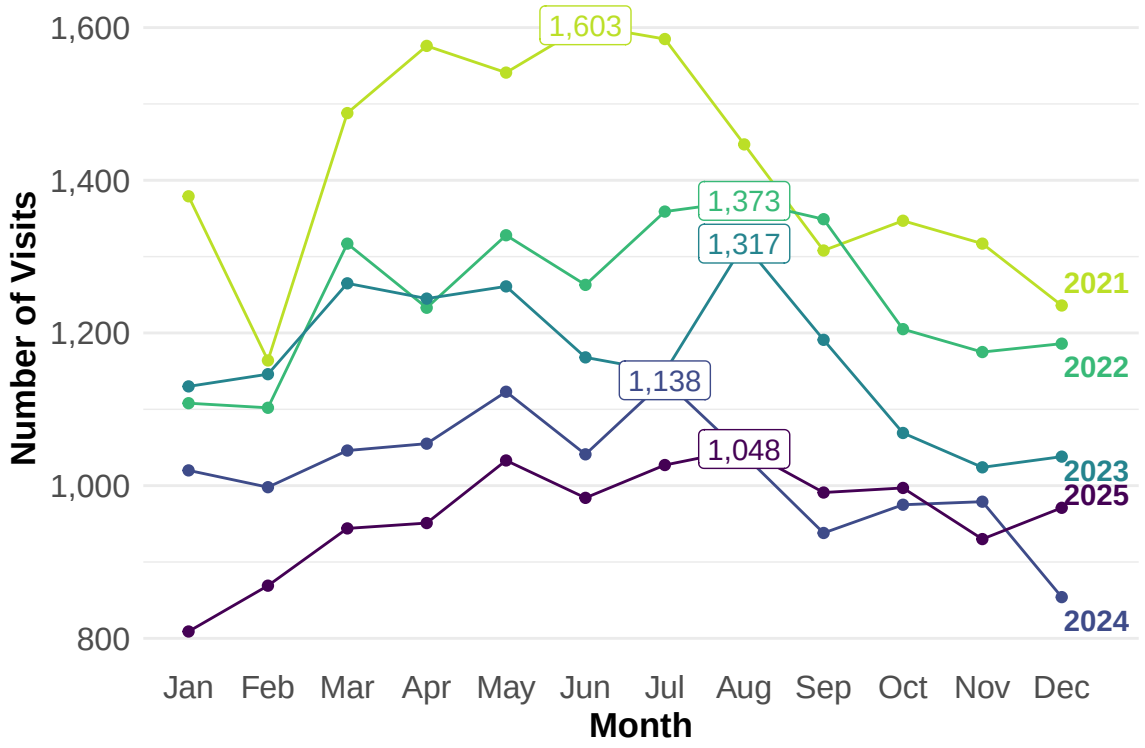
Drug Type(s)	2021	2022	2023	2024	2025
Total Fentanyl	558	554	777	630	519
Other Psychostimulants	49	45	59	59	34
Methamphetamine	0	<11	32	38	19
Cocaine	23	19	31	32	19
Prescription Opioids	23	20	47	28	28
Unspecified Opioids	<11	<11	12	<11	<11
Heroin	40	31	47	26	25
Benzodiazepines	36	20	22	30	25
Cannabis	<11	<11	20	14	15
Other Drugs	19	25	28	36	25
Fentanyl Only	396	419	574	466	391

Drug types are not mutually exclusive. A fentanyl overdose that involves multiple additional drugs will be counted in each relevant category. Counts greater than zero but less than 11 are suppressed in accordance with state data management policy. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

7 Counts of Nonfatal Drug Overdose, by Month

In 2025, August saw the highest number of visits for nonfatal drug overdose, with 1,048. This is a decrease of 7.9% from the highest monthly number of visits in 2024, which occurred in July with 1,138.

