

Department of Legislative Services  
Maryland General Assembly  
2012 Session

FISCAL AND POLICY NOTE

House Bill 699  
Ways and Means

(Delegate Hixson, *et al.*)

Finance

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Home Visiting Accountability Act of 2012

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This bill requires the State to fund only “evidence-based” and “promising” home visiting programs for improving parent and child outcomes, as provided in the State budget. At least 75% of State funding for home visiting programs must be made available to evidence-based home visiting programs.

The bill takes effect July 1, 2012.

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Fiscal Summary

**State Effect:** The bill primarily alters the purposes for which existing State funds for home visiting programs may be used. Since only “evidence-based” home visiting programs are currently funded, the bill codifies existing practices. The reporting requirements of the bill can be handled using existing resources.

**Local Effect:** The reporting requirements of the bill can be handled using existing resources.

**Small Business Effect:** None.

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Analysis

**Bill Summary:** “Evidenced-based” means meeting the criteria for an evidenced-based early childhood home visiting service delivery model as defined by the U.S. Department of Health and Human Services.

A “home visiting program” means a program or initiative that:

- contains home visiting as a primary service delivery strategy;
- offers services on a voluntary basis to pregnant women, expectant fathers, and parents and caregivers of children from birth to kindergarten entry; and
- targets participant outcomes that may include (1) improved maternal and child health; (2) prevention of child injuries, child abuse or maltreatment, and reduction of emergency department visits; (3) improvements in school readiness and achievement; (4) reduction in crime or domestic violence; (5) improvements in family economic self-sufficiency; (6) improvements in the coordination of and referrals to other community resources and supports; or (7) improvements in parenting skills related to child development.

A “home visiting program” includes those program models identified in the Home Visiting Evidence of Effectiveness Project of the U.S. Department of Health and Human Services. It does not include (1) programs with few or infrequent visits; (2) programs in which home visiting is supplemental to other services; or (3) in-home services delivered through provisions of an individualized family service plan or an individualized education program under portions of the federal Individuals with Disabilities Education Act.

A “promising” home visiting program or practice is one that does not yet meet the standard for evidence-based practices and meets the criteria of a promising approach as defined by the U.S. Department of Health and Human Services.

“Agencies of the Children’s Cabinet” includes the Department of Budget and Management, Department of Disabilities, Department of Health and Mental Hygiene, Department of Human Resources, Department of Juvenile Service, and the Maryland State Department of Education.

#### *Home Visiting Programs – Required Reports for Recipients of State Funds*

The Governor’s Office for Children and the agencies of the Children’s Cabinet, with input from local management boards, local home visiting programs, and the Early Childhood Advisory Council must require the recipients of State funding for home visiting programs to submit reports to the Governor’s Office for Children on a regular basis. The reports must include, at a minimum (1) a verifiable accounting of the State funds spent; (2) the number and demographic characteristics of the individuals served; and (3) the outcomes achieved by the home visiting programs.

## *Monitoring and Reporting Requirements*

The Governor's Office for Children and the agencies of the Children's Cabinet must develop a standardized reporting mechanism to collect information about and monitor the effectiveness of State-funded home visiting programs. By December 31, 2013, and at least every two years thereafter, the Governor's Office for Children and the agencies of the Children's Cabinet must report to the Governor; the Senate Finance Committee; the House Ways and Means Committee; and the Joint Committee on Children, Youth, and Families on the implementation and outcomes of State-funded home visiting programs.

**Current Law:** Current law does not specify what types of home visiting programs may be funded.

**Background:** The federal Patient Protection and Affordable Care Act established a Maternal, Infant, and Early Childhood Home Visiting Program to provide \$1.5 billion over five years to states to establish home visiting program models for at-risk pregnant women and children from birth to age five. The Act stipulates that 75% of the funds must be used for home visiting programs with evidence of effectiveness based on evaluation research. The fiscal 2013 allowance for the Department of Health and Mental Hygiene (Family Health Administration) includes \$3 million in funds from the Maternal, Infant, and Early Childhood Home Visiting Program.

In 2009, the U.S. Department of Health and Human Services commenced the Home Visiting Evidence of Effectiveness Project to conduct a thorough review of the home visiting research literature and provide an assessment of the evidence of effectiveness for home visiting program models. The project identified home visiting models that met the criteria for an evidence-based early childhood home visiting service delivery model.

The Maryland State Department of Education also provides funding for home visiting programs, all of which are evidence-based.

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## **Additional Information**

**Prior Introductions:** None.

**Cross File:** SB 566 (Senator King, *et al.*) - Finance.

**Information Source(s):** Governor's Office for Children, Department of Budget and Management, Department of Human Resources, Maryland State Department of Education, Department of Health and Mental Hygiene, Department of Juvenile Services, Maryland Association of Counties, Department of Legislative Services

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