

Preventive Health & Health Services Block Grant (PHHSBG) Federal Fiscal Year 2025



Block Grant Reporting to LRC

Cabinet for Health and Family Services/Department for Public Health/Division of Prevention and Quality Improvement/Chronic Disease Prevention and Health Promotion Branch

March 20, 2025

Proposed Distribution of Funds

The Preventive Health and Health Services Block Grant (PHHSBG) funding awarded to the Kentucky Department for Public Health (KDPH) through the Centers for Disease Control and Prevention (CDC) is a cornerstone public health program for preventing disease, illness, and injury. It is designed to provide the flexibility to implement, support, and coordinate statewide prevention efforts while at the same time creating efficiencies that eliminate duplication of effort. U.S. Code Title 42, chapter 6A, subchapter XVII Part A-Preventive Health and Health Services Block Grants defines the purpose of the PHHSBG program in each state.

<https://www.law.cornell.edu/uscode/text/42/chapter-6A/subchapter-XVII/part-A>

1. Be tailored to the unique preventive health needs of states/territories and their communities.
2. Emphasize use of evidence-based and promising practices in primary and secondary prevention.
3. Emphasize state/territorial health priorities and goal setting.
4. Support capacity-building activities related to accreditation, quality improvement, performance management, and foundational capabilities that are essential to the successful implementation of the PHHSBG in states and their communities.
5. Continue to refine and develop its strategy for ensuring accountability and reporting results based on existing state-selected measures and/or new national measures such as the Healthy People 2030 Leading Health Indicators.

<https://odphp.health.gov/healthypeople>

Funding priorities are determined in collaboration with and approved by the PHHSBG Advisory Committee. Additionally, there is a mandatory Sex Offense Set-Aside determined by the CDC that is administered through the Kentucky Department for Community Based Services (DCBS).

	<p>Distribution of funds previously approved by the CDC and Notice of Award (NOA) received for the following programs for FFY24 and anticipated for FFY25:</p> <ul style="list-style-type: none"> • Office of Performance Improvement and Accreditation (OPIA) • Community Health Action Teams (CHAT) • Kentucky Office of Community Health Workers (KOCHW) • Health Care Access – Kentucky Prescription Assistance Program (KPAP) • Kentucky Asthma Management Program (KAMP) • Kentucky COPD Program (COPD) • Education and Workforce Development (KY-TRAIN) • Sex Offense Set-Aside/DCBS via Kentucky Association of Sexual Assault Programs (KASAP) <p>https://www.chfs.ky.gov/agencies/dph/dpqi/cdpb/Pages/preventivehealth.aspx</p>
Programmatic and other requirements applicable to the receipt and expenditure of funds, including matching funds and restriction on funds	<p>Programmatic Restrictions: PHHSBG grant funds are not released to the recipient until full applications meeting all federal legislative and programmatic requirements are received.</p> <p>No matching funds are required. However, Maintenance of Effort (MOE) is required according to the Notice of Award and authorized in Title 42, Chapter 6A, Subchapter XVII, Part A, Section 300w-3. The State agrees to maintain State expenditures for such activities at a level that is not less than the average level of such expenditures maintained by the State for the prior 2-year period. MOE for Kentucky is \$342,805.</p>
Have the funds been included specifically in an appropriation provision enacted by the General Assembly?	Funds are accounted for in the biennial budget which is approved by the General Assembly.
Is the funding one-time, recurring or continuing?	Kentucky has received PHHSBG funds annually since 1981. For each award cycle, Kentucky has two years to expend the funds; funds are specifically spent in the second year only for each grant cycle. The current PHHSBG NOA funding period is October 1, 2023-September 30, 2025 (FFY24). The next funding period is October 1, 2024-September 30, 2026 (FFY25). Funding is made available from CDC through the Prevention and Public Health Funds attached to the Affordable Care Act. States can only apply for PHHSBG funding when the CDC releases the funding allocation table. The CDC notified states of the FFY24 funding allocation table on

