



# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

**TESTIMONY PRESENTED BEFORE THE APPROPRIATIONS, HUMAN SERVICES  
AND PUBLIC HEALTH COMMITTEES  
September 22, 2008**

***Norma D. Gyle, R.N., Ph.D., Deputy Commissioner***

Preventive Health and Health Services and Maternal Child Health  
Block Grants

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Good morning, I'm Deputy Commissioner Norma Gyle of the Department of Public Health. I am here to present the Department's proposed FFY 2009 Allocation Plan for the Preventive Health and Health Services Block Grant and the Maternal and Child Health Block Grant.

The Preventive Health and Health Services (PHHS) Block Grant funds programs designed to reduce preventable morbidity and mortality, and to improve the health status of populations. Congress established this Block Grant in 1981 and it was created with funds originally allocated to six separate categorical grants. The Block Grant funds may be used to fund activities consistent with making progress towards achieving the objectives in the national public health plan for the health status of the population, for planning, establishing and expanding the EMS system, for providing services for victims of sex offenses and for planning, monitoring and evaluation of such programs. In Connecticut, the PHHS Block Grant supports a variety of public health programs, many of which are implemented at the local level.

Connecticut's 2008 Preventive Block Grant Award was decreased slightly by \$26,115, providing total funding of \$1,402,350 (this amount includes both a basic award of \$1,318,954 and a set aside of \$83,396 specifically for Sex Offense programs). The estimated expenditures of \$1,731,876 in FFY 2008 utilized \$329,526 of the balance carried forward from previous years to supplement the \$1,402,350 award. A total of \$376,097 of the balance carried forward into FY 2009 will supplement the \$1,318,954 estimated federal allocation for the proposed FFY 2009 budget of \$1,778,447. This would leave an estimated \$159,143 balance for future years. The 2009 estimated budget is based on an assumption of level funding. However, the Department has a contingency plan in place should the federal government make further reductions or increases to the FFY 2009 allocation. The health priorities and program categories for FFY 09 remain the same as FFY 2008. Minor changes to the plan are as follows:

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- The position that was split funded between administrative support and local health departments has been moved to the surveillance and data budget and will be refilled as an Epidemiologist 1.
- During FFY 2008, the cancer prevention program budget included approximately a half time administrative assistant for six months. This position was removed from the block grant and replaced with a Secretary 1 position at .64 FTE for the last six months of the year. The Secretary 1 position will remain on the block grant at .64 FTE.
- Changes from FFY 08 to FFY 09 in the Childhood Lead Poisoning/Lab, Emergency Medical Services and Youth Violence/Suicide Prevention budgets are due to salary increases and changes in fringe benefits of staff funded in these programs.

Since FFY 2000, three programs have received matching State funds to maintain level funding. State funding includes \$11,041 for Intimate Partner Violence Prevention, \$46,706 for Youth Violence and Suicide Prevention, and \$71,585 for Local Health Departments. State funding continues to be provided to these programs.

In regard to the Maternal and Child Health (MCH) Block Grant Allocation Plan, the MCHBG promotes the development of service systems in states to meet critical challenges in:

- Reducing infant mortality
- Providing and ensuring access to comprehensive care for women
- Promoting the health of children by providing preventive and primary care services, and
- Providing family centered, community based, coordinated services for children and youth with special health needs.

There is a federal requirement that at least 30 percent of the funds be used for prevention and primary care services and at least 30 percent be used for children with special health needs. There are a number of other administrative requirements of the block grant that are referenced in the Allocation Plan. The Department is in compliance with all administrative requirements.

There are a variety of services provided with MCH grant funds to meet the objectives, which are included in your allocation plan. These include case management services for pregnant women, maternal and child health information and referral services (2-1-1 Infoline), family planning, oral health, school-based primary and behavioral health, infant mortality, newborn screening, and medical homes for children and youth with special health care needs. Some funds will be used to address racial and ethnic disparities as it relates to infant mortality, low birth weight and obesity prevention in the African American population.

The FFY 2009 Maternal and Child Health Allocation Plan is based on estimated federal funding of \$ 4,729,890 and may be subject to change when the final federal

appropriation is authorized. The allocation plan is based on the FFY 2008 funding level.

The FFY 2008 Federal allocation was \$4,729,890 and the available carry over from FFY 2007 was \$615,603. With FFY 2008 projected expenditures of \$3,387,753 in the area of Maternal and Child Health/Preventive and Primary Care and \$1,423,894 in the area of Children with Special Health Care Needs (\$4,811,647 total expenditures), there will remain \$533,846 in carry forward funds that will be available for FFY 2009 and future years.

Total Maternal and Child Health block grant funding available for expenditure in FFY09 is estimated to be \$5,263,736 including carry forward funds. There are no anticipated changes in the Federal award at this time. The difference between expenditures in FFY 2008 to FFY 2009 reflects both increases and decreases for certain line items. The FFY 2009 expenditures include increases for perinatal health, where an additional \$25,030 will be used to address low birthweight by funding at least one Community Health Center to develop and implement a Centering Pregnancy Model, obesity, where \$25,000 in additional funds will be used to fund Sister Talk Hartford, and Medical Home Community Based Care Coordination Services, where there will be a \$164,970 investment in enhancing respite services and extended services funds for this population and for additional care coordinators.

Thank you for your consideration of these block grants. If you have any questions agency program specialists and James O'Connell, the agency's Chief Fiscal Officer, are with me to address your needs.