Federal Budget Puts Critical Investments at Risk in Kentucky’s 1st Congressional District

A number of key federal investments that help Kentucky families meet basic needs and support our economy are at risk for cuts in the budget resolution that has begun to move in the U.S. House of Representatives. Among the severe reductions are $4.4 trillion in cuts to federal entitlement programs over 10 years. These programs, that benefit many low-income Kentuckians and our communities, are at immediate risk of at least $203 billion of these cuts being fast-tracked through the reconciliation process. Below is information about the role some of these critical investments play in Kentucky’s 1st Congressional District.

Medicaid
Medicaid is a cornerstone of our system of health care coverage, providing access to important preventative services, substance abuse treatment, and care for chronic conditions, among other programs. In the 1st Congressional District, a total of 215,035 people, including seniors, people with disabilities, children, and low-income workers were covered through Medicaid in 2016. Medicaid also brings millions of federal dollars in the economy of every Kentucky community, resulting in jobs for nurses and other care providers.

SNAP food assistance
The Supplemental Nutrition Assistance Program (SNAP) helps low-income Kentuckians afford basic food needs and boosts the economy during downturns when more people become eligible. In 2015 in Kentucky’s 1st Congressional District:

- 44,903 households were receiving SNAP food assistance in 2015.
- 12,804 of these households had an elderly person.
- 22,514 of these households had a child under 18.
- 71 percent of SNAP families with two or more people had at least one person who worked during the year but still struggled to put food on the table.

Supplemental Security Income (SSI)
SSI provides income support for individuals who are disabled or elderly and have little income and few assets. It is a lifeline for very low-income families caring for children with severe disabilities — including Down syndrome, cerebral palsy, autism, intellectual disability, and blindness. SSI provides financial support to these families that, due to the demands of caring for a child with a disability, face higher costs and more demands on their time. Without SSI, many more Kentuckians with disabilities would be in poverty; the program has been shown to lift half of otherwise poor child beneficiaries out of poverty and reduce deep poverty. In December 2016, there were 26,701 SSI beneficiaries in the 1st Congressional District who received $14,072,000 in benefits, an average of $527 per person for the month.

Pell
The Pell Grant program provides financial assistance for low-income individuals to attend and complete college. By increasing access to education and training for those who would otherwise not be able to afford it, Pell also helps to address poverty. Pell Grant awards are already modest in comparison to the rising costs of college, and cuts would make higher education out of reach for more Kentuckians. In 2017, 12,957 students in Kentucky’s 1st Congressional District received a Pell Grant.

EITC & CTC
The Earned Income Tax Credit (EITC) helps raise living standards for low- and moderate-income workers and the Child Tax Credit (CTC) helps low-income working families by offsetting part of the cost of child rearing. The EITC and the Additional Child Tax Credit (ACTC), the refundable portion of the CTC, lift more people out of poverty than any other program besides Social Security. In tax year 2014, 69,262 tax filers in Kentucky’s 1st Congressional District received $169 million in tax credits through the EITC, an average of $2,438 per filer. There were also 47,506 tax filers who received the ACTC in the 1st Congressional District, with an average value of $1,312 in 2013.

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1 KCEP analysis of 2016 enrollment data from the Kentucky Cabinet for Health and Family Services.
2 Census Bureau, 2015 American Community Survey Published Tables.
5 Data for tax credits are based on IRS administrative data compiled by the Brookings Metropolitan Policy Program.