

SEPSIS IN KENTUCKY

Sepsis is the body's overwhelming and life-threatening response to infection which can lead to tissue damage, organ failure and death. In the U.S. alone, sepsis affects **1.7 million people** and takes **357,000 lives every year**. However, as many as 80% of sepsis deaths could be prevented with rapid diagnosis and treatment. Costs to treat sepsis total **\$62 billion annually in the U.S.**¹

Sepsis happens when an infection you already have – in your skin, lungs, urinary tract, or somewhere else – triggers a chain reaction throughout your body. Without timely treatment, sepsis can rapidly lead to tissue damage, organ failure and death. It's important to look for a combination of the warning signs of sepsis. Spotting these symptoms early could prevent the body from developing septic shock and could save a life. Symptoms of sepsis include fever, difficulty breathing, low blood pressure, fast heart rate and mental confusion. Other symptoms may include chills, dizziness, low body temperature, shivering, delirium, and skin discoloration. Screening patients for sepsis immediately when the patient presents to the emergency department (ED) allows providers to identify and begin treatment immediately.

Kentucky hospitals are currently screening patients for sepsis at time of triage. Kentucky started this practice in 2022 and hospitals now successfully screen nearly 98% of patients at time of triage in the ED.

SEPSIS IN KENTUCKY HOSPITALS:

— 2019 Total Sepsis Inpatient Discharges =	35,429	..... Total Charges	\$1,760,809,254
— 2020 Total Sepsis Inpatient Discharges =	36,022	..... Total Charges	\$2,091,421,894
— 2021 Total Sepsis Inpatient Discharges =	35,511	..... Total Charges	\$2,425,208,371
— 2022 Total Sepsis Inpatient Discharges =	35,372	..... Total Charges	\$2,326,124,175
— 2023 Total Sepsis Inpatient Discharges =	37,153	..... Total Charges	\$2,436,974,696
— 2024 Total Sepsis Inpatient Discharges =	38,811	..... Total Charges	\$2,622,062,253

Sepsis Unspecified Organism principal diagnosis ranks the highest in the number of inpatient discharges and first in total charges.

NUMBER OF 2024 INPATIENT DAYS FOR SEPSIS PATIENTS:

Average Sepsis Inpatient Length of Stay	6.26 days
Average Inpatient length of Stay.....	5.68 days
Total Number of Days.....	243,149

2024 RACE OF SEPSIS PATIENTS:

Caucasian	91.8%
African American.....	6.7%
Other Races	1.5%

2024 PAYER DISTRIBUTION:

Medicare.....	24,993 (64.4%)
Medicaid	6,898 (17.8%) (including Medicaid Managed Care)
Commercial.....	5,059 (13.0%)
Other.....	1,239 (3.2%)
Self-Pay & Charity.....	622 (1.6%)

2024 GENDER OF SEPSIS PATIENTS:

Women	20,570 (53.0%)
Men.....	18,237 (47.0%)

2024 AGE RANGE OF SEPSIS PATIENTS:

Age 0-5 225	Age 18-24 523	Age 35-44 2,405	Age 55-64 7,179	Age 75-84 8,771
Age 6-17 204	Age 25-34 1,405	Age 45-54 3,827	Age 65-74 .. 10,136	Age 85 + 4,136

Data Source: KHA InfoSuite

While sepsis predominantly affects older adults, 59% are age 65 and older in Kentucky, it also affects younger adults and children. Sepsis can have devastating consequences for children. Each year, approximately **75,000 children** develop severe sepsis in the United States alone. **More children die of sepsis than childhood cancer.**¹



Governor Andy Beshear again signed a proclamation officially declaring September 2025 as Sepsis Awareness Month, reaffirming the Commonwealth's recognition of the importance of continuing to raise awareness of this life-threatening disease, acknowledge survivors, and honor those who have lost their lives to sepsis.

The Kentucky Sepsis Consortium is working with Kentucky hospitals statewide to reduce the morbidity and mortality caused by sepsis. The consortium focuses on improving sepsis outcomes through collaborative learning to achieve appropriate, timely and reliable implementation of evidence-based interventions.

In early 2020, the Kentucky State Senate unanimously passed Dayo's Resolution, named after a two-time sepsis survivor. This Resolution recognizes and supports Kentucky Hospital Association's creation of the state-wide sepsis consortium with the goal of reducing the incidence of and harm from sepsis through education and quality improvement for Kentucky hospitals and their communities. All Kentucky hospitals have signed a letter of commitment to participate in the program. Teams at each hospital continue to make progress in improving processes to quickly screen, identify and treat sepsis.

For more information about the **Kentucky Sepsis Consortium** and **KHA Data Center**, contact:

Kentucky Sepsis Consortium

Deborah Campbell, RN-BC, MSN, CPHQ
Vice President, Clinical Strategy
and Transformation
Kentucky Hospital Association
dcampbell@kyha.com

KHA Data Center

Maik Schutze
Director, Health Information and Analytics
Kentucky Hospital Association
mschutze@kyha.com



¹ Sepsis Alliance. Sepsis Fact Sheet. 2026. <https://www.sepsis.org/education/resources/fact-sheets/>