

# Public Policy Update

June 19, 2009



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## Home Visitation Program Update

### Evidence-Based Home Visitation Act

Senators Bob Menendez (D-NJ) and Bob Casey (D-PA) introduced the Evidence-Based Home Visitation Act (S. 1267) this week, which provides a legislative framework for implementing President Obama's proposed Home Visitation Program. This legislation would:

- Create an innovative, competitive grant program to promote home visitation programs with the strongest evidence of effectiveness in producing generational improvements in the lives of low-income children and families
- Facilitate the improvement of high quality home visitation programs by providing operational and research funding to allow them to provide the most effective services to needy children and families. Research funds are provided to all home visiting programs participating in initiative to improve their programs and make adaptations to meet needs of children and families

### Core Components of the Evidence-Based Home Visiting Act (S. 1267):

- Administered by the Department of Health and Human Services, this program provides mandatory funds through a competitive grant process to States, Tribes, Territories and local public and private entities for the operation and research of home visitation programs that improve prenatal, maternal and newborn health, child health and development, school readiness and academic achievement, and maternal employment of low-income children and families.
- Program funding is provided for the operation and research of home visitation programs with the strongest evidence of effectiveness in producing long-term, significant benefits to pregnant women and children from birth through age 5. High quality home visitation programs that show significant promise of effectiveness but do not meet the highest evidentiary standards also receive funding for program operation and research. The Secretary has discretion to determine feasible funding percentages between the strongest and high quality programs that fulfill the goals of this legislation.
- The Centers for Disease Control & Prevention (CDC) determines program classification and the process by which programs progress from "high quality" to "strongest," capitalizing on its previous work in identifying evidence-based, effective community interventions and its work in defining evidentiary standards.

### Funding & Program Operation:

- The Secretary will award grants to States, Territories, Tribes and public and private entities through a competitive grant process that ensures geographical distribution of funding.
- Prior to receiving grant awards to implement an approved model of home visitation, the local agency delivering services must abide by the requirements, if any, of the national or regional home visitation program identified by the Secretary, to ensure such local agency is capable of providing services consistent with the model.
- The Secretary may award planning grants to States and local public and private entities.
- Directly or through contracts with existing non-governmental entities with expertise in program models, the Secretary shall provide training, technical assistance, data support and quality assurance to grantees. The Secretary shall contract out these responsibilities where, for a fixed amount of administrative dollars, greater fidelity to the program model is likely to result than if the responsibilities are carried out by HRSA directly. Such contracting decisions shall be made separately for each programs model.

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- Grantees must match federal funds, which may include in-kind contributions and State Medicaid share. However, the Secretary may waive matching requirements due to economic hardship.
- States may maximize block grant funding by seeking reimbursement for appropriate home visitation services covered by Medicaid, Early Head Start or other federal sources, provided States do not receive duplicative reimbursement.
- State Medicaid programs have the option to use simplified methods to reimburse approved home visitation programs that provide Medicaid-covered services to parents and children who qualify for Medicaid. Rather than require detailed itemization and categorization of each service provided during a home visit, this option lets States make payments based on the average cost per visit of providing services through the applicable home visitation model. States that elect this option may use grant funding to fund home visitation services for low-income expectant mothers and children who were eligible for home visitation services under Medicaid but who lose Medicaid eligibility during the course of the home visitation program.

### Research:

- In collaboration with the CDC, the Secretary shall establish adequate research funding allocations and a comprehensive research agenda for the strongest and high quality models that does not interfere with their efficient implementation, that funds research that can be used by the CDC to determine the progression of “high quality” to “strongest” models and that funds research to further improve strong models and the replication of strong models.

### House Health Care Reform Discussion Draft Released

The House Committees on Energy & Commerce, Ways & Means and Education & Labor just released discussion draft of health care reform includes two relevant sections:

- Section 1704 (pp 645-660) incorporates the Early Support for Families Act (HR 2667), introduced earlier by Representatives McDermott (D-WA), Davis (D-Ill) and Platts (R-PA); and
- Section 1813 (pp 678-680), Optional Coverage of Nurse Home Visitation Services, provides enhanced FMAP for proven nurse home visitation services.

Additional information will be provided shortly about Section 1813. Draft available at

[http://energycommerce.house.gov/Press\\_111/20090619/healthcarereform\\_discussiondraft.pdf](http://energycommerce.house.gov/Press_111/20090619/healthcarereform_discussiondraft.pdf)

### Senate Finance Committee

The Senate Finance Committee has postponed release (until possibly after July 4<sup>th</sup> recess) of its mark-up of health care reform legislation to reduce the cost of the bill recently projected to cost \$1.6 trillion over 10 years by the Congressional Budget Office.

### Other Developments

We continue to work closely with the National Home Visiting Coalition to build bi-partisan, bi-cameral support for the moving legislative vehicles that support President Obama’s proposed Home Visitation Program.