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## FISCAL IMPACT REPORT

ORIGINAL DATE 2/16/07

SPONSOR HHGAC LAST UPDATED \_\_\_\_\_ HB 168/HHGACS

SHORT TITLE Statewide Home Visiting Program SB \_\_\_\_\_

ANALYST Lucero

### APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY07	FY08		
	\$50.0	Recurring	General Fund

(Parenthesis ( ) Indicate Expenditure Decreases)

Substitutes HB 168, Relates to SB 59 "NORTHERN NM HOME VISITATION PROGRAMS"  
Relates to Appropriation in the General Appropriation Act

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Higher Education Department (HED)  
Department of Health (DOH)  
Public Education Department (PED)  
Children, Youth and Families Department (CYFD)

### SUMMARY

#### Synopsis of Bill

House Health and Government Affairs Committee substitute for House Bill 168 appropriates fifty thousand (\$50,000) from the general fund to Children, Youth and Families Department for expenditure in 2008 to develop a comprehensive, long-range plan to phase in a statewide system of universal voluntary home visiting that serves new families during pregnancy and continuing for up to three years. The bill also mandates that a home visiting system development group shall be established consisting of staff from Children, Youth and Families Department, Department of Health, Human Services Department, Higher Education Department and Public Education Department and other early childhood experts, and other early childhood experts, and the group shall report to the legislative health and human services committee by November 1, 2007.

## **FISCAL IMPLICATIONS**

The appropriation of fifty thousand (\$50,000) contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2008 shall revert to the general fund.

The PED estimates that participation on the home visiting system development group will require approximately 250 hours of staff time (Educator Administrator-A @\$25.50/hour X 250 hours X 30% benefits). Total cost is \$8,287.50 plus travel costs of approximately \$500.00. There could be an additional impact depending on what resources PED would be requesting to contribute as part of this group.

## **SIGNIFICANT ISSUES**

Home visiting is a preventive strategy used to offer parents and families better pregnancy and birth outcomes, increased time between pregnancies, improved child health and safety, parenting skills, and improved economic well-being. Children receiving home visiting show improvements in academic skills, are more likely to complete high school, less likely to abuse drugs, more likely to be employed and less likely to be involved in the criminal justice system.

Mothers face a variety of obstacles including being teens, having less than a high school education, being single, living at or below the poverty level, and health disparities. The latter include, access to and use of prenatal care, smoking, alcohol and drug abuse, being overweight, and family stressors such as homelessness or jail time. These disparities often disproportionately affect racial and ethnic minorities. A statewide home visiting initiative would be able to address these issues.

Access to voluntary home visiting is a priority of the Lieutenant Governor's Early Childhood Action Network (ECAN), a statewide, multi-agency, multidisciplinary working group that is aimed at assuring that all newborns and their families are connected with essential services at the local level. Home visiting is a prevention strategy used by states and communities to improve the health and well being of infants and their families and to maximize each child's potential and readiness to succeed in life.

In New Mexico, home visiting services are fragmented, provided by several agencies and funded through various mechanisms. HB168s proposes appropriating funds to develop a comprehensive, long-range plan for a statewide system of universal voluntary home visiting. A coordinated plan could help to assure that all home visiting programs or providers work together so that the families of New Mexico receive services seamlessly.

Research has shown that new families who receive intensive home visits starting during pregnancy and continuing to age 3, have improved short-term outcomes including better pregnancy and birth outcomes, increased pregnancy intervals, improved child health and safety, reduction of emergency room use and improved preschool readiness. Parents in families receiving home visiting have better parenting skills, improved economic well-being, and enhanced maternal life courses. Children receiving home visiting show improvements in academic skills, are more likely to complete high school, less likely to abuse drugs, more likely to be employed and less likely to be involved with the criminal justice system. Investment in evidence-based home visiting programs has demonstrated significant returns on investment returning from \$6,000 to \$17,200 per youth

(<http://www.nursefamilypartnership.org>;[http://www.rand.org/pubs/research\\_briefs/RB9145/index1.html](http://www.rand.org/pubs/research_briefs/RB9145/index1.html)) In Washington State, Nurse Family Partnership Home Visiting programs resulted in savings of \$2.88 for every \$1 invested. In New Mexico, an estimated 10-11% of all mothers received at least one home visit in the years 1997-2000 and an estimated 25% of first time or teen mothers receive at least one home visit ([www.health.state.nm.us/phd/prams/home.html](http://www.health.state.nm.us/phd/prams/home.html)).

This request was not submitted by CYFD to the New Mexico Higher Education Department for review and is not included in the Department's funding recommendation for FY08.

### **PERFORMANCE IMPLICATIONS**

HB168s is related to the Governor's Performance and Accountability Contract, Goal 2: Improve Health Outcomes and Family Support for New Mexicans; Task 2.5, Improve health, developmental, and educational outcomes of newborns.

### **ADMINISTRATIVE IMPLICATIONS**

None for Medicaid. Because this appropriation is not for services, there would be no additional federal funding leveraged through Medicaid. However, one of the reasons for the development group and for HSD's participation in the group is to explore leveraging federal matching funds through Medicaid for at least some of the home visiting services currently provided by CYFD. Any balance remaining at the end of FY08 shall revert to the GF.

### **CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP**

HB168s is a substitution for HB168. HB168 would have appropriated \$1,500,000 to CYFD to develop a statewide home visiting program, including creation of an agency coordinating council.

### **TECHNICAL ISSUES**

The bill calls for a long-range plan to be developed and reported to HHS, it is not clear if the development group continues after the report has been completed.

### **OTHER SUBSTANTIVE ISSUES**

None identified at this time

### **ALTERNATIVES**

None identified at this time

### **WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL**

Status Quo

DL/csd