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FISCAL IMPACT REPORT

ORIGINAL DATE 02/19/13

SPONSOR Sapien LAST UPDATED _____ HB _____

SHORT TITLE Home Visiting Accountability Act SB 405

ANALYST Aledo-Sandoval

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY13	FY14	FY15	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total		NFI*				

(Parenthesis () Indicate Expenditure Decreases)

Conflicts with SB 68; Duplicate to HB 333 and SB 365

SOURCES OF INFORMATION

LFC Files

Responses Received From

Children, Youth and Families Department (CYFD)

SUMMARY

Synopsis of Bill

Senate Bill 405 (SB 405) grants the Children, Youth and Families Department statutory authority to establish statewide home visiting services using a standards-based program. The bill provides definitions for home visiting, home visiting program, home visiting system, standards-based program, and eligible families.

SB 405 requires home visiting programs to do two or more of the following nine objectives:

- Improve prenatal, maternal, infant or child health outcomes, including reducing preterm births;
- Promote positive parenting practices;
- Build healthy parent and child relationships;
- Enhance children's social-emotional and language development;
- Support children's cognitive and physical development;
- Improve the health of eligible families;
- Provide resources and supports that may help to reduce child maltreatment and injury;

- Increase children's readiness to succeed in school; and
- Improve coordination of referrals for, and the provision of, other community resources and supports for eligible families.

The bill requires the department to consult with one or more experts in home visiting program evaluation to develop indicators that measure each of the established objectives. Furthermore, the bill tasks the CYFD with providing an annual outcomes report to the governor, the Legislature, and the Early Learning Advisory Council.

FISCAL IMPLICATIONS

The CYFD notes that aside from funding competent home visitors, the establishment of an accountable, high quality system of home visiting that is accessible to all families (especially those whose children are most at-risk) must include costs for building capacity and infrastructure, training and professional development, data collection and analysis as well as supervision and monitoring.

The CYFD requested a \$500 thousand special appropriation to provide technical and capacity building assistance in high risk home visiting investment zones. The Early Child Services Division plans to work with community members and community providers to help develop home visiting sites in high risk, underserved areas. The special appropriation should help new home visiting programs get into a position of responding to competitive proposals for direct services. The LFC recommendation included the entire request; whereas the executive recommendation included \$250 thousand.

The Legislature has prioritized funding for early childhood programs including home visiting over the last several years. The general fund appropriation for home visiting has sustainably grown from \$2.3 million in FY12 to \$3.2 million in FY13. The LFC FY14 recommendation included an additional \$1.8 million, which would bring the total general fund appropriation for home visiting to \$5 million. The executive FY14 budget recommendation for the CYFD did not provide an increase for home visiting programs.

Passage of SB 405 is not anticipated to have additional associated operating costs.

SIGNIFICANT ISSUES

In September, the Legislative Finance Committee published a performance evaluation on improving outcomes for pregnant women and infants through early intervention and prevention programs, including evidence-based home visiting programs, such as the Nurse-Family Partnership. The performance evaluation indicated that high quality home visiting services offer intensive support to at-risk pregnant women and new families, reduce adverse childhood experiences such as child abuse and neglect, and reduce health care costs. Home visiting is viewed as a delivery strategy for primary prevention services that are informational, developmental, and educational.

The CYFD highlights that over the past year, as interest in home visiting has increased, there has been some confusion regarding the definition of home visiting. This confusion is understandable since there are many medical, therapeutic, intervention, early childhood and social-service programs that provide services in the home. The CYFD concurs that it is important to clearly

define the home visiting system being established by the department as one that is intended to be long-term, promotes child well-being and prevents adverse childhood experiences.

To avoid confusion SB 405 also details what does not constitute home visiting, such as case management, one-time or infrequent visits (such as for newborns or in preschool), home visits supplemental to other services, and early intervention/early childhood special education (IDEA Part C or Part B) services.

The CYFD supports SB 405's charge to collaborate with the Early Learning Advisory Council (ELAC) to develop processes that provide for greater collaboration with other state agencies, local governments and private entities and share relevant home visiting data and information. Collaboration with the ELAC is consistent with the Early Childhood Care and Education Act.

The federal government through the Affordable Care Act's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program has prioritized federal funding for evidence-based home visiting programs. Currently, no single home visiting model has been proven effective with all at-risk families and across all desired outcomes. For this reason, states such as Maryland and Iowa have opted to prioritize funding for evidence-based programs with proven outcomes. According to the CYFD's Statewide Home Visiting Needs Assessment, "It is New Mexico's intention to move all state-funded programs to the use of evidence-based models or as appropriate to support programs whose models' evidence base are emerging." SB 405 does not include a requirement to prioritize state funding for evidence-based programs. Model-specific outcome data required by SB 405 could be used by the department to prioritize funding.

According to the CYFD, its standards-based home visiting program is based on research and accepted best practice. The program standards are divided into nine overarching standards (or contractual requirements) addressing: program participation, relationship-based practice, culturally-competent practice, family and child goal setting, program management, staff qualifications, curriculum and service delivery, community engagement, and data management. Although the standards are articulated in contracts, the standards have not been promulgated by rule. The secretary has the statutory authority to adopt regulations necessary to establish the program standards by which the standards-based home visiting program operates pursuant to the provisions of this Act.

PERFORMANCE IMPLICATIONS

According to the CYFD, to document outcome measures, the state established a data system that supports the collection, aggregation and analysis of common data across all programs. The data system is available to programs (that use the data for continuous quality improvement efforts) as well as to state program managers (who use the data for program support as well as contract compliance). The current data system will be able to accommodate the accountability requirements of SB 405.

CONFLICT

SB 405 conflicts with SB 68. SB 405 is a duplicate of SB 365 and HB 333.

OTHER SUBSTANTIVE ISSUES

The CYFD expressed concerns relating to the annual outcomes report requirement to provide descriptions of the home visiting models and model-specific outcomes. The CYFD states that if a home visiting program funded by the state is using a national model, model-specific outcomes are provided to the national model headquarters only and that the state would not have access to this data unless the national model outcome data is the same as the state's outcome data.

The CYFD also stated that the current Home Visiting Program Standards require state-funded programs to do all of the nine objectives. SB 405 requires them to do two or more of the listed nine objectives. Currently, no home visiting model or program identified has proven positive impacts on all of the nine listed objectives. Requiring programs to do all nine objectives and expecting positive outcomes for all may have unintended consequences given limited resources and the diverseness of the objectives; such as limiting the use of evidence-based home visiting models. Evidence-based models require fidelity to a set curriculum that may not focus on all of the nine objective areas. By requiring two or more of the listed nine objectives, the department would have flexibility to prioritize objectives based on need.

PROPOSED AMENDMENTS

The CYFD suggested the following amendments:

1. Strike “two or more” on line 19 of page 5. Replace with “all”
2. Strike “and model-specific outcomes” on line 2 of page 9

MAS/svb