

INCREASING OPPORTUNITY AND SUCCESS FOR CHILDREN AND PARENTS THROUGH EVIDENCE-BASED HOME VISITING ACT

SEPTEMBER 21, 2017.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. BRADY of Texas, from the Committee on Ways and Means, submitted the following

R E P O R T

together with

DISSENTING VIEWS

[To accompany H.R. 2824]

[Including cost estimate of the Congressional Budget Office]

The Committee on Ways and Means, to whom was referred the bill (H.R. 2824) to amend title V of the Social Security Act to extend the Maternal, Infant, and Early Childhood Home Visiting Program, having considered the same, report favorably thereon with an amendment and recommend that the bill as amended do pass.

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The amendment is as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the “Increasing Opportunity and Success for Children and Parents through Evidence-Based Home Visiting Act”.

SEC. 2. TABLE OF CONTENTS.

The table of contents of this Act is as follows:

- Sec. 1. Short title.
- Sec. 2. Table of contents.
- Sec. 3. Continuing evidence-based home visiting program.
- Sec. 4. Continuing to demonstrate results to help families.
- Sec. 5. Reviewing statewide needs to target resources.
- Sec. 6. Improving the likelihood of success in high-risk communities.
- Sec. 7. Measuring improvements in family economic self-sufficiency.
- Sec. 8. Option to fund evidence-based home visiting on a pay for outcome basis.
- Sec. 9. Strengthening evidence-based home visiting through state, local, and private partnerships.
- Sec. 10. Data exchange standards for improved interoperability.

SEC. 3. CONTINUING EVIDENCE-BASED HOME VISITING PROGRAM.

Section 511(j)(1)(H) of the Social Security Act (42 U.S.C. 711(j)(1)(H)) is amended by striking “fiscal year 2017” and inserting “each of fiscal years 2017 through 2022”.

SEC. 4. CONTINUING TO DEMONSTRATE RESULTS TO HELP FAMILIES.

(a) REQUIRE SERVICE DELIVERY MODELS TO DEMONSTRATE IMPROVEMENT IN APPLICABLE BENCHMARK AREAS.—Section 511 of the Social Security Act (42 U.S.C. 711) is amended in each of subsections (d)(1)(A) and (h)(4)(A) by striking “each of”.

(b) DEMONSTRATION OF IMPROVEMENTS IN SUBSEQUENT YEARS.—Section 511(d)(1) of such Act (42 U.S.C. 711(d)(1)) is amended by adding at the end the following:

“(D) DEMONSTRATION OF IMPROVEMENTS IN SUBSEQUENT YEARS.—

“(i) CONTINUED MEASUREMENT OF IMPROVEMENT IN APPLICABLE BENCHMARK AREAS.—The eligible entity, after demonstrating improvements for eligible families as specified in subparagraphs (A) and (B), shall continue to track and report not later than 30 days after the end of fiscal year 2020 and every three years thereafter, information demonstrating that the program results in improvements for the eligible families participating in the program in at least 4 of the areas specified in subparagraph (A) that the service delivery model or models, selected by the entity, intend to improve.

“(ii) CORRECTIVE ACTION PLAN.—If the eligible entity fails to demonstrate improvement in at least 4 of the areas specified in subparagraph (A), the entity shall develop and implement a plan to improve outcomes in each of the areas specified in subparagraph (A) that the service delivery model or models, selected by the entity, intend to improve, subject to approval by the Secretary. The plan shall include provisions for the Secretary to monitor implementation of the plan and

conduct continued oversight of the program, including through submission by the entity of regular reports to the Secretary.

“(iii) TECHNICAL ASSISTANCE.—The Secretary shall provide an eligible entity required to develop and implement an improvement plan under clause (i) with technical assistance to develop and implement the plan. The Secretary may provide the technical assistance directly or through grants, contracts, or cooperative agreements.

“(iv) NO IMPROVEMENT OR FAILURE TO SUBMIT REPORT.—If the Secretary determines after a period of time specified by the Secretary that an eligible entity implementing an improvement plan under clause (i) has failed to demonstrate any improvement in at least 4 of the areas specified in subparagraph (A) that the service delivery model or models intend to improve, or if the Secretary determines that an eligible entity has failed to submit the report required by clause (i), the Secretary shall terminate the grant made to the entity under this section and may include any unexpended grant funds in grants made to nonprofit organizations under subsection (h)(2)(B).”

(c) INCLUDING INFORMATION ON APPLICABLE BENCHMARKS IN APPLICATION.—Section 511(e)(5) of such Act (42 U.S.C. 711(e)(5)) is amended by inserting “that the service delivery model or models, selected by the entity, intend to improve” before the period at the end.

SEC. 5. REVIEWING STATEWIDE NEEDS TO TARGET RESOURCES.

Section 511(b)(1) of the Social Security Act (42 U.S.C. 711(b)(1)) is amended by striking “Not later than” and all that follows through “statewide” the 2nd place it appears and inserting “Each State shall, as a condition of receiving payments from an allotment for the State under section 502, review and update the statewide needs assessment not later than October 1, 2020 (which may be separate from but in coordination with the statewide”.

SEC. 6. IMPROVING THE LIKELIHOOD OF SUCCESS IN HIGH-RISK COMMUNITIES.

Section 511(d)(4)(A) of the Social Security Act (42 U.S.C. 711(d)(4)(A)) is amended by inserting “, taking into account the staffing, community resource, and other requirements of the service delivery model or models that the eligible entity may need to develop for the model to operate and demonstrate improvements for eligible families” before the period.

SEC. 7. MEASURING IMPROVEMENTS IN FAMILY ECONOMIC SELF-SUFFICIENCY.

Section 511(d)(1)(A)(v) of the Social Security Act (42 U.S.C. 711(d)(1)(A)(v)) is amended by inserting “(which shall include measures of employment and earnings)” before the period.

SEC. 8. OPTION TO FUND EVIDENCE-BASED HOME VISITING ON A PAY FOR OUTCOME BASIS.

(a) IN GENERAL.—Section 511(c) of the Social Security Act (42 U.S.C. 711(c)) is amended by redesignating paragraphs (3) and (4) as paragraphs (4) and (5), respectively, and by inserting after paragraph (2) the following:

“(3) AUTHORITY TO USE GRANT FOR A PAY FOR OUTCOMES INITIATIVE.—An eligible entity to which a grant is made under paragraph (1) may use the grant to pay for the results of a pay for outcomes initiative that satisfies the requirements of subsection (d) and that will not result in a reduction of funding for services delivered under this section while an eligible entity develops or operates such an initiative.”

