Advocates call for more Safe Haven Baby Boxes

BY TESSA REDMOND
KENTUCKY TODAY

LOUISVILLE — It was a cold night when Molly, an infant left outside St. Andrews Hospital, was discovered in a duffle bag, wrapped in a blanket with a Teddy bear on her chest.

Addia Wuchner, executive director of Kentucky Right to Life, was working as a nurse in obstetrics at the time and recalled seeing that duffle bag sitting on a gurney in the emergency room.

"The room was still, the police didn't move, doctors didn't, nurses didn't. No one wanted to open the duffle bag, because I think they knew who, or what, might be inside."

Molly had not survived.

Preventable deaths like hers are what Safe Haven Baby Boxes aim to eliminate in Kentucky and beyond.

"But one thing that's always stayed with me-and as we talk about Safe Haven laws and we talk about Safe Haven Baby Boxes-is that her mother loved her," Wuchner said outside the Kentucky Right to Life booth at the state fair on Thursday. "Her mother was in some kind of crisis. She knew it wasn't going to be the best choice for her to keep her baby girl."

TESSA REDMOND/Kentucky Today

State Rep. Nancy Tate, R-Brandenburg, demonstrates a prototype Safe Haven Baby Box alongside St. Matthews firefighters during a ceremony Thursday. Tate championed the state law authorizing the lifesaving concept.

Safe Haven boxes are climate controlled, electronically monitored devices installed in fire stations, police stations, hospitals and emergency services offices, providing an anonymous infant surrender option for parents in crisis. A silent alarm is triggered when the box is closed, alerting on-staff personnel to respond quickly to the infant.

Under Kentucky's Safe Haven laws, an infant up to 30 days old can be surrendered face-to-face, or anonymously through the baby boxes.

There are 468 Safe Haven Baby Boxes in 27 states, and 68 are in operation in Kentucky. More are in various stages of development statewide.

Six infants have been surrendered in the state's baby boxes since the first was installed at Okolona Fire Station 1 in Louisville in 2021, including three this year.

"We're giving those babies the opportunity of a lifetime, an opportunity that they potentially would not have received if they had stayed with the family," said Rep. Nancy Tate, R-Brandenburg, who sponsored the authorizing legislation in Kentucky and continues to advocate for it. "It's great to have a service like this, but if nobody knows about it, what's the point?"

Tate highlighted the law passed by Kentucky's legislature last session requiring high schools to display the Safe Haven Baby Box crisis hotline alongside other emergency and crisis numbers. That 1-800 hotline for parents in need has fielded 9,000 calls so far and facilitated 500 in-person infant surrenders nationwide.

Signage produced by Kentucky Right to Life is available to any business who desires to display the information, from restaurants to truck stops to health departments, Wuchner added.

"In Kentucky, we're setting the tone," said Sen. Shelley Funke-Frommeyer, R-Alexandria. "But we still have work to do."

A Safe Haven prototype is on display at the Kentucky Right to Life booth through Sunday. Learn more about Safe Haven Baby Boxes and their locations in Kentucky, at shbb.org.

Barr, Beshear spar over reasons behind hospital financial troubles

BY PIPER HANSEN
TRIBUNE NEWS SERVICE

One of Kentucky's congressman is placing blame for the financial situation rural hospitals find themselves in on everything but the One Big Beautiful Bill Act that will usher in major changes to Medicaid next year.

In a letter to Gov. Andy Beshear, U.S. Rep. Andy Barr questioned the validity of a study that identified more than 335 financially struggling rural hospitals, the most of which were located in Kentucky.

If those rural hospitals close, patients in much of rural Central, Southern and Eastern Kentucky would be funneled into urban areas where city hospitals could become crowded and out-of-town patients could see higher price tags on care.

The battle between the two Kentucky officeholders highlights an ongoing debate over government spending and suggests where priorities rest ahead of upcoming elections.