Figure 7.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose, by month, 2021–2025



Labeled values display the maximum monthly count for each year. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

8 Counts of Nonfatal Drug Overdose, by Payer Type

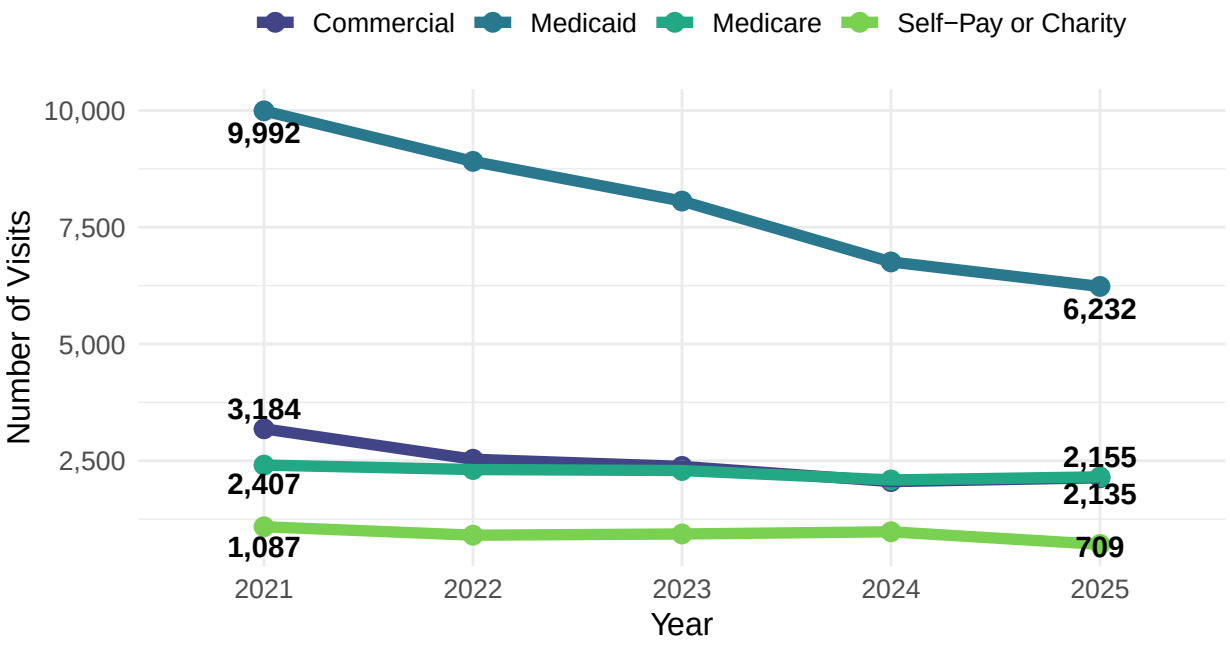
Medicare was the primary payer of 2,155 ED visits for nonfatal drug overdose in 2025, comprising 18.7% of the total nonfatal overdose visits for that year and representing an increase of 3.2% from the 2,089 visits in 2024. Medicaid was the primary payer of 6,232 ED visits for nonfatal drug overdose in 2025, comprising 53.9% of the total nonfatal overdose visits for that year and representing a decrease of 7.8% from the 6,757 visits in 2024. In 2025, commercial insurance providers were the primary payers of 2,135 ED visits for nonfatal drug overdose, comprising 18.5% of the total nonfatal overdose visits for that year and representing an increase of 3.9% from the 2,054 visits in 2024.

Table 8.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose, by payer type, 2021–2025

Payer Type	2021	2022	2023	2024	2025
Commercial	3,184	2,532	2,379	2,054	2,135
Medicaid	9,992	8,910	8,060	6,757	6,232
Medicare	2,407	2,312	2,291	2,089	2,155
Self-Pay or Charity	1,087	906	932	979	709
Other	321	338	341	328	323

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 8.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose, by primary payer type, 2021–2025



Visits with a primary payer from other categories have been excluded in this analysis (n=5). Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

9 Nonfatal Drug Overdose, by Intention

Consistent with previous years, the majority of ED visits for nonfatal drug overdose in 2025 were unintentional, with 7,673 or 65.4% of all nonfatal overdose ED visits that year. Self-harm was the stated intention for 3,534 (30.1%) of the ED visits for nonfatal drug overdoses in 2025, a 2.7% increase from the 3,442 in 2024.