(b) DEFINITION OF PAY FOR OUTCOMES INITIATIVE.—Section 511(k) of such Act (42 U.S.C. 711(k)) is amended by adding at the end the following:

“(4) PAY FOR OUTCOMES INITIATIVE.—The term ‘pay for outcomes initiative’ means a performance-based grant, contract, cooperative agreement, or other agreement awarded by a public entity in which a commitment is made to pay for improved outcomes that result in social benefit and direct cost savings or cost avoidance to the public sector. Such an initiative shall include—

“(A) a feasibility study that describes how the proposed intervention is based on evidence of effectiveness;

“(B) a rigorous, third-party evaluation that uses experimental or quasi-experimental design or other research methodologies that allow for the strongest possible causal inferences to determine whether the initiative has met its proposed outcomes;

“(C) an annual, publicly available report on the progress of the initiative; and

“(D) a requirement that payments are made to the recipient of a grant, contract, or cooperative agreement only when agreed upon outcomes are achieved, except that this requirement shall not apply with respect to pay-

ments to a third party conducting the evaluation described in subparagraph (B).”

(c) EXTENDED AVAILABILITY OF FUNDS.—Section 511(j)(3) of such Act (42 U.S.C. 711(j)(3)) is amended—

(1) by striking “(3) AVAILABILITY.—Funds” and inserting the following:

“(3) AVAILABILITY.—

“(A) IN GENERAL.—Except as provided in subparagraph (B), funds”; and

(2) by adding at the end the following:

“(B) FUNDS FOR PAY FOR OUTCOMES INITIATIVES.—Funds made available to an eligible entity under this section for a fiscal year (or portion of a fiscal year) for a pay for outcomes initiative shall remain available for expenditure by the eligible entity for not more than 10 years after the funds are so made available.”.

SEC. 9. STRENGTHENING EVIDENCE-BASED HOME VISITING THROUGH STATE, LOCAL, AND PRIVATE PARTNERSHIPS.

(a) IN GENERAL.—Section 511 of the Social Security Act (42 U.S.C. 711) is amended by adding at the end the following:

“(1) MATCHING REQUIREMENT.—

“(1) PROGRAM HOME VISITING SHARE.—

“(A) IN GENERAL.—An eligible entity to which a grant is made under this section for fiscal year 2020 or any succeeding fiscal year shall not use the grant to cover more than the applicable percentage of the costs of providing services or conducting activities under this section during the fiscal year.

“(B) APPLICABLE PERCENTAGE.—In subparagraph (A), the term ‘applicable percentage’ means, with respect to a fiscal year—

“(i) in the case of an eligible entity that is a State or nonprofit organization—

“(I) 70 percent, in the case of fiscal year 2020;

“(II) 60 percent, in the case of fiscal year 2021; or

“(III) 50 percent, in the case of fiscal year 2022 or any succeeding fiscal year; or

“(ii) in the case of an eligible entity that is an Indian Tribe (or a consortium of Indian Tribes), a Tribal Organization, or an Urban Indian Organization—

“(I) 100 percent, in the case of fiscal year 2020 or 2021; or

“(II) 70 percent, in the case of fiscal year 2022 or any succeeding fiscal year.

“(2) NON-PROGRAM HOME VISITING SHARE.—The share of the costs of providing services or conducting activities under this section not covered by grant funds may include—

“(A) State expenditures of Federal funds made available other than under this section expended for activities under this section;

“(B) State expenditures of State funds expended for activities under this section as a condition of receiving Federal funds other than under this section; and

“(C) contributions made for activities under this section from any other source, paid in cash or in kind, valued at the fair market value of such contribution.”.

(b) CONFORMING AMENDMENT.—Section 511(h)(2)(A) of such Act (42 U.S.C. 711(h)(2)(A)) is amended in the 2nd sentence by striking “Such” and inserting “Except as provided in subsection (1)(1), such”.

SEC. 10. DATA EXCHANGE STANDARDS FOR IMPROVED INTEROPERABILITY.

(a) IN GENERAL.—Section 511(h) of the Social Security Act (42 U.S.C. 711(h)) is amended by adding at the end the following:

“(5) DATA EXCHANGE STANDARDS FOR IMPROVED INTEROPERABILITY.—

“(A) DESIGNATION AND USE OF DATA EXCHANGE STANDARDS.—

“(i) DESIGNATION.—The head of the department or agency responsible for administering a program funded under this section shall, in consultation with an interagency work group established by the Office of Management and Budget and considering State government perspectives, designate data exchange standards for necessary categories of information that a State agency operating the program is required to electronically exchange with another State agency under applicable Federal law.

“(ii) DATA EXCHANGE STANDARDS MUST BE NONPROPRIETARY AND INTEROPERABLE.—The data exchange standards designated under clause (i) shall, to the extent practicable, be nonproprietary and interoperable.

“(iii) OTHER REQUIREMENTS.—In designating data exchange standards under this paragraph, the Secretary shall, to the extent practicable, incorporate—

“(I) interoperable standards developed and maintained by an international voluntary consensus standards body, as defined by the Office of Management and Budget;

“(II) interoperable standards developed and maintained by intergovernmental partnerships, such as the National Information Exchange Model; and

“(III) interoperable standards developed and maintained by Federal entities with authority over contracting and financial assistance.

“(B) DATA EXCHANGE STANDARDS FOR FEDERAL REPORTING.—

“(i) DESIGNATION.—The head of the department or agency responsible for administering a program referred to in this section shall, in consultation with an interagency work group established by the Office of Management and Budget, and considering State government perspectives, designate data exchange standards to govern Federal reporting and exchange requirements under applicable Federal law.

“(ii) REQUIREMENTS.—The data exchange reporting standards required by clause (i) shall, to the extent practicable—

“(I) incorporate a widely accepted, nonproprietary, searchable, computer-readable format;

“(II) be consistent with and implement applicable accounting principles;

“(III) be implemented in a manner that is cost-effective and improves program efficiency and effectiveness; and

“(IV) be capable of being continually upgraded as necessary.

