

SUPPORTING STATEMENT

Affordable Care Act Maternal, Infant and Early Childhood Home Visiting Program

Fiscal Year 2011: Formula Funding Opportunity Announcement

A. Justification

1. Circumstances of Information Collection

The Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB) is requesting Office of Management and Budget (OMB) review and approval of the Fiscal Year 2011 Formula Funding Opportunity Announcement (the 'FY 2011 Formula FOA') for the Maternal, Infant, and Early Childhood Home Visiting Program under the Patient Protection and Affordable Care Act of 2010 (P.L. 111-148). HRSA is requesting emergency processing procedures for the FY 2011 Formula FOA because the applications for FY 2011 funding must be submitted and reviewed before the expiration of the normal time limits under regulations at 5 CFR Part 1320 and to ensure that successful applicants receive funding before the beginning of the 2011 fiscal year. The FY 2011 Formula FOA must be made available on June 20, 2011, in order to allow 30 days for grantees to prepare the application materials, which are due on July 20, 2011. Emergency processing is needed because of the critical timing of this post-award submission request for grantees.

On March 23, 2010, the President signed into law the Patient Protection and Affordable Care Act of 2010 (P.L. 111-148), historic and transformative legislation designed to make quality, affordable health care available to all Americans, reduce costs, improve health care quality, enhance disease prevention, and strengthen the health care workforce. Through a provision authorizing the creation of the Maternal, Infant, and Early Childhood Home Visiting Program, (http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_bills&docid=f:h3590enr.txt.pdf, pages 216-225), the Act responds to the diverse needs of children and families in communities at risk and provides an unprecedented opportunity for collaboration and partnership at the Federal, state, and community levels to improve health and development outcomes for at risk children through evidence-based home visiting programs.

The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program is designed: (1) to strengthen and improve the programs and activities carried out under Title V; (2) to improve coordination of services for at risk communities; and (3) to identify and provide comprehensive services to improve outcomes for families who reside in at risk communities. At-risk communities will be identified through review of the statewide needs assessment submitted by each state. Final selection of the at-risk communities for the purpose of the home visiting program will be submitted in the state's Updated State Plan.

On September 20, 2010, all 56 States and territories submitted statewide and at risk community needs assessments, as required by law.¹ States completed the needs assessment as a condition for receiving FY 2011 Title V Block Grant allotments.

States are currently responding to the 2nd Supplemental Information Request for the Submission of the Updated State Plan for a State Home Visiting Program (the Updated State Plan).² The Updated State Plan is intended to flow from the previous assessment of needs and existing resources in the community(ies) at risk to be targeted for a State Home Visiting Program. Accordingly, the Updated State Plan will provide a description of how the state intends to address needs identified, particularly with respect to the at risk community(ies), in the needs assessment submitted on September 20th. States will submit their Updated State Plans no later than June 8, 2011.

The FY 2011 Formula FOA marks the beginning of the second year of the federally-supported home visiting initiative. Through this application, states will build on the plans developed during the first year of the program and will continue efforts to establish (or build on existing) home visiting programs within their states.

2. Purpose and Use of Information

The information requested for FY 2011 Formula FOA will advance the purpose of the MIECHV program, by building on each state's FY 2010 application (i.e., the FY 2010 FOA and the 1st and 2nd Supplemental Information Requests). As articulated under Section 2951(a), "the purposes...are (1) to strengthen and improve the programs and activities carried out under section 505(a)²; (2) improve coordination of services for at risk communities; and (3) to identify and provide comprehensive services to improve outcomes for families who reside in at risk communities.

To fulfill the stated purpose of the program, States will be required to report on the following information:

- **Section 1: Identification of the State's Targeted At -Risk Community(ies):** States must select a targeted at risk community or communities for which home visiting services can be supported by FY 2010 funding under the MIECHV program. An explanation for this selection should include as much detailed information as possible regarding specific community risk factors, other characteristics and strengths, the need for a home visiting program, and service systems currently available for families in that community, including information on any home visiting programs currently operating and/or recently discontinued (since March 23, 2010). Any other factors regarding the selection of at risk community(ies) should be included in this section.
- **Section 2: State Home Visiting Program Goals and Objectives:** States must specify the goal(s) and objectives for the State Home Visiting Program proposed.
- **Section 3: Strategies and Methods for Addressing Project Goals and Objectives:** States must justify a program using one or more evidence-based home visiting models aimed at addressing the particular risks in the targeted community(ies) and the needs of the families residing there.

¹ Section 511(b)(1): "... Not later than 6 months after the date of enactment of this section, each state shall, as a condition of receiving payments from an allotment for the state under section 502 for fiscal year 2011, conduct a statewide needs assessment (which shall be separate from the statewide needs assessment required under section 505(a))..."

² Section 511(3)(B).

