

What does the \$1.8 million request cover?

\$1,020,000 - Ensures continuity of the Greater Bridgeport and Eastern Connecticut pilots, currently funded through December 2026. The requested funds for FY 2027 will sustain up to 3 nurse home visits for mothers and babies in these regions, covering salaries for registered nurses (RNs) and community health workers (CHWs) at 3 hospital sites in these regions.

\$675,000 – Supports planning for program expansion in New Haven, with \$300,000 allocated for FY 2026 and \$375,000 for FY 2027. These funds will cover initial implementation costs and salaries, aiming to launch services in late FY 2026 and continue through FY 2027.

\$115,000 – Maintains staffing for oversight of contractors working on sustainability and expansion planning, as well as program evaluation, for the second half of FY 2027.

What is the plan for long-term funding for the program?

In collaboration with our sister agencies, we are exploring a long-term funding strategy for the benefit by 2027. The \$1.8 million in funding will provide the necessary time to develop this plan effectively.

A sustainability roadmap, expected by this summer, will provide agency leadership and policymakers with strategic funding options, including opportunities to cover this benefit through Medicaid, commercial payers, public-private partnerships, and potential enhancements to federal matching funds.

For the Medicaid option, the analysis will include a cost analysis and a pathway to obtain federal authorization for incorporating this benefit.

How many families have received the benefit and how much has it cost so far?

Since October 2023, Family Bridge has reached over 1,000 families to date.

Total pilot funding through 2026 is **\$14 million, through Community Health Worker program funds, Preschool Development Grant (B-5 renewal) and ARPA Universal Nurse Home Visiting funds**, with **\$9.6 million** allocated to pilots in Greater Bridgeport (since October 2023) and Eastern Connecticut (since January 2025). Initial and first-time program costs are included in this total. The remaining funds have supported program staff and contractors for program evaluation, sustainability planning, and the use of the evidence-based model.

How do you know its working?

CT is using an evidence-based model that is being used in close to 20 other states. A randomized controlled trial (RCT) of this intervention demonstrated significant benefits, including reduced chronic disease risk, fewer emergency department (ED) visits, and fewer child protective service (CPS) interventions.

Connecticut is conducting its own evaluation of the Family Bridge model, expected to be completed by 2026, positive outcomes are anticipated. Anecdotal evidence from both program participants and nurses has been highly compelling, reinforcing the program's impact.

What happens if the funding is not available?

Without any other funding strategies, the pilots available through Bridgeport Hospital, St. Vincent's Hospital and Backus Hospital will likely have to stop.

Details

While evaluation and sustainability efforts are underway, the Office of Early Childhood requested 6 months of bridge funding to support the continuation of Universal Nurse Home Visiting-Community Health Worker services in two existing locations, Greater Bridgeport, and Eastern Connecticut, in addition to planning funds for the New Haven region and a portion of state staffing through 6/30/27. All current funding streams will expire December 31, 2026. OHS is working with a contractor on a sustainability and expansion plan to solidify diversified funding streams through commercial insurance and Medicaid for future program sustainability. A request for expansion planning to the New Haven region is also included: Total Request = \$ 1,810,000

Item	Location	Cost	Purpose
Ongoing Operations	Bridgeport Region	650,000	Funding for 6 months (1/1/27-6/30/27) to support ongoing Family Bridge operations in 8 towns in the region (Bridgeport, Fairfield, Easton, Monroe, Trumbull, Shelton, Stratford, and Milford). *Note: Estimate assumes reducing staff FTE via integration with current hospital positions. Estimate serving 1,774 families/year, with 2,661 RN Visits, 532 CHW visits.
Ongoing Operations	Eastern CT Region	370,000	Funding for 6 months (1/1/27-6/30/27) to support ongoing Family Bridge operations to 13 (Lisbon, Norwich, Montville, Griswold, Windham Colchester, Salem, Franklin, Bozrah, Sprague, Lebanon, Preston & Voluntown) *Note: Estimate based on costs to serve 676 families, with 1,014 RN & 203 CHW visits.
Expansion Planning	New Haven Region (8,777 annual births)	675,000	7/1/25-6/30/26 \$300K in staffing costs (RN and CHW, Admin), coordinate stakeholder outreach & contract with FCI. 7/1/26-6/30/27 \$375K for planning phase for selected contractor and hospital(s), engaging in the FCI Planning Academy (\$75K), ongoing staffing & implementation plan. *Note: No cost for initial 6 months as RFP selection and contracting.
State Program Support	Office of Health Strategy	115,000	Est. 6 months of funding for OHS staff responsible for directing Evaluation activities of Vanderbilt University contract and Sustainability work of the UMass contract

			and working with OEC in directing FB implementation in Bridgeport and Eastern CT, and expansion planning.
Total Request		1,810,000	

Current funding – ARP \$9.3m, CDC \$3.6m, PDG \$1m