“(iii) INCORPORATION OF NONPROPRIETARY STANDARDS.—In designating data exchange standards under this paragraph, the Secretary shall, to the extent practicable, incorporate existing nonproprietary standards, such as the eXtensible Mark up Language.

“(iv) RULE OF CONSTRUCTION.—Nothing in this paragraph shall be construed to require a change to existing data exchange standards for Federal reporting about a program referred to in this section, if the head of the department or agency responsible for administering the program finds the standards to be effective and efficient.”

(b) EFFECTIVE DATE.—The amendments made by this section shall take effect 2 years after the date of the enactment of this Act.

I. SUMMARY AND BACKGROUND

A. PURPOSE AND SUMMARY

H.R. 2824 as amended, the “Increasing Opportunity and Success for Children and Parents through Evidence-Based Home Visiting Act,” as ordered reported by the Committee on Ways and Means on September 13, 2017, amends title V of the Social Security Act to extend the Maternal, Infant, and Early Childhood Home Visiting Program.

B. BACKGROUND AND NEED FOR LEGISLATION

Social services programs often are unable to demonstrate they achieve better outcomes for poor families. According to two former White House officials, “based on our rough calculations, less than \$1 out of every \$100 of government spending is backed by even the most basic evidence that the money is being spent wisely.”¹ In contrast, the Maternal, Infant, and Early Childhood Home Visiting program (MIECHV), first funded as a pilot program in 2008 during the George W. Bush Administration, only awards funds to states when they operate one of 18 programs that meet a specified evi-

¹*The Atlantic*, “Can Government Play Moneyball?,” John Bridgeland and Peter Orszag, July/August 2013

dence threshold (as confirmed by the U.S. Department of Health and Human Services) demonstrating the model has been subject to a high quality evaluation and yielded significant, positive outcomes in areas such as reducing child abuse and neglect, improving maternal and child health, and improving self-sufficiency.

Begun in 2010, the federal MIECHV program was designed to strengthen existing maternal and child health programs, provide services to improve outcomes for families in at-risk communities, and better coordinate services. Under the MIECHV program, states identify at-risk communities through statewide assessments examining areas with concentrations of poor child health outcomes and other difficulties such as high poverty, crime, or unemployment. States then specify how they will serve these communities using an evidence-based home visiting model. While the bulk of program funding must be used to provide services through home visiting models with evidence of effectiveness as determined by HHS, up to 25 percent of total funding can be used to fund promising, but still unproven, approaches that will be evaluated ensuring continuous model development. States receiving federal funding are not required to match dollars with state or local money.

Set to expire September 30, 2017, MIECHV is currently the only federal program for low-income families with children that ties funding to evidence of effectiveness. MIECHV should be extended so it can continue to deliver results for families in need, and other programs should be modified to work more like MIECHV, where funding is provided to develop and operate evidence-based programs and states are held accountable for delivering results.

C. LEGISLATIVE HISTORY

BACKGROUND

H.R. 2824, the “Increasing Opportunity through Evidence-Based Home Visiting Act,” was introduced on June 8, 2017, by Representative Adrian Smith, Representative Michael C. Burgess, Representative Patrick J. Tiberi, Representative Tom Reed, Representative Patrick Meehan, Representative Kristi L. Noem, and Representative Jackie Walorski and was referred to the Committee on Ways and Means and Energy and Commerce.

COMMITTEE HEARINGS

The Ways and Means Subcommittee on Human Resources held a hearing on March 15, 2017, titled “Reauthorization of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program.” The hearing examined the effectiveness of a range of home visiting models, reviewed how states operate and fund programs, and highlighted how an evidence-based home visiting program can produce positive outcomes for children and families.

As Subcommittee Chairman Adrian Smith (R-NE) remarked during his opening statement:

“MIECHV is one of the only social programs where funding is tied to proven evidence. For a home visiting model to be funded, an evaluation must show the program has demonstrated significant, positive outcomes in areas such as reducing childhood abuse and neglect, improving mater-

nal and child health, and improving economic self-sufficiency. Many of these approved models are now being further studied through a rigorous random assignment evaluation to better measure their impacts so we know families are receiving real help.”²

COMMITTEE ACTION

The Committee on Ways and Means marked up H.R. 2824, the “Increasing Opportunity and Success for Children and Parents through Evidence-Based Home Visiting Act,” on September 13, 2017. The bill was ordered favorably reported to the House of Representatives, as amended, by a roll call vote of 22 yays to 15 nays.

II. EXPLANATION OF THE BILL

SECTIONS 1 AND 2: SHORT TITLE AND TABLE OF CONTENTS

PRESENT LAW

No provision.

EXPLANATION OF PROVISION

This Act may be cited as “Increasing Opportunity and Success for Children and Parents through Evidence-Based Home Visiting Act.”

REASON FOR CHANGE

The Committee believes that the short title and table of contents accurately reflect the policy actions included in the legislation.

EFFECTIVE DATE

These provisions are effective upon enactment.

SECTION 3: CONTINUING EVIDENCE-BASED HOME VISITING PROGRAM

PRESENT LAW

The MIECHV law directly appropriated five years of mandatory funding for the program in the MIECHV authorizing statute: \$100 million for FY2010; \$250 million for FY2011; \$350 million for FY2012; and \$400 million for each of FY2013 through FY2017. [Section 511(j)(1) of the Social Security Act]

EXPLANATION OF PROVISION

H.R. 2824, as amended, extends the appropriated, mandatory funding of \$400 million for the MIECHV program for FY 2018 through FY2022.

REASON FOR CHANGE

The Committee believes the extension of this evidence-based program will help improve the lives of struggling families with children, and that the program can serve as a model for how other federal social programs can be reformed to focus on outcomes.

²Chairman of the Ways and Means Human Resources Subcommittee Adrian Smith (R-NE), Opening Statement, Hearing on *The Reauthorization of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program*, March 15, 2017

EFFECTIVE DATE

This provision is effective upon enactment.

SECTION 4: CONTINUING TO DEMONSTRATE RESULTS TO HELP FAMILIES

BENCHMARK AREAS

PRESENT LAW

Eligible entities must establish, subject to approval of the HHS Secretary, quantifiable and measurable benchmarks for demonstrating improvements for eligible families participating in the program in each of six areas: (1) improved maternal and newborn health; (2) prevention of child injuries, child abuse, neglect, 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; and (6) improvements in the coordination and referrals for other community resources and supports. Performance in the benchmark areas are to be assessed at three and five years following the start of program.