Table 9.1: Counts of Kentucky resident emergency department visits for nonfatal drug overdose, by intention, 2021–2025

Intention	2021	2022	2023	2024	2025
Unintentional	12,586	10,835	10,076	8,332	7,673
Self-Harm	3,903	3,714	3,451	3,442	3,534
Assault	31	20	23	11	14
Undetermined Intent	547	500	640	623	507

Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

10 Nonfatal Drug Overdose by Pregnancy Status

Of the 6,201 visits to a Kentucky ED by female patients of childbearing age (between 12 and 52 years) for nonfatal drug overdose in 2025, a code indicating pregnancy was included for 61 (1%) visits. This is an increase of 22% from the 50 nonfatal drug overdose visits with pregnancy indicated in 2024. Out of the visits where pregnancy was indicated in 2025, an opioid was involved in 21.3% of the visits.

Table 10.1: Counts of female Kentucky resident emergency department visits for nonfatal drug overdose by pregnancy status, 2021–2025

Pregnancy Status	2021	2022	2023	2024	2025
Not Pregnant	6,112	5,292	4,826	4,285	4,071
Pregnant	55	52	49	50	61

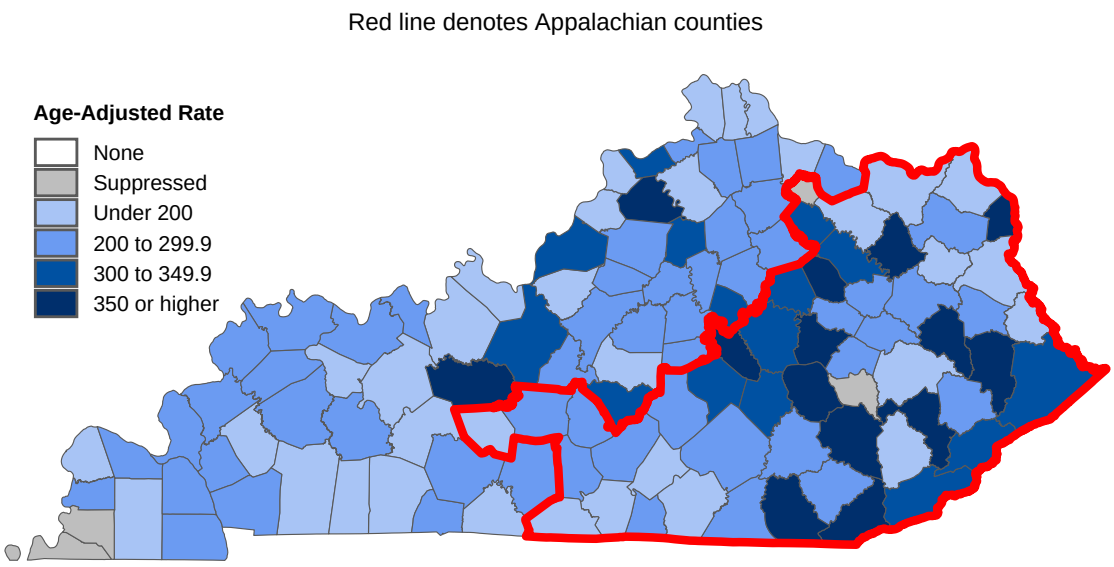
The counts in this table are limited to female patients between the ages of 12 and 52. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

11 Nonfatal Drug Overdose, by County

To view the table of ED visits for nonfatal drug overdose by drug type and county of residence, please visit: https://kiprc.uky.edu/resources.