Barr, who represents Kentucky's 6th District, is running against Democratic nominee Charles Booker to replace longtime retiring Sen. Mitch McConnell. Beshear's term ends in December 2027 and while he has not made an official bid for a different seat, he is widely considered a 2028 presidential candidate hopeful.

The number of hospitals at risk frequently has been used by Beshear in criticizing the sweeping bill that puts work requirements, more frequent renewals and minimum out-of-pocket payments to the federal Medicaid program for people with limited income and resources.

"You repeatedly placed a specific number before the public, directly attributed the alleged threat to the legislation and used that claim to condemn Kentucky's Republican congressional delegation," Barr wrote in the letter dated Aug. 25.

The study, commissioned by U.S. Senate Democrats from the Sheps Center for Health Service Research at the University of North Carolina, suggested 35 rural hospitals in Kentucky were at risk of closure if Medicaid cuts passed, which they did.

Nearly 1.5 million Kentuckians are enrolled in Medicaid, almost 30% of the state's population, according to KFF, the nonprofit health policy research organization.

Financial pressure from Kentuckians losing coverage due to Medicaid changes could mean healthcare providers, especially those in rural areas, implement cost-saving practices, such as reducing services, cutting staff and investing less in facility improvements.

Rural hospitals — in addition to nonprofit hospitals and those with patients covered by Medicaid — are more vulnerable to closure, cutting back on care to save money, and have even thinner margins than other healthcare facilities.

In the letter, Barr said the hospitals identified by the study as being vulnerable came before the federal Rural Health Transformation Program promised to put $50 billion in rural healthcare programs across the country between 2026 and 2030. The money is a one-time infusion and additional money could be awarded if programs perform.

In fiscal year 2026, which begins Oct. 1, Kentucky stands to receive approximately $213 million from the program the state said last year it plans to invest in addressing chronic disease, women's health, behavioral health, oral health and emergency response.

"If 35 hospitals are truly on a path toward closure, as Governor Beshear repeatedly claims, why doesn't his plan prioritize those hospitals and reinforce them with the hundreds of millions of dollars that Congressional Republicans provided his administration in July of last year," Barr said. "If he stands by that claim, why doesn't his plan reflect it?"

Beshear called Barr's letter "misleading and inaccurate," during his weekly update Thursday, and said if the congressman, whom he called "Candidate Barr," does believe the estimates to be incorrect, he should ask the Kentucky Hospital Association about it.

"The big, ugly bill — which Barr supported doing the president's bidding — cut $21 billion over 10 years in Medicaid funding for Kentucky. That is a fact," Beshear said Thursday. "That is $21 billion fewer dollars running through our healthcare system, of course that's going to impact hospitals."

In many rural communities across Kentucky, Beshear said if a leading employer such as the hospital closes, so do restaurants, coffee shops, banks and insurance companies that exist as a result of the healthcare facility bringing people to the area.

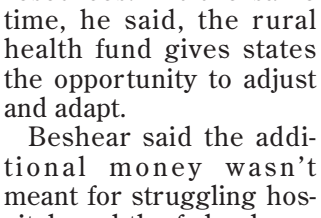
"These aren't my words; they come from the organization that represents hospitals themselves," Beshear said. "And it's not just that those 35 rural hospitals are at risk, which is more than enough to cause concern, but studies also estimate that more than 250,000 hardworking Kentuckians could lose their healthcare coverage and 20,000 healthcare workers could lose their jobs."

Barr, in the letter and a statement that followed, said Medicaid changes included in the federal bill put it "on a more sustainable trajectory while protecting substantial federal resources." At the same time, he said, the rural health fund gives states the opportunity to adjust and adapt.

Beshear said the additional money wasn't meant for struggling hospitals and the federal government advised states as to what investments would get approved which is why his administration made the plan it did.

Toward the end of his response to Barr's letter, Beshear said policy that puts healthcare on the line is "wrong, it's senseless, it was completely avoidable and those that supported the big, ugly bill are 100% responsible for the losses of life that we're going to see and the impact on our rural communities."