Each eligible entity is required to submit a report to the HHS Secretary demonstrating that it has made improvements in at least four of the six benchmark areas during the first three years that it carries out the program.³ The report is to be submitted within 30 days of the end of that three-year period. [Section 511(d)(1) of the Social Security Act]

An eligible entity must submit, as part of its grant application to HHS, the quantifiable and measurable benchmarks it has established demonstrate that the program contributes to improvements for eligible families in the six areas. [Section 511(e)(5)) of the Social Security Act]

EXPLANATION OF PROVISION

H.R. 2824, as amended, would require eligible entities to track and report, subject to the approval of the HHS Secretary, quantifiable and measurable benchmarks that are intended to demonstrate continued improvements for eligible families. These four or more benchmark areas would be subject to approval of the HHS Secretary and would include only those that the service delivery model, as selected by the eligible entity, are intended to improve. The four or more benchmark areas would continue to be included as part of the eligible entity's grant application.

REASON FOR CHANGE

During the initial years of the program, states were required to demonstrate improvements in specific areas for families receiving services. However, these requirements have now lapsed. This bill would renew the requirements for the measurement and reporting of outcomes so Congress, the families being served, and taxpayers funding these programs can be sure these programs continue to de-

³Most eligible entities had to submit the report by October 30, 2014 to show that improvements were made between FY2012, when the program was fully implemented, and FY2014, the third year of implementation.

liver real results. Specifically, the Committee intends that HHS continue to measure improvement among eligible, enrolled families as a result of MIECHV grants compared with families who do not receive these services. It is the Committee's intent that each eligible entity shall continue to identify at least four of the six possible benchmarks for which it will track and report the progress of families enrolled in the program. Eligible entities shall track and report on family progress on the measures associated with the selected benchmarks that the service delivery model in which the family is participating is intended to improve. For example, if reduction in child injury is not an intended outcome of a particular home visiting model, families receiving home visits through that model would not be required to be included in measures tracking improvements in child injury, although the eligible entity may choose to track this information.

CORRECTIVE ACTION PLAN AND TECHNICAL ASSISTANCE

PRESENT LAW

If an eligible entity fails to demonstrate improvements in four of the six benchmark areas within the first three years of program implementation, it must develop and implement a plan to make improvements in each of the applicable benchmark areas, subject to approval by the HHS Secretary. The Secretary must provide technical assistance (directly or through grants, contracts, or cooperative agreements) to the eligible entity in developing and implementing the plan. The HHS Secretary must convene an advisory panel made up of staff from the Departments of Health and Human Services and Education to make recommendations about this technical assistance. [Section 511(d)(1) of the Social Security Act]

EXPLANATION OF PROVISION

If an eligible entity does not continue to demonstrate ongoing improvements in at least four of the benchmark areas, it must develop and implement a plan to make improvements in each of the applicable benchmark areas (subject to approval by the HHS Secretary) that are applicable to the service delivery model selected by the entity. The improvement plan would include provisions for the HHS Secretary to monitor the plan's implementation and conduct continued oversight of the program, including by regular reports submitted by the eligible entity. The Secretary must provide technical assistance (directly or through grants, contracts, or cooperative agreements) to the eligible entity in developing and implementing the plan.

REASON FOR CHANGE

During the initial years of the program, if states did not demonstrate improvements in specific areas for families receiving services, they were required to develop an improvement plan to address the problem. However, this requirement has now lapsed. This bill would renew the requirement that the state develop an improvement plan if they don't achieve results, allowing Congress, the families being served, and the taxpayers funding the program to have confidence that efforts are being made to hold states accountable

and correct deficiencies if they arise. Specifically, it is the Committee's intent that, if the eligible entity fails to show participation in home visiting improves family outcomes as compared to families who do not receive home visiting services, the entity is required to develop and implement an improvement plan. It is the Committee's intent that eligible entities shall be held accountable for demonstrating that families enrolled in home visiting achieve improved outcomes. It is not the Committee's intent to penalize eligible entities that have achieved substantial outcomes and are unable to demonstrate further progress among families enrolled in home visiting as compared to families receiving these services in a prior year.

TERMINATION OF FUNDING

PRESENT LAW

The HHS Secretary must terminate a jurisdiction's MIECHV funding if, after a period of time specified by the Secretary, the jurisdiction has failed to demonstrate any improvements in outcomes following the first three years of the program's implementation, or if the Secretary determines that the jurisdiction has failed to submit the required report on performance in the benchmark areas after the initial three years that the program is implemented. The Secretary may include any unexpended grant funds in grants made to nonprofit organizations that operate home visiting programs in states that had not (as of the beginning of FY2012), applied or been approved for a MIECHV grant. [Section 511(d)(1) of the Social Security Act]

EXPLANATION OF PROVISION

H.R. 2824, as amended, would extend these same requirements for an eligible entity that does not continue to demonstrate ongoing improvements in at least four of the benchmark areas in subsequent years, or if the eligible entity has failed to submit the required annual report to the HHS Secretary on improvements made in the benchmark areas.

REASON FOR CHANGE

The Committee believes renewing the requirement that HHS terminate MIECHV funding to a jurisdiction that has failed to demonstrate results will ensure federal funds are spent on programs that truly help those in need, instead of continuing to support programs that are ineffective. Renewing this requirement is consistent with the other efforts in this section to revive the set of policies that helped to establish MIECHV as a leading program to provide real results to families.

EFFECTIVE DATE

These provisions in this section are effective upon enactment.

SECTION 5: REVIEWING STATEWIDE NEEDS TO TARGET RESOURCES

PRESENT LAW

As a condition of receiving funds under the Maternal and Child Health Services Block Grant for FY2011, states were required to

conduct a statewide needs assessment for the MIECHV program.⁴ The statewide needs assessment has three purposes, as outlined in the law:

- Identify communities with concentrations of premature birth, low-birth weight infants, and infant mortality, including infant death due to neglect or other indicators of at-risk prenatal, maternal, newborn, or child health; poverty; crime; domestic violence; high school dropouts; substance abuse; unemployment; or child maltreatment.
- Determine the quality and capacity of existing programs or initiatives for early childhood home visitation in the jurisdiction, including the number and types of individuals and families who are receiving services under such programs or initiatives; gaps in early childhood home visitation in the jurisdiction; and the extent to which such programs and initiatives are meeting the needs of eligible families.
- Determine the state's capacity for providing substance abuse treatment and counseling services to individuals and families in need of such treatment or services.