11.1 County Maps

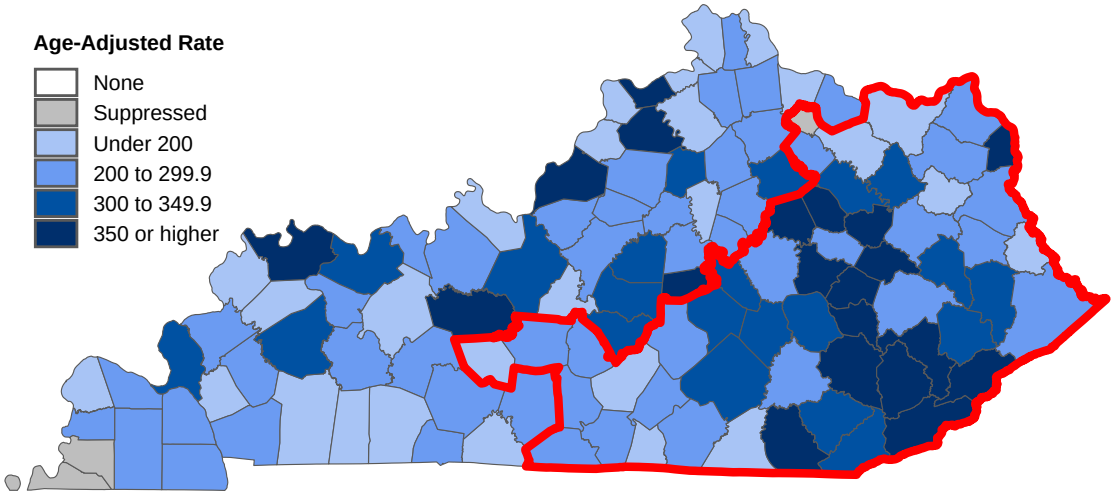
Figure 11.1.1: Age-adjusted rates of emergency department visits for nonfatal drug overdose, by Kentucky county of residence, 2025



Rates are presented as the number of visits per 100,000 population.
Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services.
Data extracted July 2026. Data are provisional and subject to change.

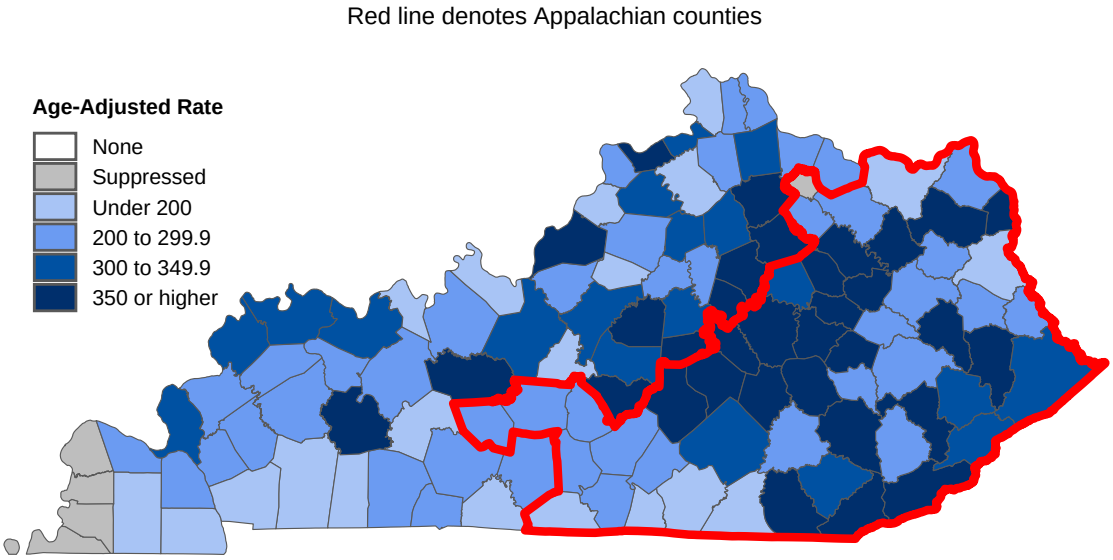
Figure 11.1.2: Age-adjusted rates of emergency department visits for nonfatal drug overdose, by Kentucky county of residence, 2024

Red line denotes Appalachian counties



Rates are presented as the number of visits per 100,000 population.
Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services.
Data extracted July 2026. Data are provisional and subject to change.

Figure 11.1.3: Age-adjusted rates of emergency department visits for nonfatal drug overdose, by Kentucky county of residence, 2023



Rates are presented as the number of visits per 100,000 population.
Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services.
Data extracted July 2026. Data are provisional and subject to change.

