NFP SOUTH CAROLINA PAY FOR SUCCESS PROJECT UPDATE

In 2016, Nurse-Family Partnership (NFP) and South Carolina launched the nation's first Pay for Success (PFS) project to improve maternal and child health outcomes for low-income families. This PFS project extends NFP services statewide to an additional 3,200 Medicaid-eligible first-time moms and their children over a six-year period. Four decades of research have shown NFP's favorable impact on pregnancy outcomes, child health and development, and mother's life course development. NFP partners first-time mothers with a personal, specially-trained nurse home visitor who guides them through pregnancy until their child's second birthday. By serving women who are most at-risk, the NFP model maximizes the return on investment and impact of services on both families and society.

PROJECT DETAILS

REACH
Serves 29 of South Carolina's 46 counties and includes 9 community-based, experienced network partners delivering the NFP program.

FUNDING
Philanthropic investment ($17M) + Medicaid reimbursement via a 1915(b) Waiver ($13M) awarded to the South Carolina Department of Health and Human Services (SCDHHS) by the federal Centers for Medicare and Medicaid Services (CMS). Philanthropic supporters of the project include: The Duke Endowment; BlueCross BlueShield of South Carolina Foundation; The Boeing Company; Greenville County First Steps; and Blue Meridian Partners DBA The New Partnership for Youth LLC.

OUTCOME METRICS
- Reduction in Preterm Births
- Reduction in Child Injuries and Hospitalizations/Emergency Department utilization
- Increase in Healthy Birth Spacing between 1st and 2nd child
- Increase in number of first-time moms served in Low-Income Zip Codes (LIZCs)

METHODOLOGY & EVALUATION
Using a Randomized Controlled Trial (RCT), independent Evaluator measures level of outcomes achieved to inform outcome payments.

PARTNERS
Service Provider: Nurse-Family Partnership team including NFP network partners and National Service Office (NSO) staff
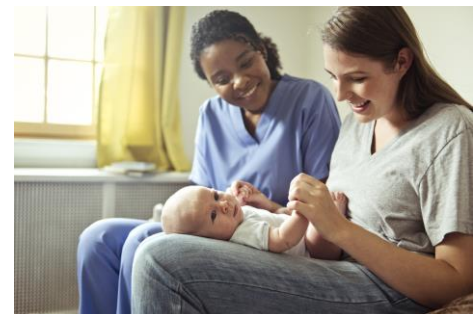Outcomes Payor: South Carolina's Department of Health and Human Services (SCDHHS)
Fiscal Intermediary: Children's Trust of South Carolina
Project Intermediary: Social Finance
Evaluator: Abdul Latif Jameel Poverty Action Lab (J-PAL) North America at MIT
Technical Assistance (Pro-bono): Government Performance Lab (GPL) at the Harvard Kennedy School

PROJECT INNOVATIONS

- Increase Caseloads
- Employ Robust Marketing and Outreach Campaigns
- Implement Telehealth
- Reduce Program Cost, Scale Up and Maintain NFP Model Fidelity

PROGRESS TO-DATE

SUCCESSES

▪ <u>Enrollment Strategies</u>: Successfully tracking enrollment of 3,200 more South Carolina moms receiving NFP services by 2020. Helping improve the Medicaid Referrals process, resulting in increased referral quality.

▪ <u>Data Collection and Assessment</u>: Strategic data usage positively impacting client recruitment, outreach, and public awareness.

▪ <u>Caseload</u>: Enabling strategies to increase average caseload of nurses, including adjusting client visit schedules and incorporating Telehealth to complement home visits for better service and support to meet the needs of NFP moms.

▪ <u>Nurse Education</u>: Ongoing training, preparation, and support of NFP nurses in South Carolina to ensure RCT integrity and fidelity to the NFP model for serving families in all phases of the program.

CHALLENGES

▪ Locating moms in <u>Low-Income Zip Codes (LIZCs)</u> to focus NFP services on the most at-risk families, thereby maximizing impact and return on investment. The NSO has adjusted outreach tactics to address this challenge.

▪ Locating and enrolling <u>Young Moms</u> between the ages of 15 and 19, largely due to dramatic drops in teenage pregnancy rates in the state. Despite this positive trend, there is still a clear need for NFP services among this demographic.

▪ <u>NFP Nurse Recruitment and Retention</u> are tied to client engagement, client retention, and family outcomes. Nurse attrition can also affect local teams' ability to meet client enrollment targets. National resources have been deployed around the professional development of NFP nurses as well as Human Resources support in talent recruitment and hiring for nurse vacancies.

NEXT STEPS

▪ In the final months of project enrollment, continue to focus on operational efficiencies/productivity to maximize available funding while still maintaining service quality, fidelity to the model, and of course transformative impact on the lives of families served.

▪ In years 5 and 6 of the project, as outcomes data on moms and children served in the PFS project become available, assess the effectiveness of Pay for Success as a means of scaling operations.

NURSE-FAMILY PARTNERSHIP AND PAY FOR SUCCESS

Pay for Success (PFS) is a unique form of social innovation financing that allows states to access the resources needed now to scale effective programs, like Nurse-Family Partnership, and achieve improved social outcomes. At its core, PFS is a three-way contract between government, a provider, and investors in which investors provide funding upfront to pay for program services, and the government is only required to pay back investors if and when the provider meets agreed upon outcome metrics. The South Carolina PFS project provides NFP with a unique vantage point in approaching future Pay for Success projects – by highlighting well-designed and implemented research showing NFP's sizable, sustained benefits to participants and society, as well as return on investment to government.

For questions or more information about the South Carolina Pay for Success Project please visit: https://www.nursefamilypartnership.org/public-policy/pay-for-success/
Or contact Chris Bishop: chris.bishop@nursefamilypartnership.org