

2025 Block Grant Summaries

Preventative Health & Health Services Block Grant (PHHSBG)

- Awarded to the Kentucky Department for Public Health through the CDC. The current funding amount for the FY24 is \$2,381,723. The base allotment is \$2,287,658 and the mandatory distribution to DCBS for the Sex Offense Set-Aside is \$94,065. The FY25 funding allocation table has yet to be released, but guidance from the CDC officials directed recipients to plan for level funding.
- Anticipated recipient programs include Office of Performance Improvement and Accreditation, Community Health Action Teams, Kentucky Office of Community Health Workers, Health Care Access – Kentucky Prescription Assistance Program, Kentucky Asthma Management Program, Kentucky COPD Program, Education and Workforce Development (KY-TRAIN), Sex Offense Set-Asides/DCBS via Kentucky Association of Sexual Assault Programs. Funds are accounted for in the biennial budget. Kentucky has received PHHSBG annually since 1981. KDPH and DCBS currently administer and fund the programs noted above.
- The PHHSBG Advisory Committee reviews and recommends priority-funding based on information submitted by KDPH. gaps in funding or programs for which there is no funding, evidence-based public health, public health infrastructure, and emerging needs must be considered in the workplan and budget. Funds are prohibited from being used to provide inpatient services; make cash payments to intended recipients of health services; purchase or improve land, purchase construction, or permanently improve any building or other facility, or purchase major medical equipment; satisfy any requirements for the expenditure of non-federal funds as a condition for the receipt of federal funds; provide financial assistance to any entity other than a public or nonprofit private entity.

Maternal and Child Health (MCH) Title V Block Grant

- The purpose of the MCH Services Block Grant program is to enable each state to provide and to assure mothers and children access to quality MCH services; to reduce infant mortality and the incidence of preventable diseases and handicapping conditions among children; to provide rehabilitation services for blind and disabled individuals under the age of 16 receiving benefits under Title XVI, to the extent medical assistance for such services are not provided under Title XIX; and to provide and to promote family-centered community-based coordinated care for children with special health care needs and to facilitate the development of community-based systems of services for such children and their families.
- Kentucky is set to receive \$11,316,416. Kentucky has received Title V funds annually since the 1930s, and Kentucky has two years to expend the funds. Funds are accounted for in the biennial budget.
- The Kentucky Department for Public Health (KDPH) coordinates services through the Maternal and Child Health Division and the Commission for Children with Special Health Care Needs. Services are also provided for through local health departments and contractual agreements with state universities for technical assistance, training, and regionalized perinatal care. The allocation of funds to local health departments is based on a common base allocation for each county with the remaining funds distributed based on the percentage of children in poverty in the county. No more than 10% of amount awarded can be used for administrative costs.
- Women/Maternal Health
 - Funds from the MCH were used to build a best practice package for use by local health departments to reduce morbidity in pregnancy by promoting preventative screenings, review morbidities in pregnancy, data dissemination to raise awareness, and support the utilization of social media. With half of maternal deaths coming from substance use, the KDPH was recommended to focus on prevention efforts. A partnership with the KY Perinatal Quality Collaborative worked to address the different morbidities to reduce the states maternal mortality rate. While smoking amongst pregnant women has decreased, it is still double the national average. MCH promoted activities aimed at smoking cessation among pregnant women.
- Perinatal
 - The infant mortality rate in Kentucky 2024 was 6.8 per 1,00 live births, above the national rate of 5.5 per 1,000. Evidence-based strategies recommended nationally for addressing infant mortality are regionalized perinatal care, safe sleep initiatives, and breastfeeding. There was reported decline in Sudden Unexpected Infant Death (SUID) with 64 SUID cases reported, from a high of over 80 SUID cases reported in 2020-2021. The MCH developed and promoted educational campaigns and training on safe sleep best practices. Rates of neonatal abstinence syndrome (NAS) have increased more than 20-fold in the last decade. Kentucky established an NAS State Performance Measure that attempts to address the issue. The Kentucky Perinatal Quality Collaborative (KYPQC) neonatal workgroup is focusing on hospital and provider outreach to determine efforts for NAS identification, diagnosis, reporting, and plan of safe care.

- Child Health
 - The School Health Program within MCH provided ongoing support to local School health nurses, teachers, as well as other K-12 educators and professionals by developing and supporting health education, expanding partnerships and resources, and coordinating dissemination of accurate public health information. A mental health component was added to address students who continue to struggle with mental health issues exacerbated by the pandemic. MCH developed web-based trainings to address injuries from car accidents. The Child Fatality Review and Injury Prevention Program (CFR) has 104 review teams involved in mapping child protective services cases, policy review, potential legislative recommendations for toxicology screenings, and active membership in the plan of safe care sub-committee.
- Adolescent Health
 - The Adolescent Health Program focuses on reducing risky behaviors, including use of tobacco products and other substances. Kentucky included a national performance measure to determine the percentage of households where someone smokes. This is vital to women's health as well as both the child and adolescent health populations who are vulnerable and susceptible to ongoing negative effects of smoking.
 - A concerted effort to address the rising number of child/teen suicides in Kentucky is ongoing and is the primary focus for the Kentucky Child Safety Learning Collaborative. The MCH continued the scope of work as it relates to the Pediatric Mental Health Care Access grant. Utilizing existing and well-established infrastructure of childhood mental health within MCH, the community mental health centers in the Department for Behavioral Health, Developmental and Intellectual Disabilities, and programs currently administered by Office for Children with Special Health Care Needs (OCSHCN) will expand access to mental health services for children statewide.
- Children and Youth with Special Health Care Needs (CYSHCN)
 - The OCSHCN identified greater access to care as a top priority. The OCSHCN created plans to help achieve greater access to care for children and families. Scorecards were developed as tools to track response and measure success, and they provided an opportunity for OCSHCN clinics and staff to examine opportunities to expand services and support programs. The Data Action Plan outlines goals to reach the CYSHCN population outside of OCSHCN clinics. This is achieved through data sharing agreements with other CHFS agencies; working with KIDS Count data, integrating new data into the Kentucky Health Information Exchange, and increasing survey measures with external stakeholders.
 - Expanding transition services to adulthood continues to be a priority for OCSHCN, and the Transition Team evaluates the best practices to educate patients transitioning into adulthood.