Figure 11.1.4: Age-adjusted rates of emergency department visits for nonfatal drug overdose, by Kentucky county of residence, 2022

Red line denotes Appalachian counties

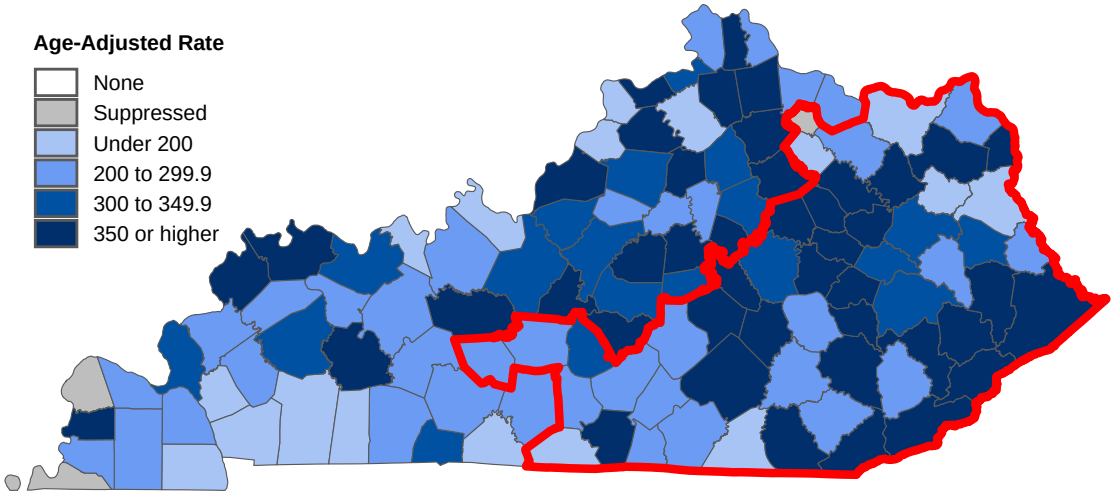


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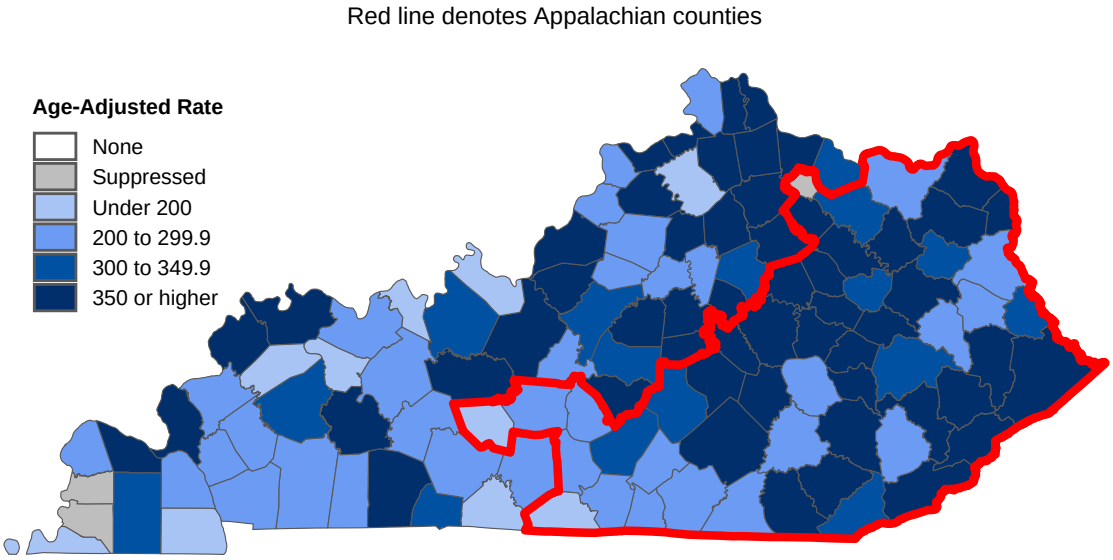
Figure 11.1.5: Age-adjusted rates of emergency department visits for nonfatal drug overdose, by Kentucky county of residence, 2021