The needs assessment was to be separate from the statewide needs assessment required under the Maternal and Child Health Services Block Grant. [Section 511(b)(1) of the Social Security Act]

EXPLANATION OF PROVISION

H.R. 2824, as amended, would require eligible entities to review and update their statewide needs assessment by October 1, 2020 as a condition of receiving funds under the Maternal and Child Health Services Block Grant. The assessment must be coordinated with statewide needs assessment required under the Maternal and Child Health Services Block Grant, but may be conducted separately.

REASON FOR CHANGE

In order to guide placement of home visiting programs funded by MIECHV in high-risk communities with the greatest need, states conducted needs assessments in FY 2010 before receiving funding for the next fiscal year. The Committee recognizes that those initial assessments are nearly a decade old and should be reviewed and updated. It is the Committee's intent that state needs assessments be updated no later than October 1, 2020 (allowing states to select the schedules as they see fit), and that states may exercise the option to coordinate with other related data collection and analysis efforts as they choose. States shall retain the authority to use the information gathered at their discretion. The Committee's intent in requiring the review and updating of the needs assessment is for states to gather more recent information on community needs and reaffirm that MIECHV programs are being operated in areas of high need. Nothing in this section shall be construed to require moving MIECHV-funded home visiting programs, defunding of programs for the sole purpose of moving services to other communities, or otherwise disrupting existing home visiting programs,

⁴The Maternal and Child Health Block Grant, authorized under Title V of the Social Security Act, is a flexible source of funds that states use to support maternal and child health programs.

their relationships in the community, and their services to eligible families.

EFFECTIVE DATE

This provision is effective upon enactment.

SECTION 6: IMPROVING THE LIKELIHOOD OF SUCCESS IN HIGH RISK COMMUNITIES

PRESENT LAW

Eligible entities must give priority for providing home visiting services to specified high-risk populations, including eligible families who (1) reside in communities in need of home visiting services, as identified in the statewide needs assessment; (2) are low income; (3) are pregnant women under age 21; (4) have a history of child abuse or neglect or have had interactions with child welfare services; (5) have a history of substance abuse or need substance abuse treatment; (6) have users of tobacco products in the home; (7) are or have children with low student achievement; (8) have children with developmental delays or disabilities; or (9) include individuals who are, or were, serving in the Armed Forces, including families with members who have multiple deployments outside of the United States. [Section 511(d)(4) of the Social Security Act]

EXPLANATION OF PROVISION

H.R. 2824, as amended, would continue to give priority for services to those high risk families identified in the needs assessment, while allowing eligible entities to take into account additional factors—staffing, community resource, and other requirements of the service delivery model(s)—that the eligible entity may need to develop for the model to operate and demonstrate improvements for these eligible families.

REASON FOR CHANGE

The Committee recognizes that, as states conduct updated needs assessments and consider the placement of home visiting programs in the highest need communities, they may determine a particular community needs additional technical assistance or other resources prior to launch of a home visiting program to increase the likelihood that the program will succeed and that families will benefit from home visiting. States are encouraged to offer such assistance to help communities prepare to implement a MIECHV home visiting model. States are also encouraged to consider the full range of MIECHV-approved models when determining how best to support successful home visiting in any given community. Nothing in this section shall be construed to give States the option not to support the success of home visiting in communities of highest risk and need.

EFFECTIVE DATE

This provision is effective upon enactment.

SECTION 7: MEASURING IMPROVEMENTS IN FAMILY ECONOMIC SELF-SUFFICIENCY

PRESENT LAW

One of the six benchmark areas in which program performance may be measured pertains to improvements in family economic self-sufficiency. [Section 511(d)(1)(v) of the Social Security Act]

EXPLANATION OF PROVISION

H.R. 2824, as amended, would specify that improvements in family economic self-sufficiency must include measures of employment and earnings.

REASON FOR CHANGE

Under current law, each eligible entity must establish quantifiable, measureable benchmarks to demonstrate that their MIECHV programs are resulting in improvements in at least four of six benchmarks, with one of these benchmarks being “improvements in family economic self-sufficiency.” While the Committee believes the plain language in the statute is clear and that measuring economic self-sufficiency means measurement of employment and earnings, recent administrative changes have modified the way states track their performance relative to this benchmark so that employment and earnings are no longer considered as part of this metric.⁵ As a result, the Committee believes it is necessary to specify that employment and earnings measures be part of this benchmark area, so that an eligible entity who indicates they plan to improve family economic self-sufficiency will report this information.

At the same time, the Committee does not believe the home visitor must necessarily be the person tasked with collecting detailed data on employment and earnings for those they visit, although visitors from models intending to improve family economic self-sufficiency will likely be asking about and gathering some information on these topics. Instead, the Committee expects eligible entities to work with state and federal partners to utilize employment and earnings information the family already provides (such as information collected and used to determine eligibility for other benefits and services the family may be receiving) or that is available from other sources.

The Committee recognizes this provision will require coordination between states, MIECHV models, the Administration for Children and Families (ACF), and the Health Resources and Services Administration (HRSA). The Committee further recognizes that the data collected under this provision may be incomplete until data is shared between all applicable departments of government, and encourages states, MIECV models, and HHS to provide Congress with information on how to improve this data sharing through legislative changes if necessary.

⁵MIECHV Form 2 Performance Indicators and Systems Outcomes Data Collection and Reporting Manual and Grantee Plan, updated October 2016 describes the new indicators used to measure family economic self-sufficiency, which are primary caregiver education and continuity of insurance coverage.

EFFECTIVE DATE

This provision is effective upon enactment.

SECTION 8: OPTION TO FUND EVIDENCE-BASED HOME VISITING ON
A PAY FOR OUTCOME BASIS

PRESENT LAW

No provision.

EXPLANATION OF PROVISION

H.R. 2824, as amended, would add new language to enable an eligible entity to use MIECHV grants for a pay-for-outcomes initiative that satisfy the requirements for providing evidence-based home visiting services.

