TEAM KENTUCKY
CABINET FOR HEALTH AND FAMILY SERVICES

DEPARTMENT FOR BEHAVIORAL HEALTH,
DEVELOPMENTAL AND INTELLECTUAL DISABILITES

Plan and Budget – General Information

New DBHDID Website URL

The main DBHDID website is now managed at the cabinet level, therefore the URLs of all DBHDID pages have been updated. Please note the following updated links:

DBHDID Main Site: https://www.chfs.ky.gov/agencies/dbhdid/Pages/default.aspx

Community Mental Health Centers: https://www.chfs.ky.gov/agencies/dbhdid/Pages/cmhc.aspx

Plan and Budget Information: https://www.chfs.ky.gov/agencies/dbhdid/Pages/plan-and-budget.aspx

Plan and Budget Forms Library: https://www.chfs.ky.gov/agencies/dbhdid/Pages/pb-forms.aspx

Department Periodic Reports Information: https://www.chfs.ky.gov/agencies/dbhdid/Pages/dpr.aspx

Department Periodic Reports Forms Library: https://www.chfs.ky.gov/agencies/dbhdid/Pages/dpr-forms.aspx

The URL of Central Login has not changed.

Central Login: https://login.dbhdid.ky.gov/Secure/Login.aspx

Due Date

The Plan and Budget form submissions for FY 2027 are due by close of business, May 25, 2026. For more detailed instructions regarding the Plan and Budget process and the submission of reports through the Central Login application, please see ***Plan and Budget Processing Instructions***. This file is located on the Plan and Budget Information Page of the DBHDID website at this link: https://www.chfs.ky.gov/agencies/dbhdid/Pages/plan-and-budget.aspx.

Please contact Tracey Mulder at Tracey.Mulder@ky.gov if you have any submission issues with the Plan and Budget Reports.

Notice of Funding and Rate Information

An email with the CMHC's Notice of Available Regional Funding (NARF) letter was sent by Jennifer Moore, Assistant Director of Administration and Financial Management in March.

FY 2027 Information

Deleted Forms

101 – Homeless Initiative (Region 14 only)

102 – Homeless Initiative (Region 14 only)

133A – PATH Intended Use Plan (Regions 12, 13 only)

133D – PATH Budget Narrative Worksheet (Regions 12, 13 only)

175 – Medications Management (All regions)

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New Forms

101A – Kentucky Integrated Care Report (Regions 2, 4 only)

101B – RIAC – Bipartisan Safer Communities Act Funds (All regions)

101C – 988 Program Budget and Financial Report (All regions)

133A – PATH Intended Use Plan (Regions 1, 3 only)

133D – PATH Budget Narrative (Regions 1, 3 only)

Form Information

- Excel forms include an *Instructions* worksheet/tab. If the form also has a coordinating *Instructions* document, it is embedded on this tab to make it more accessible.
- Due to their large size, forms *117–MH Financial Planning and Implementation Report*, *160–Substance Use Financial Planning and Implementation Report*, and *110C-RPC Program Budget and Financial Report* include an unlocked cell near the column headings, giving the user the ability to freeze panes and still view the column headings as information is entered throughout the worksheet.

Regional Prevention Center (RPC) Forms 110B, 110C, and 110D

Form ***110B–RPC Spending Plan*** is submitted during the Plan and Budget timeframe, and subsequently with the receipt of additional funding sources that substantially change projected plans during the fiscal year. Should this occur, the RPC's will be directed by the Prevention Branch Manager when they should resubmit the 110B. Form ***110C–RPC Program Budget and Financial Report***, and Form ***110D–RPC Staffing Form*** are still required for Plan and Budget.

For questions, clarification, or assistance on these forms, please contact Paula Brown at Paulab@ky.gov.

Form 113D-Crisis Services Planning and Implementation Report

Form 113D includes the following updates for SFY 2027:

- A sentence has been added to inform CMHCs that the reported information may be shared with CMHCs or other partners.
- Added a definition for "Adult Diversion from the Justice System."
- Added a new data element in the Adult Diversion from the Justice System section to capture the number of adults referred to inpatient level of care.
- Added a table for reporting 23-hour services.
- Added a table for reporting behavioral health urgent care services.
- Added a blank table for any additional crisis data that the CMHC would like to report to DBHDID.

