



June 14, 2017

The Home Visiting Coalition's Message Regarding the Increasing Opportunity through Evidence-Based Home Visiting Act (H.R. 2824)

Late last week, the U.S. House of Representatives' Ways and Means Committee introduced legislation reauthorizing the Maternal, Infant, and Early Childhood Home Visiting program (MIECHV). H.R. 2824, the [*Increasing Opportunity through Evidence-Based Home Visiting Act*](#), calls for a five-year extension at the current annual allocation of \$400 million. The bill also includes significant modifications to the MIECHV program that have generated concerns among the Coalition.

The Home Visiting Coalition applauds the Committee's decision to put forth reauthorizing legislation at a time when there are so many competing priorities vying for attention. This effort signals its commitment to home visiting and ensures MIECHV is not allowed to expire in September. The legislation's five-year extension, which the Coalition seeks, would ensure that states and communities have the stability and security necessary to continue effective home visiting services that help improve the health and overall well-being of our nation's most vulnerable children and families.

The Home Visiting Coalition believes the current design of the MIECHV program has sufficient flexibility to allow states to meet the needs of families and children in the ways that make the most sense for each individual community. Additionally, the Coalition is asking for an increase in funding to reach \$800 million per year by the final year of authorization to meet the very real and growing need for effective evidence-based home visiting.

The Coalition stands ready to work with Congress in a bipartisan manner to reauthorize MIECHV so that it continues to serve the hardest-to-reach populations of children and families.

We are looking forward to meeting with the lead sponsors of the legislation to gain a better understanding of the proposed program modifications, express our thoughts and suggestions about them, and further make the case for a funding expansion that will allow states to serve more families in need.

Specifically, the Coalition is interested in clarifying the following provisions of H.R. 2484 that could unintentionally hamper MIECHV's ability to deliver the highest quality services to children and families:

Funding Level: MIECHV is one of several mandatory, non-defense programs that are subject to sequestration. In FY2017, MIECHV funding was cut by 6.9 percent, resulting in a nearly \$26 million loss in funding for the program. If this program is level funded, sequestration, coupled with the effects of inflation, will greatly affect the ability of MIECHV to improve outcomes for families in need. We would appreciate the committee considering ways to mitigate these losses in the reauthorization.

New Evidentiary Tier: MIECHV enjoys the distinction of being among a select group of evidence-based programs with a rigorous evidentiary standard. With the exception of promising programs, home visiting models desiring to participate in MIECHV must demonstrate their effectiveness by meeting certain outcomes through high-quality quasi-experimental designs or randomized controlled trials. In fact, many of the home

visiting models participating in the MIECHV program have decades of scientific and real world experience pointing to the fact that achieve one or more of the benchmark outcomes that has become the hallmark of the MIECHV program. In addition, MIECHV requires states to meet or exceed benchmarks that correspond to important child and family outcomes. MIECHV's strong evidentiary standard has been credited for incentivizing private/public partnerships to foster greater investments in MIECHV. Given that MIECHV is among the programs considered the gold standard with respect to its evidentiary standard, we question the need for yet another evidentiary tier with even more stringent requirements, particularly in the absence of the national evaluation demonstrating the need for stronger evidentiary standards.

Matching Requirement: While we appreciate the fact that the legislation allows states to match MIECHV funding with funding from other federal programs, we note that the phased-in dollar-for-dollar match will create the potential for significant instability in programs and communities at risk of losing MIECHV-funded services if certain states cannot meet the state match. In particular, we are concerned that some poorer states or states without a long history of the ability to invest in home visiting may be forced to reject MIECHV funding as a result of the match. We are also concerned that certain states who fund other state and federal early childhood programs, such as Georgia who funds statewide preschool, will be in jeopardy of losing MIECHV funding solely as a result of their desire to concentrate state funding in other equally-important initiatives for children and families. We are also concerned about the programs eligible for the state match. For example, should Congress significantly cut Medicaid or impose percapita caps, states would face difficulty satisfying the match with Medicaid funding.

State Needs Assessment: The Coalition has questions regarding the manner in which the needs assessment will be required and used. For example, we question what states are expected to do with an updated needs assessment in an environment where there is no additional funding. We do not want states to defund current programs in needy communities to implement programs in even higher risk communities. Such a scenario does not fulfill the need to expand services to more children and families in disadvantaged communities. In addition, we note a new provision in the legislation that allows states to consider community resources when selecting high-needs communities to implement programs. Many disadvantaged communities lack resources, particularly rural and tribal communities that lack health care providers and other resources. We are concerned that states could inadvertently cherry-pick communities to avoid the highest-risk, highest-needs communities simply because they lack resources. This could have a particularly negative impact on rural and tribal areas. The flexibility in MIECHV already allows states to match a community's needs and resources with an appropriate home visiting model. We look forward to learning more about this provision and working with members of Congress to maintain MIECHV's goal of serving the hardest-to-reach communities.

Economic Self-Sufficiency: We have concerns that the additional language to the family economic self-sufficiency benchmark ("which shall include measures of employment, earnings, and receipt of means-tested benefits") contradicts the benchmark that pertains to improvements in the coordination and referrals to other community resources and supports. Home visitors are trained to support families through mentoring, education, and when appropriate, referrals for additional assistance like mental health services or job training. The new language undermines the efforts of home visitors to help improve family stability by leveraging already-existing community resources. Additionally, collecting data on these measures will make development of a trusted relationship between the home visitor and parent harder to achieve, ultimately limiting the core outcomes the home visiting program was designed to achieve.

Pay-For-Success: The Coalition supports innovative financing mechanisms that allow more children and families to receive home visiting services. However, the bill's provisions would allow states to devote its entire MIECHV allocation to pay-for-success initiatives, which could conceivably reduce, eliminate or create extended gaps in services to children and families. If the Committee is interested in using pay-for-success as a financing source, that should be in addition to current funding levels and not be allowed to replace them.

Pay-for: Control Unlawful Fugitive Felon (CUFF) Act: We have serious reservations about this pay-for, which would deprive individuals who were not convicted of a crime from receiving Social Security disability or retirement payments to which they would otherwise be entitled.

MIECHV has always been a program that enjoys bipartisan support. We commend the legislation's sponsors, Representative Adrian Smith, Representative Burgess, Representative Tiberi, Representative Reed, Representative Meehan, Representative Noem, and Representative Walorski, for advancing MIECHV's reauthorization, and appreciate their consideration of our questions and concerns. We look forward to working with Committee members and staff, as well as others in Congress to reauthorize this important program for children and families.