H.R. 2824, as amended, would separately define “pay for outcome initiative” as a performance-based grant, contract, cooperative agreement or other agreement awarded by a public entity in which a commitment is made to pay for improved outcomes that result in social benefit and direct cost savings or cost avoidance to the public sector. Such an initiative would include—

- a feasibility study that describes how the proposed intervention is based on evidence of effectiveness;
- a rigorous, third-party evaluation that uses experimental or quasi-experimental design, or other research methodologies, that allow for the strongest possible causal inferences to determine whether the initiative has met its proposed outcomes;
- an annual, publicly available report on the progress of the initiative; and
- a requirement that payments are made to the recipient of a grant, contract, or cooperative agreement only when agreed upon outcomes are achieved, except that this requirement would not apply to payments for the third-party evaluation.

Funding for pay-for-outcomes initiatives could be expended by the eligible entity for up to 10 years after the funds are made available, and funds could be reused to fund other MIECHV projects if outcomes are not met and therefore payment is not made.

REASON FOR CHANGE

The Committee recognizes that there is bipartisan support to use federal funds to pay for programs that produce real results. Groups ranging from conservative think tanks to liberal advocacy organizations have recommended funding programs on a “pay-for-outcomes” basis. States and local governments are testing this strategy now—including in MIEHCV—but unless Congress allows federal funds to be used to pay for outcomes, their opportunities are limited as a substantial amount of funding for evidence-based home visiting programs is provided by the federal government. By allowing MIECHV grantees to pay for outcomes, more approaches can be tested and evaluated to determine whether they deliver real results for families with children.

A key feature of “pay for outcomes” financing is that the entity funding the project works with the service provider to jointly identify objective, quantifiable outcomes that must be met for payment to be made and an independent evaluator determines if the goals

are met. By selecting an objective outcome goal instead of some other metric for payment, the government is less likely to pay for things that don't produce the outcome they are seeking (such as clients served, classes taught, or costs incurred). In addition, the outcome for individuals served will be compared with the outcomes for a control group to confirm the services provided are responsible for producing the outcome.

"Pay for outcomes" financing also aligns the interests of the government, other funders, and service providers. In a traditional contract, the government agrees to pay for various inputs, processes, or services, which may encourage providers to increase those factors—regardless of whether they improve the outcome or not. In a "pay for outcomes" financing structure, the funder only pays if the project achieves the desired outcomes. As a result, service providers have a strong incentive to produce the positive social outcome and manage the project to ensure it succeeds.

The Committee believes allowing MIECHV grantees to use funding to pay for outcomes will help focus more federal spending on programs that deliver results. The Committee heard about an effort currently underway in South Carolina using non-federal funds during a March 15, 2017 hearing on reauthorization testing this "pay for outcomes" structure, and this provision will allow other states to test this approach as well. Paying for outcomes can reduce bureaucracy and increase local flexibility, as payment is tied to achieving an agreed-upon result instead of the performance of specific intermediate actions intended to be a proxy for outcomes. And because payment is tied to results, programs that are not successful no longer continue—meaning federal funds are focused on what works.

EFFECTIVE DATE

This provision is effective upon enactment.

SECTION 9: STRENGTHENING EVIDENCE-BASED HOME VISITING THROUGH STATE, LOCAL, AND PRIVATE PARTNERSHIP

PRESENT LAW

MIECHV funds provided to an eligible entity must be used to supplement and not supplant funds from other sources for early childhood home visiting. [Section 511(c) of the Social Security Act.]

EXPLANATION OF PROVISION

H.R. 2824, as amended, would require an eligible entity to support its MIECHV home visiting services with funds other than those provided under the MIECHV program. Beginning with FY2020, state or nonprofit organizations must support the MIECHV program with no less than 30% of non-MIECHV funds. This percentage would rise to 40% for FY2021 and to 50% for FY2022 and succeeding years. For an Indian Tribe (or a consortium of that Indian Tribes), a Tribal Organization, or an Urban Indian Organization, there would be an additional two-year delay with no less than 30% of funds coming from non-MIECHV sources beginning in FY2022.

These non-MIECHV funds (which could be other federal funds, or non-federal dollars) could be paid in cash or in kind. The HHS

Secretary could attribute fair market value to goods, services, and facilities provided from non-federal sources.

REASON FOR CHANGE

MIECHV programs have been shown to reduce child abuse and neglect, improve maternal and child health, and increase self-sufficiency among other impacts, and these benefits—both social and fiscal—will accrue to the state and the federal government. As a result, the Committee believes states should be expected to contribute other resources to support MIECHV. In addition, the Committee believes programs are operated more effectively and efficiently when states are investing their own funds. Requiring matching funds also increases resources to the program, allowing it to reach at least \$800 million a year in spending by FY2022.

Most social programs funded by this Committee, and many funded by other committees, already require states to match federal dollars, including Medicaid (where states spent \$212 billion in state matching funds in FY 2016), foster care and adoption (where states spent \$6 billion in state matching funds in FY 2015) along with other programs such as child support, child care, and child welfare.⁶ The requirement that states invest funds beyond those provided by the federal government should be no different for this program.

In addition to making this program more consistent with other federal social programs requiring outside investment, many of the savings that result from the success of this program—such as decreased hospital admissions, increased school readiness, reduced child abuse and neglect—are savings realized at the state and local level. These benefits reinforce the idea that it is already in the best financial interest of states to invest in this program.

The Congressional Budget Office projects the federal government will spend almost \$700 billion more than it takes in this year, and that the U.S. now has \$20 trillion in debt. Because of this, the Committee believes the most responsible way to continue this program and expand its reach is to provide funding for it by improving the integrity of another program to offset the cost [as was done in H.R. 2972, the Control of Unlawful Fugitive Felons (CUFF) Act, which was marked up and passed in conjunction with this bill], as well as create a strong federal-state financial partnership going forward.

This bill gives states substantial flexibility in meeting the matching requirement, allowing contributions to be made in cash or in kind from many different sources. For example, a state or local government could spend their own funds or accept contributions from a nonprofit organization or foundation. A state could also support MIECHV with other federal funds intended for a similar purpose (such as funds from the Temporary Assistance for Needy Families or Social Services Block Grant programs). This requirement will encourage states to shift spending towards evidence-based approaches that deliver real results for families, magnifying the im-

⁶Medicaid and CHIP Payment and Access Commission, Exhibit 16: Medicaid Spending by State, Category, and Source of Funds.