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11.2 Appalachian Counties

In 2025, counties in the Appalachian region of Kentucky experienced a rate of 300.6 nonfatal drug overdose ED visits per 100,000 residents. This is an increase from the 298.3 visits per 100,000 residents in 2024 and higher than the rate for non-Appalachian counties in 2025 of 247.0 visits per 100,000 residents. Of the nonfatal drug overdoses that occurred among residents of Appalachian counties in 2025, 625 (18.8%) involved at least one type of opioid and 209 (6.3%) involved at least one type of stimulant. Of the nonfatal drug overdoses that occurred among residents of non-Appalachian counties in 2025, 1,857 (22.6%) involved at least one type of opioid and 493 (6%) involved at least one type of stimulant.

Note: The Appalachian region in Kentucky includes the counties of Adair, Bath, Bell, Boyd, Breathitt, Carter, Casey, Clark, Clay, Clinton, Cumberland, Edmonson, Elliott, Estill, Fleming, Floyd, Garrard, Green, Greenup, Harlan, Hart, Jackson, Johnson, Knott, Knox, Laurel, Lawrence, Lee, Leslie, Letcher, Lewis, Lincoln, McCreary, Madison, Magoffin, Martin, Menifee, Metcalfe, Monroe, Montgomery, Morgan, Nicholas, Owsley, Perry, Pike, Powell, Pulaski, Robertson, Rockcastle, Rowan, Russell, Wayne, Whitley, and Wolfe.

Table 11.2.1: Counts and rates of Kentucky resident emergency department visits for nonfatal drug overdose, by Appalachian region, 2021–2025

		All Drugs		All Opioids		All Stimulants	
Region	**Year**	**Count**	**Rate**	**Count**	**Rate**	**Count**	**Rate**
Appalachian[1]	2021	4,463	417.9	1,542	145.0	424	41.5
	2022	3,786	347.9	1,185	109.5	333	32.3
	2023	3,824	351.7	1,136	105.9	286	27.2
	2024	3,286	298.3	694	63.3	245	23.9
	2025	3,331	300.6	625	56.0	209	19.4
Non-Appalachian	2021	12,528	392.5	5,319	168.5	832	26.6
	2022	11,212	349.4	4,604	144.7	735	23.2
	2023	10,179	312.5	3,704	114.4	634	19.8
	2024	8,921	269.6	2,608	79.1	568	17.5
	2025	8,223	247.0	1,857	55.7	493	15.4

[1] Inclusion in the Appalachian region is based on the decedent's county of residence in the Kentucky counties of Adair, Bath, Bell, Boyd, Breathitt, Carter, Casey, Clark, Clay, Clinton, Cumberland, Edmonson, Elliott, Estill, Fleming, Floyd, Garrard, Green, Greenup, Harlan, Hart, Jackson, Johnson, Knott, Knox, Laurel, Lawrence, Lee, Leslie, Letcher, Lewis, Lincoln, McCreary, Madison, Magoffin, Martin, Menifee, Metcalfe, Monroe, Montgomery, Morgan, Nicholas, Owsley, Perry, Pike, Powell, Pulaski, Robertson, Rockcastle, Rowan, Russell, Wayne, Whitley, or Wolfe.

Rates are presented as the number of visits per 100,000 population. Produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. Data sources: Kentucky Outpatient Services Database Files and Inpatient Hospitalization Claims Files, Office of Data Analytics, Cabinet for Health and Family Services. Data extracted July 2026. Data are provisional and subject to change.

Figure 11.2.1: Rates of Kentucky resident emergency department visits for nonfatal drug overdose, by Appalachian region, 2021–2025