Please see the ***Crisis Services Instructions and Objectives*** for detailed information about Form 113D and Crisis Services. For further assistance, please contact Christie Penn at Christie.Penn@ky.gov or Courtney Welsh at Courtney.Welsh@ky.gov.

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Form 114-Early Childhood Mental Health Narrative

This Plan and Budget form collects information about the Early Childhood Mental Health (ECMH) Program provided by the region.

For further clarification or assistance related to Form 114, please contact Brittany Barber at BrittanyA.Barber@ky.gov.

Form 115 – Adult System of Care Application

The ***Adult System of Care Application*** submitted during Plan and Budget considers that 100% of each region's (overall) Mental Health Block Grant funding allocated for adults with SMI must be spent on the provision of the following evidence-based practices: Assertive Community Treatment, Supportive Housing, Supported Employment, and Peer Support as part of the DIVERTS initiative. Definitions and fidelity tools are listed in the ***Adult Services Instructions and Objectives***.

For further assistance, please contact Jason Bagley at Jason.Bagley@ky.gov.

Form 117 – MH Financial Planning and Implementation Report

Please use Form 117 to report your planned expenditures for mental health services as allocated on your NARF and as described in your Plan and Budget application documents.

Also, use Form 117 quarterly to report your region's actual expenditures by each funding category and by each service category. This should include the full contracted amounts, including any contract modifications applicable to the quarter for which you are reporting actual expenditures. Please enter the amount for the 1st quarter and cumulatively each subsequent quarter. See Form ***117A–MH Financial Planning and Implementation Report Instructions*** for detailed instructions pertaining to Form 117.

For further clarification or assistance, please contact Joy Botkins at Joy.Botkins@ky.gov.

Form 118 – Children and Transition Age Youth System of Care Application

Form 118 collects key child and transition age youth programs data including CMHC contact information; number of staff trained and/or certified in several specialty areas is requested; questions specific to Kentucky Strengthening Families protective factors; and a service array grid that includes new Medicaid covered services.

For further clarification or assistance with form 118, please contact Beth Jordan at Beth.Jordan@ky.gov.

Form 119 – Youth and Young Adult Services System of Care Application

Form 119 captures information about programming for youth and young adults. The application has become necessary due to specified funding for programs such as TAYLRD and iHOPE.

Please contact Janice Johnston at Janice.Johnston@ky.gov if you have any questions.

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Form 131 – IMPACT Region-Wide RIAC Funds

Form 131 is due with Plan and Budget and semi-annually thereafter. This form must be signed by the Local Resource Coordinator (LRC) signifying RIAC approval prior to submission. Form ***131A–IMPACT Region-Wide RIAC Funds Instructions*** includes detailed instructions for completing Form 131.

Please contact Vanessa Brewer at VanessaC.Brewer@ky.gov for additional assistance.

Form 132 – Crisis Services Application

Form 132 includes the following updates for SFY 2027:

- A sentence has been added to inform CMHCs that the reported information may be shared with CMHCs or other partners.
- Section 1: Crisis Services Contacts
  - Space was added for CMHCs to report contacts for specialized crisis programs, such as mobile crisis, 23-hour services, behavioral health urgent care, CSUs, etc.
- Section 2: Regional Array of Crisis Services and Components
  - The definition of Partial Hospitalization was shortened.
  - Behavioral Health Crisis Transportation has been divided into two categories so that CMHCs can delineate whether they provide crisis transportation services (CMHC staff transport the client) and/or coordinate crisis transportation services (law enforcement or another provider transports the client).
  - "Law Enforcement Drop-Off Site" has been changed to "First Responder Drop-Off Site."
- Section 3: System of Care Scope
  - Four new questions have been added (with three questions deleted).
- Section 4: Compliance with Contract Deliverables
  - This section has been removed.

Please see the ***Crisis Services Instructions and Objectives*** for detailed information about Form 132 and Crisis Services. For further assistance, please contact Christie Penn at Christie.Penn@ky.gov or Courtney Welsh at Courtney.Welsh@ky.gov.

Form 140 – DID Financial Implementation Report

Form 140 shall be submitted during Plan and Budget and quarterly thereafter. Instructions for completing Form 140 can be found within the Start and Instruction tab of the spreadsheet as the Form 140 Overall Instructions PDF.