Committee on Ways and Means Green Book, 2016. Table 11–8: Title IV–E Foster Care, Adoption Assistance, and Kinship Guardianship Assistance Spending by State, FY2015.

pect of the program and yielding positive outcomes for more parents and their children across the country.

Taking into account the feedback from stakeholders, an Indian Tribe (or a consortium of that Indian Tribes), a Tribal Organization, or an Urban Indian Organization operating a home visiting program with MIECHV funds will have an additional two years to implement the match requirement. The Committee intends to continue to phase in this match requirement in a future reauthorization until it also reaches a 50 percent match requirement. The Committee found several other examples within its jurisdiction where tribes are expected to provide the same level of match as states, and believes tribes should have the same expectations.

The Committee has also determined many states are likely to already meet or exceed a 50 percent match requirement, even though this level of matching will not be fully phased in until FY 2022. Based on preliminary and incomplete data reviewed by the Committee, at least \$340 million is already being spent each year on evidence-based home visiting programs. Based on this information, more than a dozen states appear to exceed the FY 2022 match requirement today, and other states are likely to already meet or exceed this requirement. The Committee sees this as an opportunity to support and strengthen state and local investment dedicated to home visiting by focusing spending on evidence-based models that are shown to deliver results.

The Committee also believes this provision should work in conjunction with, not in addition to, the requirement in 511(f) of the Social Security Act that requires eligible entities to maintain previous efforts with MIECHV funds used to “supplement, and not supplant, funds from other sources for early childhood home visitation programs or initiatives.”

EFFECTIVE DATE

This provision is effective upon enactment.

SECTION 10: DATA EXCHANGE STANDARDS FOR IMPROVED INTEROPERABILITY

PRESENT LAW

No provision.

EXPLANATION OF PROVISION

This provision requires the head of the department or agency responsible for the MIECHV program (i.e., the Health Resources and Services Administration (HRSA) and the Administration for Children and Families (ACF)), per Section 511(h) of the Social Security Act, to designate data exchange standards for necessary categories of information that a state agency operating a home visiting program is required to exchange with another state agency under federal law. These standards are to be developed in consultation with an interagency workgroup established by the Office of Management and Budget (OMB) and considering the perspectives of states. To the extent practicable, the data exchange standards would be required to be nonproprietary and interoperable and incorporate standards developed and maintained by three groups of stakeholders: (1) an international voluntary consensus standards body,

as defined by OMB; (2) intergovernmental partnerships, such as the National Information Exchange Model; and (3) federal entities with authority over contracting and financial assistance.

Also in consultation with OMB, and considering the perspectives of state governments, the provision directs HRSA and ACF to designate data exchange standards to govern federal reporting and data exchanges required under federal law. To the extent practicable, the data exchange standards would be required to (1) incorporate features that are widely accepted, nonproprietary, and searchable, and are in computer-readable format (such as the eXtensible Markup Language); (2) be consistent with and implement applicable accounting principles; (3) be implemented in a manner that is cost-effective and improves program efficiency and effectiveness; and (4) be capable of being continually upgraded as necessary.

This provision includes a rule of construction to specify that changes in existing data standards for federal reporting would not require a change to standards found to be effective and efficient.

REASON FOR CHANGE

The Committee believes the programs within its jurisdiction should, from an information technology standpoint, operate consistently within and across programs. By beginning the process of data standardization and the use of common reporting mechanisms in this section, the Committee is achieving three goals: better preventing and identifying fraud and abuse; increasing the efficiency of administrative resources; and producing program savings for U.S. taxpayers. The private sector is decades ahead in its ability to use data efficiently to seamlessly provide better service as well as detect patterns of fraud, such as when credit cards are lost or stolen, and streamlining backend data processing. The public sector needs to review those best practices to better improve the operation of social service programs, prevent and identify fraud and abuse, and improve recovery of misspent taxpayer funds. The first step is organizing the data, as this section directs the Secretary to do with the MIECHV program.

The Subcommittee on Human Resources has previously received testimony confirming cooperation and collaboration between social services programs is not only hindered by the programs themselves operating in different silos, but also because the accompanying data is not easily shared or used to better understand the services individuals are receiving. The Committee supports consistent data standards that are non-proprietary and that promote the interoperability of data across various information technology platforms, including state legacy systems. Improved data standards will help increase the efficiency of data exchanges to use and reuse data within and across programs, and consistent data standards will allow states to automate the exchange of participant data, reducing delays and improving the availability of information on outcomes. It will also help to automate application forms by pre-populating them with reliable and verified data, which can reduce the burden on staff and allow them more time to engage individuals in services, all while reducing error.

Programs already covered by this language include other systems that home visiting families are likely to be engaged with, increas-

ing the overall effectiveness of this provision, including: child welfare, Temporary Assistance for Needy Families, Child Support Enforcement, Unemployment Insurance, and Supplemental Nutrition Assistance.

EFFECTIVE DATE

This provision is effective 2 years following the date of enactment.

III. VOTES OF THE COMMITTEE

In compliance with the Rules of the House of Representatives, the following statement is made concerning the vote of the Committee on Ways and Means during the markup consideration of H.R. 2824, “Increasing Opportunity and Success for Children and Parents through Evidence-Based Home Visiting Act” on September 13, 2017.

An amendment in the nature of a substitute was offered by Chairman Brady and adopted by voice vote (with a quorum being present).

