

# 2023 FEDERAL LEGISLATIVE AGENDA

RIGOROUSLY TESTED PROGRAMS WITH MEASURABLE RESULTS



The National Service Office (NSO) for Nurse-Family Partnership and Child First is committed to serving more families and children with a holistic approach focusing on the highest need communities by providing evidence-based services that improve physical and mental health, reduce child welfare involvement, increase educational success and family self-sufficiency. This shared multi-generational focus has demonstrated a clear and measurable return on investment by effectively using community resources and maximizing the impact of public and private funds. The NSO is focused on advancing bipartisan, evidence-based policy solutions that improve the health and well-being of families and promoting economic mobility for communities.

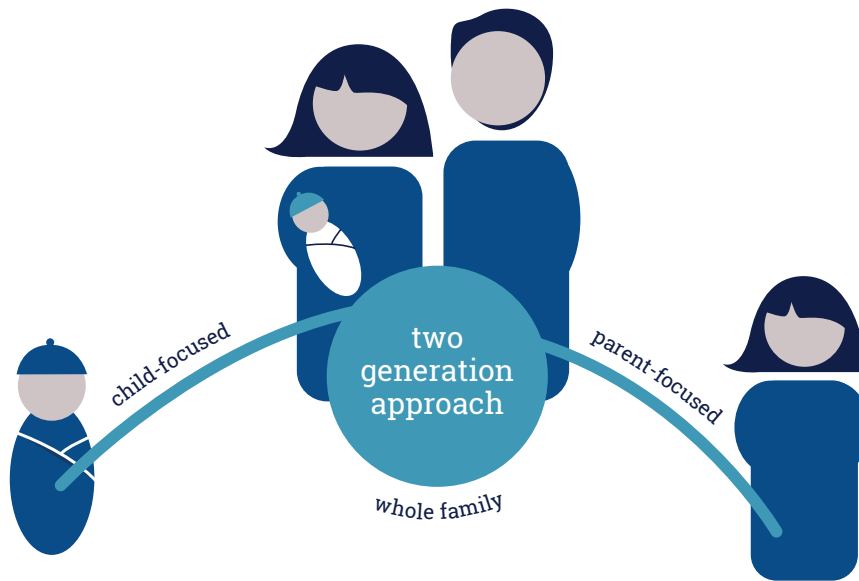


## PROGRAM FUNDING

The successful bipartisan reauthorization of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program in the Consolidated Appropriations Act of 2023, has been extended and expanded the MIECHV program. This ensures dedicated federal funding for evidence-based home visiting programs, including Nurse-Family Partnership and Child First through FY2027. However, to serve more families across more communities, the National Service Office is advocating to:

- **Improve and streamline Medicaid coverage for Nurse-Family Partnership and Child First.** Currently, Medicaid supports a portion of Nurse-Family Partnership in 23 states and Child First services in 1 state. For Nurse-Family Partnership, approximately 80% of new parents enrolled in the program are covered by Medicaid. However, existing billing pathways are often overly burdensome and cover only a portion of a home visit, resulting in cumbersome administrative work and many providers declining to use the benefit. To provide more targeted care, streamlined billing, and better outcomes for babies and families in all states, which often result in direct cost savings to Medicaid, the NSO supports a mandatory Medicaid benefit that covers evidence-based home visiting provided by Medicaid-eligible providers.
- **Sustain and expand eligible funding sources to support the sustainability and growth of Nurse-Family Partnership and Child First programs.** Eligible funding sources include the Title V Maternal and Child Health (MCH) Block Grant, Temporary Assistance for Needy Families (TANF), Healthy Start, and the Infant and Early Childhood Mental Health Grant Program and the Child Abuse Treatment and Prevention Act (CAPTA).
- **Increase flexibility within the Community Mental Health Services Block Grant (MHBG) to allow for upstream prevention programs to be funded by states.** Child First provides intensive mental health services to families with young children that have experienced trauma and adversity. The model has a unique role in treating and/or preventing future mental health problems because it intervenes with young children during a critical period of development before serious mental health issues can develop. The NSO supports making prevention-targeted funding under the MHBG an allowable use by states to provide more flexibility, better outcomes, and prevention-focused cost-savings.
- **Strengthen Implementation of the Family First Prevention Services Act (FFPSA).** FFPSA was passed in 2018 to support families by providing evidence-based services to families to help children that were at-risk of being separated from their parents safely remain together. Since 2018, implementation has been slow, and very few federal dollars have gone to programs, including Nurse-Family Partnership and Child First, which are both approved by the clearinghouse and included in many state plans. The National Service Office encourages Congress to investigate and address the challenges within implementation to be able to serve families as intended.





### PROGRAMMATIC OVERVIEW



**Nurse-Family Partnership**<sup>®</sup> is an evidence-based, community health program that helps transform the lives of babies born to first-time parents facing a range of challenges to breaking the cycle of intergenerational poverty. Families enrolled in Nurse-Family Partnership face significant challenges to leading healthy lives and overcoming adversity. Nurse-Family Partnership addresses these challenges by partnering expectant parents with a registered nurse at a pivotal moment—beginning early in pregnancy with a first child—and providing ongoing nurse home visits that continue through the child’s second birthday. Nurse-Family Partnership is among the most proven and widely replicated programs during this critical period that has dramatic and lasting impacts on the health and well-being of vulnerable families. Independent research proves that communities also benefit from this relationship—every dollar invested in Nurse-Family Partnership programs for the families with the greatest social and economic needs can yield more than five dollars in return.



**Child First**<sup>®</sup> is an evidence-based, early childhood, mental health program that supports very young children and families who face major adversity. The intervention builds resilience and promotes healing to prevent the damaging effects of poverty, trauma, abuse and neglect, and chronic stress. Research shows that Child First improves child and parent mental health, promotes school readiness, and decreases child abuse and neglect. This can dramatically improve both the immediate and long-term health and wellbeing of families.

**For questions or more information, please contact our  
Policy & Government Affairs Team at [pga@nursefamilypartnership.org](mailto:pga@nursefamilypartnership.org)**