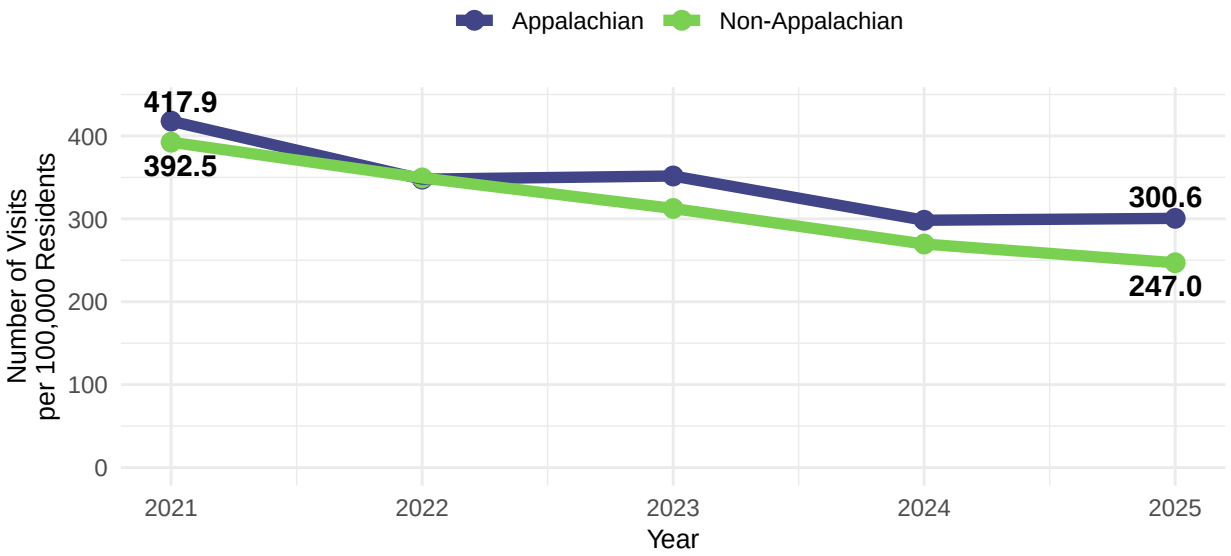

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Figure 11.2.2: Rates of Kentucky resident emergency department visits for nonfatal opioid overdose, by Appalachian region, 2021–2025

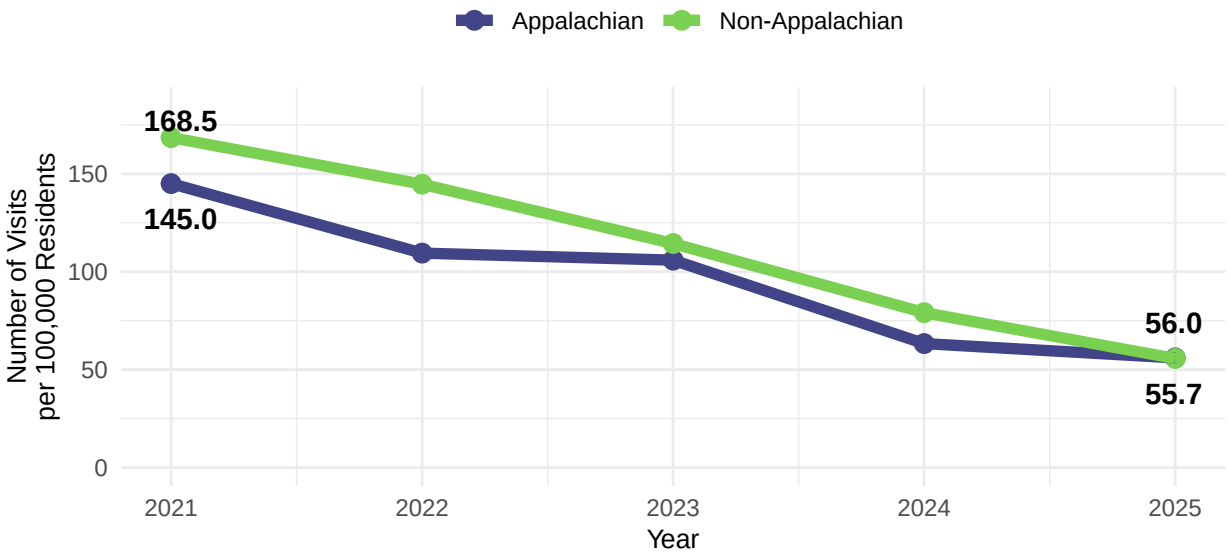

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Figure 11.2.3: Rates of Kentucky resident emergency department visits for nonfatal stimulant overdose, by Appalachian region, 2021–2025