"Faced with the reality of his actions in supporting the president and these really cruel Medicaid cuts, Barr is now trying to place blame elsewhere or find a way out," Beshear said.



PUBLIC NOTICE

Notice is hereby given that Leslie Clements and Chris Kincaid of 5606 Southland Blvd. Louisville KY 40214, has filed an application with the Engergy and Environment Cabinet to construct a single family residence elevated on posts above BFE. The property is located approximately at -87.331051 degrees W, 37.39316 degrees N. The property is located at 6005 1st St. Curdsville KY, 42301, 0.1 miles NE from the northernmost end of Main St., along the Green river.

Any comments or objections can be submitted via email to: DOWFloodplain@ky.gov Kentucky Division of Water, Floodplain Management Section, 300 Sower Blvd. Frankfort, KY 40601. Call 502-564-3410 with questions.

FIGHT

FROM **PAGE A1**

answer. So I try not to freak out. I got on Facebook just to give myself a few minutes before I tried to call again, and the first thing that popped up on Facebook was the (police) scanner, and it had said there was a wreck out where his location was.

"So I called Braxton's girlfriend to see where he was, and she said, 'he's not here yet; we're waiting for him to get here.' So at that time, I was like, I think he's had a wreck."

Julie's suspicion was confirmed when Pat Bryant, Braxton's father, called the Daviess County Sheriff's Office and was dispatched to the accident scene. The news was not good.

"I'm not supposed to make it," Braxton said this week while holding Berkley at his family's home. "They were talking about me donating my organs and just crazy stuff like that."

"I wouldn't give up because of the kid. I had to make sure that I was his dad and stuff like that. He's very important to me. He's a big part of my life. Huge part."

— Braxton Payne

Doctors told the family that Braxton's injuries — which, in addition to massive head trauma, included internal lacerations and orbital fractures — were unsurvivable. But they still maintained hope.

"They put him in critical care, and after a couple days, it was if he survives, he's not going to have a good quality of life," Pat Payne said. "I think one of the biggest things that we did was believe in God. And we bet on Braxton, bet on our family."

Braxton spent more than three weeks in a coma, with his family not knowing what his mental condition would be if he did survive.

"They came and did a brain death evaluation, and she was like, 'he's got brain activity, we need to give him time,' " Pat said. "That was kind of the turning point. That's when they keep him in a coma to help him heal, let the swelling go down. When he did finally wake up, one of the nurses got him to raise his eyebrows a little bit ... can you move your toes and stuff like that; and he was responding.

"Of course, we're very anxious and nervous, scared for all those types of things."

While Braxton never lost the ability to breathe on his own, he was on a ventilator for weeks, which led to him being transferred to a specialty hospital in Evansville.

"Their job was really to wean Braxton off his ventilator," said Pat, whose son was transferred to Frazier Hospital in Louisville at Halloween for intensive therapy that included having to relearn almost everything.

"We pushed Braxton hard because they felt like the more that he was engaged, the more that he participated, the more that he pushed himself, the better he was, the better his chances were," Pat said. "We were told multiple times, 'he's in a great position because he's young, he's healthy, he's a fighter.' One of the biggest challenges was really helping him kind of understand where we were at the time, because he didn't know. He had to relearn how to walk and eat."

Braxton was able to come home on Dec. 11, 2025, and continued therapy as an outpatient two days a week until he "rang the bell" — noting his completion of the therapy on May 28.

Braxton said he drew a lot of his motivation to improve from his son, who quickly got past his own breathing issues and is 100% healthy today.

"I wouldn't give up because of the kid," Braxton said. "I had to make sure that I was his dad and stuff like that. He's very important to me. He's a big part of my life. Huge part."

While Braxton has made tremendous strides in his recovery, he and his father share a tattoo — #2 Do The Work — that references his jersey number in sports and the road that remains to full recovery.

"That's one of the biggest things with Braxton, is it's all about hope," Pat said. "It's just don't give up, just keep moving forward."

When asked his plans for the future, Braxton said, "What can't I do?"

It seems there is no stopping him.