- **Section 4: Implementation Plan for Proposed State Home Visiting Program:** States must provide a work plan for the implementation of the proposed state home visiting model(s) and for ongoing monitoring of implementation quality. This work plan should build on or update the previously submitted Updated State Plan.
- **Section 5: Plan for Meeting Legislatively-Mandated Benchmarks:** States must propose a plan for meeting the benchmark requirements specified in the legislation.
- **Section 6: Plan for Administration of State Home Visiting Program:** States must describe the existing community and state service and administrative structures available to support the State Home Visiting Program, such as availability of referral services, of management capacity, and other essential structures.
- **Section 7: Plan for Continuous Quality Improvement:** States must propose a plan describing how continuous quality improvement strategies will be utilized at the local and state levels.
- **Section 8: Technical Assistance Needs:** States should include a list of current technical assistance needs and any anticipated technical assistance needs for the future.

Use of Information

The information collected will help further the legislative purpose of the MIECHV Program. The information is also intended to help States view their proposed State Home Visiting Program as a service strategy aimed at developing a comprehensive, high-quality early childhood system that promotes maternal, infant, and early childhood health, safety and development, and strong parent-child relationships in the targeted community(ies) at risk. Ultimately, the information provided will help States continue the development of a comprehensive plan that addresses the previously identified community risk factors, builds on strengths identified in the targeted community(ies), and responds to the specific characteristics and needs of families in each of these communities.

3. Use of Improved Information Technology

Applications and supporting documentation are required to be submitted electronically through HRSA's Electronic Handbook System (EHB). Information related to the original Funding Opportunity Announcement (FOA) under the Affordable Care Act for which this supplemental information is requested can be found at <http://mchb.hrsa.gov> by clicking on "Find Grant."

4. Efforts to Identify Duplication

The limited amount of data required to complete the application are not unique. Applicants have already provided similar data and information in response to the FY 2010 application. As a result, the applicants will be able to obtain much of the information needed to respond to the Formula FOA from previous applications and the following data resources: the Title V Block Grant Program; the Child Abuse Prevention and Treatment Act (CAPTA); the Head Start Program; the National Child Abuse and Neglect Data System; the Substance Abuse and Mental Health Services Agency; County Health Rankings; Behavioral Risk Factor Surveillance System; and HHS Community Health Status Indicators.

5. Involvement of Small Entities

This activity does not have a significant impact on small entities.

6. Consequences if Information Collected Less Frequently

There are no consequences for the FY 2011 Formula Application. This is a one-time collection.

7. Consistency with Guidelines in 5 CFR 1320.5(d)(2)

The data are collected in a manner consistent with guidelines contained in 5 CFR 1320.5(d)(2).

8. Consultation Outside the Agency

Due to the emergency nature of the program announcement, HRSA is requesting that OMB waive the Federal Register notice requirements for this collection.

9. Remuneration of Respondents

Respondents will not be remunerated.

10. Assurance of Confidentiality

This request does not involve the collection of individual level or personally identifiable information.

11. Questions of a Sensitive Nature

There are no questions of a sensitive nature.

12. Estimates of Annualized Hour Burden

The program estimates that 56 eligible entities will respond to the Formula FOA. The burden includes the time for the grantee to access data for the required indicators and to provide a narrative that is responsive to the application requirements. The estimate of burden is as follows:

Form	Number of Respondents	Hours per Response	Total Burden Hours	Total Wage Rate	Total Cost Burden Hours
Section 1: Identification of the State’s Targeted At -Risk Community(ies)	56	10	560	\$26	\$14,560
Section 2: State Home Visiting Program Goals and Objectives	56	10	560	\$26	\$14,560
Section 3: Strategies and Methods for Addressing Project Goals and Objectives	56	10	560	\$26	\$14,560
Section 4: Implementation Plan for Proposed State	56	20	1,120	\$26	\$29,120

Home Visiting Program					
Section 5: Plan for Meeting Legislatively-Mandated Benchmarks	56	20	1,120	\$26	\$29,120
Section 6: Plan for Administration of State Home Visiting Program	56	15	840	\$26	\$21,840
Section 7: Plan for Continuous Quality Improvement	56	10	560	\$26	\$14,560
Section 8: Technical Assistance Needs	56	1	56	\$26	\$1,456
Total	56		5,376		\$139,776

13. Estimates of Annualized Cost Burden to Respondents

There is no capital or start up cost for this activity.

14. Estimated Cost to the Federal Government

The estimated annual cost to the federal government for this activity is approximately \$3,561 for 0.4% of 10 FTE at a GS 13 level (\$89,033)

15. Changes in Burden

This is a new project.

16. Time Schedule, Publication and Analysis Plans

There will be no statistical analysis done on the information received from the formula FOA. In addition, there will be no publication of the information reported.

17. Exemption for Display of Expiration Date

The expiration date will be displayed.

18. Certifications

This project fully complies with CFR 1320.9.

Attachments