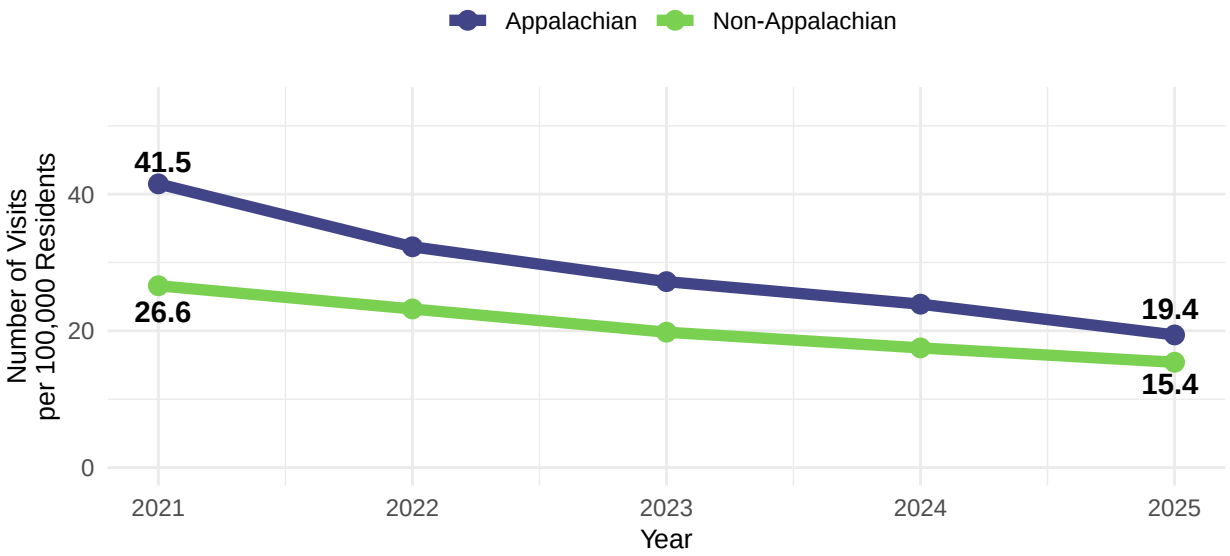

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Table 11.2.2: Counts of Kentucky resident emergency department visits for nonfatal drug overdose, by Appalachian region and drug type, 2021–2025

Region	Drug Type	2021	2022	2023	2024	2025
Appalachian[1]	Heroin	715	495	435	184	136
	Prescription Opioids	315	297	278	222	239
	Synthetic Opioids	208	152	211	172	153
	Unspecified Opioids	350	261	258	144	116
	Cocaine	35	27	19	19	17
	Other Psychostimulants	399	310	269	230	196
	Benzodiazepines	279	194	203	177	228
	Cannabis	82	81	124	156	135
Non-Appalachian	Heroin	2,363	1,419	880	502	346
	Prescription Opioids	1,196	1,317	1,171	931	698
	Synthetic Opioids	563	552	705	569	463
	Unspecified Opioids	1,277	1,388	1,045	674	416
	Cocaine	172	161	195	168	125
	Other Psychostimulants	679	592	461	426	379
	Benzodiazepines	817	554	522	498	498
	Cannabis	252	225	351	442	417

[1] Inclusion in the Appalachian region is based on the decedent's county of residence in the Kentucky counties of Adair, Bath, Bell, Boyd, Breathitt, Carter, Casey, Clark, Clay, Clinton, Cumberland, Edmonson, Elliott, Estill, Fleming, Floyd, Garrard, Green, Greenup, Harlan, Hart, Jackson, Johnson, Knott, Knox, Laurel, Lawrence, Lee, Leslie, Letcher, Lewis, Lincoln, McCreary, Madison, Magoffin, Martin, Menifee, Metcalfe, Monroe, Montgomery, Morgan, Nicholas, Owsley, Perry, Pike, Powell, Pulaski, Robertson, Rockcastle, Rowan, Russell, Wayne, Whitley, and Wolfe.

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