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President Obama Signs the FY2012 Budget into Law

\$350 Million Sustained for Home-Visiting Program

DENVER, CO (Dec. 23, 2011) — President Barack Obama signed into law today the FY2012 Consolidated Appropriations Act (HR 2055), which funds government programs for the 2012 fiscal year. This legislation maintains \$350 million for the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program – enabling states, territories and tribes to continue expansion of evidence-based home visiting programs, including the Nurse-Family Partnership® (NFP) program.

HR 2055 contains nine appropriations bills, including the Labor, Health and Human Services, Education and Related Agencies bill that contains funding for the MIECHV Program. The bill previously passed the U.S. House of Representatives on Dec. 16, 2011, and the U.S. Senate on Dec. 17, 2011.

“We applaud Congress for recognizing the importance of investing in programs that have proven outcomes,” stated Thomas R. Jenkins, Jr., Nurse-Family Partnership President and CEO. “The MIECHV Program provides essential funding to states to improve the health and well-being of children and families, while reducing costs to communities. This funding will allow states to give more children born into poverty a better start in life.”

The MIECHV Program was authorized as part of the Patient Protection and Affordable Care Act (ACA) and includes \$1.5 billion in mandatory funding for FY2010 through FY2014. The FY 2012 allocation represents the third year of funding for states, territories and tribes to continue implementation and expansion of evidence-based home visiting programs such as Nurse-Family Partnership.

NFP is one of nine eligible, evidence-based models that states can choose to implement with the majority of MIECHV Program funding. States must use at least 75% of the allocations for the implementation of one or more of these nine eligible models. In addition, states may choose to use up to 25% of the allocations on promising home visiting models.

Previously, the U.S. Department of Health and Human Services identified NFP as an evidence-based home visiting model with the highest number of favorable ratings in child health; child development and school readiness; family self-sufficiency; maternal health; positive parenting practices; reductions in child maltreatment; and reductions in juvenile delinquency, family violence and crime. States receiving the federal MIECHV Program funding are held accountable for meeting certain benchmarks in these areas over time with families enrolled in these programs.

NFP currently serves approximately 23,000 families in 34 states. With the MIECHV Program funding, NFP expects to expand to 38 states in FY2012. This new federal funding is also expected to create new jobs for registered nurses in communities throughout the country.

Nurse-Family Partnership is a nurse-led, [evidence-based community health](#) program that pairs registered nurses with first-time, low-income mothers for home visits from pregnancy until the child turns two. The NFP program relies on locally-employed registered nurses (RNs), and participation is voluntary for the mother.

About Nurse-Family Partnership

The Nurse-Family Partnership National Service Office (www.nursefamilypartnership.org) is committed to producing enduring improvements in the health and well-being of low-income, first-time parents and their children by helping communities implement and sustain an [evidence-based public health program](#) of home visiting by registered nurses. Nurse-Family Partnership is the most rigorously tested [maternal and early childhood health program](#) of its kind. Randomized, controlled trials conducted over 30 years demonstrate multi-generational outcomes that benefit society economically and reduce long-term social service expenditures. Nurse-Family Partnership is headquartered in Denver, Colorado.