Information on the form includes restricted and crisis funds combined into a single restricted funding source, a Cumulative Client List sheet for each CMHC to enter a non-duplicative list of who they serve throughout the fiscal year, and to mark the quarter(s) they served them and what services were provided. The quarterly sheets have the distinct clients per service being auto calculated based on the entries into the Cumulative Client List sheet. The SGF

client quarterly listing is within the form so that the separate DPR 201-SGF Client Service Listing is not needed. The PASRR specialized services report is now integrated into this report as a separate tab.

New FY 2027: Crisis respite services are to be recorded on the Crisis Respite tab. This tab will capture distinct clients and the quarter/date they enter into crisis respite.

For clarification or assistance, please contact David Wheeler at David.Wheeler@ky.gov; or for assistance with the form, please contact James Kimble at James.Kimble@ky.gov.

Form 148C – Array of Services for Youth with Substance Use and Co-Occurring Disorders

This Plan and Budget form identifies substance abuse and co-occurring services within each county of the CMHC for Youth. Form ***148D–Array of Services for Youth with Substance Use and Co-Occurring Disorders Instructions*** provides detailed instructions for completing Form 148C.

For further assistance related to Form 148C, please contact Kate Wagoner at Kate.Wagoner@ky.gov.

Form 155A – KY-Moms MATR Strategic Plan and Application and Form 155E – KY-Moms MATR Budget Justification and Proposed Expenditures

Forms 155A and 155E are used to request funding as part of the KY-Moms MATR application packet. The forms include timely submission of prevention and case management data, surveys, and discharges via the UK CDAR website. Form ***155B–Prevention and Case Management Quarterly Report and Strategic Plan Review***, and ***155C–KY-Moms MATR Project Budget & Financial Report*** should be submitted 30 days following the close of each quarter.

For further assistance, please contact Katie Stratton at Katie.Stratton@ky.gov.

Form 160 – Substance Use Financial Planning and Implementation Report

Form 160 includes a list of substance use treatment and prevention components to identify and report anticipated expenditures for Plan and Budget, and the actual expenditures quarterly thereafter. Instructions for completing this form can be found on the Plan and Budget Information page of the DBHDID website, Form ***160A-Substance Use Financial Planning and Implementation Report Instructions***. Also see Form 160A for details specific to the latest updates to Form 160.

For further clarification, please contact Joy Botkins at Joy.Botkins@ky.gov.

Form 167 – Substance Use and Co-Occurring Disorder System of Care Application

Substance Use programs are required to complete Form 167. This application includes information about services for individuals with co-occurring substance use and mental health disorders, as well as both adults and adolescents; therefore, it is recommended that the Substance Abuse Director consult with both the Mental Health Clinical Director and the Children's Services Director in order to complete the form.

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For additional assistance regarding Form 167, please contact Katie Stratton at Katie.Stratton@ky.gov.

Form 214 – Early Childhood Mental Health Program Budget and Financial Report

Form 214 reports the Early Childhood Mental Health (ECMH) budget and expenditures. The program description, deliverables, reporting, and monitoring requirements for ECMH can be found in Section 2.00.04 (Children/Youth and Families Services) of the CMHC contract.

If you have any questions about the completion of the form, please contact Brittany Barber at BrittanyA.Barber@ky.gov.

Guidance Documents

The Adult Services, Child Services, Crisis Services, and Substance Use Treatment Instructions and Objectives contain valuable information to assist with Plan and Budget reporting. Please refer to these documents prior to completing the required applications and reports. The Instructions and Objectives along with other guidance documents are located on the Plan and Budget Information page of the DBHDID website at https://www.chfs.ky.gov/agencies/dbhdid/Pages/plan-and-budget.aspx.

Revisions

If a revision or modification is made to a Plan and Budget report after an initial submission has been completed through the Central Login system, the revised report can be submitted through the system, as long as the revised report is submitted on a different day other than the date of the initial submission. The system attaches the date of a submission to the title of the file and prevents over-write of the previous submission. DBHDID staff can manually upload revised submissions to the appropriate folder, if needed, for same day revisions.

If you have any submission related issues, please contact Tracey Mulder at Tracey.Mulder@ky.gov.