

LB1124 | Funding for Evidence-Based Early Intervention Home Visiting Programs AMENDED TO LB1412 [AM2566]

POLICY BRIEF 2024

What is Home Visiting?

Evidence-based home visiting services support the well-being of families and promote the healthy physical, social and cognitive development of young children. These programs pair families with trained nurses, early childhood educators or other professionals who tailor services to meet the specific needs of individual families. Participation in home visiting programs is voluntary and offered free of charge to families at risk. Benefits of these programs commonly include:

- Healthier pregancies and improved maternal care
- Fewer incidents of child maltreatment, emergency room visits and Child Protective Services (CPS) hotline calls.
- Stronger parenting skills and parent-child relationships
- Better academic and social outcomes for children

How Home Visiting is Funded

The largest source of funding for home visiting in Nebraska is the Maternal and Infant Early Childhood Home Visiting (MIECHV) federal grant. The reauthorization of MIECHV in 2022 increased Nebraska's base allocation from \$1.2M to \$1.7M, with the opportunity for additional funding at a 25/75 match from the federal government.

Additional sources of funding include Temporary Assistance for Needy Families (TANF) excess funds and Family First Prevention Services Act (FFPSA) funds, however the sources of these funds are federal and may not be used to draw down the additional matching opportunity offered in MIECHV.

Approximate matching amounts from the Congressional Research Office²

Year	Nebraska 25% Obligation	Federal 75% Obligation
2023	0	0
2024	\$258,726	\$776,000
2025	\$375,533	\$1,127,000
2026	\$563,300	\$1,690,000
2027	\$869,499	\$2,608,000

LB1124 (AM2566 to LB1412): Funding Appropriation (Sen. Tony Vargas)

As amended into LB1412, LB1124 appropriates funds over two fiscal years from the Medicaid Managed Care Excess Profit Fund to the Nebraska Department of Health and Human Services for evidence-based early intervention home visiting programs. These appropriations are:

FY2023-24: \$900,000

FY2024-25: \$900,000

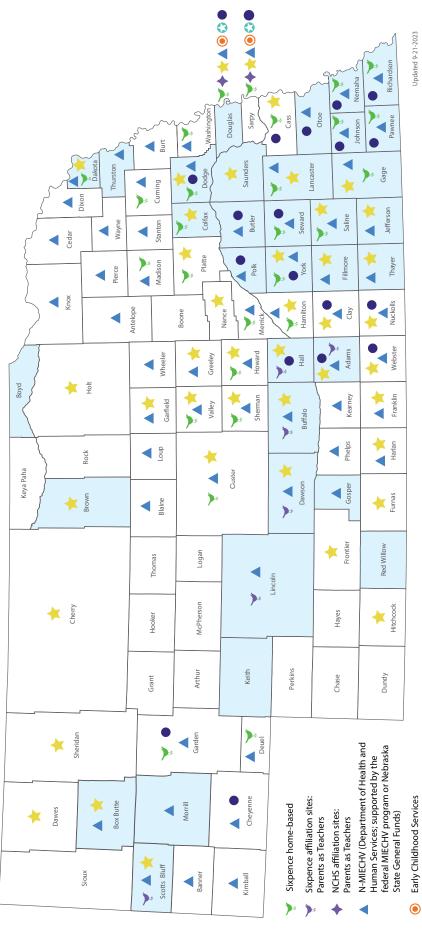
About the Funding Source

The Nebraska Legislature created the Medicaid Managed Care Excess Profit Fund (68-996) in 2020. This cash fund is comprised of funds that are returned to the state when a managed care entitity earns profits that exceed contractor limitations, or meets the minimum medical loss ratio

The intended use of these funds is to offset losses in the Medicaid program and address the needs of adults and children participating in Medicaid.

Because the Medicaid Managed Care Excess Profit Fund consists of state funds, they can be used to meet federal matching requirements, such as those associated with the Maternal, Infant and Early Childhood Home Visiting (MIECHV) program.

Statewide Home Visiting Initiatives



Early Childhood Services

Early Head Start/Head Start home-based

Buffett Early Childhood Institute 0 Programs Funded by other sources

Nebraska ACA HV Statewide Needs Assessment (HRSA)

pregnancy outcomeshealth outcomes 31 counties at highest risk for poor outcomes: behaviors economics juvenile crime

Delivering Home Visiting Services in Nebraska

About 71% of Nebraska's 93 counties are served by home visiting intiatives, primarily through three key organizations/entities:

- N-MIECHV (Nebraska Maternal and Infant Early Childhood Home Visiting)
- Head Start/Early Head Start
- Nebraska Early Childhood Education Endowment Fund (Sixpence)

First Five Nebraska | 601 South 13th Street | Suite #600 | Lincoln, NE 68508 | P: 402 261 9671 | FirstFiveNebraska.org | info@FirstFiveNebraska.org ² Landers, P.A. (2022). Estimates of Maternal, Infant, and Early Childbood Home Visiting (MIECHV) program funding allocation under a draft reauthorization proposal [Memorandum]. Congressional Research Service.



¹ Meisch, A. D.., & Brennan, K. (2021). Investing in home visiting: Partnering with parents to build strong families [Policy Brief]. James Bell Associates.