

Grant Entrance Form

(fill out all that applies)

Grant Name: Preventive Health and Health Services Block Grant - 2025

Funding Range: \$2,381,723 per the 2024 Allocation Table

FY 2024 PREVENTIVE HEALTH AND HEALTH SERVICES (PHHS)			
BLOCK GRANT ALLOCATION TABLE			
Recipient	Annual Basic	Sex Offense*	Total Award
Kentucky	\$2,287,658	\$94,065	\$2,381,723

https://www.cdc.gov/phhs-block-grant/php/data-research/funding-by-recipient/index.html

Funder: CDC https://www.cdc.gov/phhs-block-grant/

*New Grant Cycle Expected amount: ~\$2,381,723

Grant Period: 2 years; Second-Year Spender; Federal Fiscal Year

Years covered by Grant: 10/1/24-09/30/26 – Workplan 10/1/25-09/30/26

Due Date: July 1, 2025

Grant Objectives:

The Preventive Health and Health Services Block Grant provides federal funding for 61 grantees: all 50 states, the District of Columbia, 2 American Indian tribes, 5 US territories, and 3 freely associated states. The PHHSBG supports *Healthy People 2030* priorities and is used to address emerging health needs and funding gaps specific to our state. Topic areas for this workplan include: Education and Workforce Development, Office of Performance Improvement and Accreditation, Kentucky Asthma Management Program, Chronic Obstructive Pulmonary Disease, Community Health Action Teams, Kentucky Office of Community Health Workers, Health Care Access, and Sexual Assault Prevention. The block grant funds state program staff, service contracts, and helps support local health initiatives statewide. These funds are allocated annually, based on the appropriations table, after submission of a workplan (July 1 deadline). Reports are submitted biannually (February and December) via the PHIVE reporting system, and evaluation and compliance reviews occur regularly. Legislation requires this grant to have an Advisory Committee, which meets a minimum of twice annually, as well as an annual Public Hearing of the workplan.

The PHHS Block Grant is in federal statue for each state and is used to support a wide variety of objectives nationwide – block grant monies are awarded to the 50 states, District of Columbia, 2 American Indian Tribes, 5 US territories, and 3 freely associated states to address their own unique public health needs and challenges. This funding has been in US Legislation since the early 1980s; the

grant application is essentially a workplan for how the annual allocation will be utilized. States can only apply when notified and the appropriations table has been approved by Congress and the CDC. In Kentucky, the block grant helps support existing programs, implementation of new programs, addresses emerging public health issues, and minimizes gaps in public health programs with limited or no state funding available. If this funding opportunity was not pursued annually, it would be to the detriment of the citizens of Kentucky. We will receive a non-compliance letter from the CDC if a workplan is not submitted by the July 1 deadline.

- Accreditation, Performance Management, and Quality Improvement
 - Carissa Adams, Heather Stone, Carrie Conia 2.5 FTE
- COPD Program
 - Angela Campbell 0.25 FTE
 - Program is fully funded via PHHSBG
- Kentucky Asthma Management Program
 - Rahel Basse, Heather Cox, Pam Serban, Angela Campbell 1.25
- Community Health Action Teams
 - April Thomas, Carrie Conia, Janet Luttrell 2 FTE
 - CHAT is mostly funded via the block grant, but the local health departments often choose to supplement with other fund sources.
- Kentucky Office of Community Health Workers
 - Laura Eirich, Tracey Sparks, Kasey Rhodes, Joa McDaniel, Malea Hoepf Young 2 FTE
- Education and Workforce Development
 - Tom Kollmer No FTE
- Health Care Access/KPAP
 - Jennifer Toribio-Naas No FTE
- Rape Crisis Centers Sex Offense Set-Aside
 - Miranda Stocker, Department for Community Based Services No FTE

Objectives accomplished by:

Number of Existing Staff: 17, 8 FTE

Number of New Staff: 0

LHD Staff: 2 staff are Merit LHD employees

Contracts: 3 shared contracts – National Jewish w/ KTPCP; HeartUSA w/ KPAP; Kentuckiana

Health Collaborative w/ KOCHW

Planning team: Includes program staff and CDP and PQI leaders

What 'surprises' do we all need to be aware of?

Not surprises, but some pertinent information:

- PHHSBG US Legislation https://www.law.cornell.edu/uscode/text/42/chapter-6A/subchapter-XVII/part-A
- Funds are zeroed out of the Federal Budget annually.
- Allocation Table release is typically March/April.
- No required funding match; Maintenance of Effort

- Hold a minimum of 2 Advisory Committee meetings annually
- Hold a Public Hearing of the workplan annually
- Objectives and activities must link to Healthy People 2030 objectives.
- Workplan is submitted annually by July 1.
- Compliance Site Visit every ~5 years; Last site visit was March 2023

Grant Timeline: Financial

OATS

Division Office

Commissioner's Office

Secretary's Office 6/7/2013