	<p>April 14, 2024. Due to the delayed release, the FFY24 workplan application due date was pushed back from July 1, 2024 to July 12, 2024. The NOA was received on August 26, 2024. The FFY25 funding allocation table has yet to be released, but guidance from CDC officials directed recipients to plan for level funding. The FFY25 workplan application due date is anticipated to be July 1, 2025 and the NOA is anticipated for August 2025.</p>
<p>What costs will accrue to the state if funds are diminished or cut and has a budget reduction plan been prepared for such contingency?</p>	<p>Should Kentucky receive a notice of budget reduction from the CDC, the PHHSBG Advisory Committee would be convened and a redetermination of priorities and redistribution of funds and revised workplan would be completed and submitted. Contingency plans would include reduction in services and workforce, elimination of programs all together, and review of budgets and/or application for other grants. Local health departments (LHD) would choose whether to sustain local programs or may eliminate those as well.</p>
<p>Are the programs and services to be provided mandated by Kentucky law?</p>	<p>211.180 Functions of cabinet in the regulation of certain health matters https://apps.legislature.ky.gov/law/statutes/statute.aspx?id=49817</p> <p>“(1) The cabinet shall enforce the administrative regulations promulgated by the secretary of the Cabinet for Health and Family Services for the regulation and control of the matters set out below and shall formulate, promote, establish, and execute policies, plans, and programs relating to all matters of public health, including but not limited to the following matters: (a) Detection, prevention, and control of communicable diseases, chronic and degenerative diseases...”</p>
<p>Are the programs and services to be provided ones that Kentucky currently administers and funds?</p>	<p>Yes, KDPH and DCBS currently administer and fund the programs noted above. Services are provided across the commonwealth via LHD, on behalf of KDPH, and via KASAP, on behalf of DCBS.</p>
<p>What agencies are expected to provide the service and are they state, local, public, or private entities?</p>	<p>Primarily KDPH will provide programs, services and assistance, while the local health departments (LHDs) will be part of the delivery system. Technical assistance and services for the mandatory Sex Offense Set-Aside will be provided by DCBS. University contracts may be utilized for subject matter-experts.</p>

<p>The manner in which the allocation of funds will be targeted to need</p>	<p>The PHHSBG application includes sections that describe burden of need in the state, disparate populations, and priorities. The PHHSBG Advisory Committee reviews and recommends priority-funding based on information submitted by KDPH. Per CDC guidelines, 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.</p> <p>Prohibited Uses: (1) Provide inpatient services; (2) Make cash payments to intended recipients of health services; (3) Purchase or improve land, purchase, construct, or permanently improve any building or other facility, or purchase major medical equipment; (4) Satisfy any requirements for the expenditure of non-Federal funds as a condition for the receipt of Federal funds; (5) Provide financial assistance to any entity other than a public or nonprofit private entity.</p>
<p>Geographic areas to be served by the program and service</p>	<p>The entire state is served, though funding is limited.</p>
<p>Standards of eligibility for services</p>	<p>Services are subject to the eligibility requirements and amount of funding available for each program approved in the PHHSBG workplan submitted to CDC. All program activities must be consistent with making progress toward achieving the objectives established by the Secretary of HHS for the health status of the population of the United States – Healthy People 2030. Monitoring and evaluation of grant activities is required. Compliance visits from CDC staff occur roughly every five years. The most recent compliance visit for Kentucky was March 27-28, 2024.</p>
<p>The criteria and method that will be used to distribute the funds</p>	<p>The programs that will be funded are approved by the PHHSBG Advisory Committee and then reviewed and approved through the workplan application submitted to the CDC. Upon receipt of the Notice of Award, funds may then be distributed. Funds that are distributed to local health departments are completed through a Request for Application (RFA) process in which local health departments request funding for projects based on community priorities. Contracts are then executed through the KDPH Division of Administration and Financial Management (AFM).</p>
<p>Will the funds be transferred from one grant to another and</p>	<p>No funds are transferred to other grants.</p>

what is the amount of the transfer?	
The proportion of funds to be used for administrative costs	No more than 10% of the total grant amount awarded can be used for administrative costs.
Estimated receipt of funds applied for	The current funding amount approved for FFY24 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 FFY25 funding allocation table has yet to be released, but guidance from CDC officials directed recipients to plan for level funding.