The amendment offered by Mr. Pascrell to the amendment in the nature of a substitute to H.R. 2824, which would strike Section 9, which strengthens state, local, and private investments in home visiting, was not agreed to by a roll call vote of 21 nays to 13 yeas (with a quorum being present). The vote was as follows:

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Brady		X		Mr. Neal	X		
Mr. Johnson		X		Mr. Levin	X		
Mr. Nunes		X		Mr. Lewis	X		
Mr. Tiberi				Mr. Doggett	X		
Mr. Reichert		X		Mr. Thompson	X		
Mr. Roskam		X		Mr. Larson	X		
Mr. Buchanan				Mr. Blumenauer			
Mr. Smith (NE)		X		Mr. Kind	X		
Ms. Jenkins		X		Mr. Pascrell	X		
Mr. Paulsen		X		Mr. Crowley	X		
Mr. Marchant		X		Mr. Davis	X		
Ms. Black		X		Ms. Sanchez			
Mr. Reed		X		Mr. Higgins	X		
Mr. Kelly		X		Ms. Sewell	X		
Mr. Renacci		X		Ms. DelBene	X		
Mr. Meehan		X		Ms. Chu			
Ms. Noem		X					
Mr. Holding		X					
Mr. Smith (MO)		X					
Mr. Rice		X					
Mr. Schweikert		X					
Ms. Walorski		X					
Mr. Curbelo							
Mr. Bishop		X					

The vote on Mr. Roskam’s motion to table Mr. Doggett’s appeal of the ruling of the Chair was agreed to by a roll call vote of 21 yeas to 15 nays (with a quorum being present). The vote was as follows:

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Brady		X		Mr. Neal	X		
Mr. Johnson		X		Mr. Levin	X		
Mr. Nunes		X		Mr. Lewis	X		

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Tiberi				Mr. Doggett	X		
Mr. Reichert		X		Mr. Thompson	X		
Mr. Roskam		X		Mr. Larson			
Mr. Buchanan		X		Mr. Blumenauer	X		
Mr. Smith (NE)		X		Mr. Kind	X		
Ms. Jenkins		X		Mr. Pascrell	X		
Mr. Paulsen		X		Mr. Crowley	X		
Mr. Marchant		X		Mr. Davis	X		
Ms. Black				Ms. Sanchez	X		
Mr. Reed		X		Mr. Higgins	X		
Mr. Kelly		X		Ms. Sewell	X		
Mr. Renacci		X		Ms. DelBene	X		
Mr. Meehan		X		Ms. Chu	X		
Ms. Noem		X					
Mr. Holding		X					
Mr. Smith (MO)							
Mr. Rice		X					
Mr. Schweikert		X					
Ms. Walorski		X					
Mr. Curbelo		X					
Mr. Bishop		X					

The vote on Mr. Reichert’s motion to table Mr. Davis’ appeal of the ruling of the Chair was agreed to by a roll call vote of 21 yeas to 15 nays (with a quorum being present). The vote was as follows:

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Brady		X		Mr. Neal	X		
Mr. Johnson		X		Mr. Levin	X		
Mr. Nunes		X		Mr. Lewis	X		
Mr. Tiberi				Mr. Doggett	X		
Mr. Reichert		X		Mr. Thompson	X		
Mr. Roskam		X		Mr. Larson			
Mr. Buchanan		X		Mr. Blumenauer	X		
Mr. Smith (NE)		X		Mr. Kind	X		
Ms. Jenkins		X		Mr. Pascrell	X		
Mr. Paulsen		X		Mr. Crowley	X		
Mr. Marchant		X		Mr. Davis	X		
Ms. Black				Ms. Sanchez	X		
Mr. Reed		X		Mr. Higgins	X		
Mr. Kelly		X		Ms. Sewell	X		
Mr. Renacci		X		Ms. DelBene	X		
Mr. Meehan		X		Ms. Chu	X		
Ms. Noem		X					
Mr. Holding		X					
Mr. Smith (MO)							
Mr. Rice		X					
Mr. Schweikert		X					
Ms. Walorski		X					
Mr. Curbelo		X					
Mr. Bishop		X					

The amendment offered by Mr. Davis to the amendment in the nature of a substitute to H.R. 2824, which would increase spending on MIECHV without offsetting the increase with reductions in other spending, was not agreed to by a roll call vote of 21 nays to 15 yeas (with a quorum being present). The vote was as follows:

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Brady		X		Mr. Neal	X		
Mr. Johnson		X		Mr. Levin	X		
Mr. Nunes		X		Mr. Lewis	X		
Mr. Tiberi				Mr. Doggett	X		
Mr. Reichert		X		Mr. Thompson	X		

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Roskam		X		Mr. Larson			
Mr. Buchanan		X		Mr. Blumenauer	X		
Mr. Smith (NE)		X		Mr. Kind	X		
Ms. Jenkins		X		Mr. Pascrell	X		
Mr. Paulsen		X		Mr. Crowley	X		
Mr. Marchant		X		Mr. Davis	X		
Ms. Black				Ms. Sanchez	X		
Mr. Reed		X		Mr. Higgins	X		
Mr. Kelly		X		Ms. Sewell	X		
Mr. Renacci		X		Ms. DelBene	X		
Mr. Meehan		X		Ms. Chu	X		
Ms. Noem		X					
Mr. Holding		X					
Mr. Smith (MO)							
Mr. Rice		X					
Mr. Schweikert		X					
Ms. Walorski		X					
Mr. Curbelo		X					
Mr. Bishop		X					

The amendment offered by Mr. Pascrell to the amendment in the nature of a substitute to H.R. 2824, which would eliminate the requirement that states measure employment and earnings when they choose to achieve improvements in family and economic self-sufficiency, was not agreed to by a roll call vote of 22 nays to 15 yeas (with a quorum being present). The vote was as follows:

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Brady		X		Mr. Neal	X		
Mr. Johnson		X		Mr. Levin	X		
Mr. Nunes		X		Mr. Lewis	X		
Mr. Tiberi				Mr. Doggett	X		
Mr. Reichert		X		Mr. Thompson	X		
Mr. Roskam		X		Mr. Larson			
Mr. Buchanan		X		Mr. Blumenauer	X		
Mr. Smith (NE)		X		Mr. Kind	X		
Ms. Jenkins		X		Mr. Pascrell	X		
Mr. Paulsen		X		Mr. Crowley	X		
Mr. Marchant		X		Mr. Davis	X		
Ms. Black				Ms. Sanchez	X		
Mr. Reed		X		Mr. Higgins	X		
Mr. Kelly		X		Ms. Sewell	X		
Mr. Renacci		X		Ms. DelBene	X		
Mr. Meehan		X		Ms. Chu	X		
Ms. Noem		X					
Mr. Holding		X					
Mr. Smith (MO)		X					
Mr. Rice		X					
Mr. Schweikert		X					
Ms. Walorski		X					
Mr. Curbelo		X					
Mr. Bishop		X					

The amendment offered by Ms. DelBene to the amendment in the nature of a substitute to H.R. 2824, which would eliminate the requirement that states direct additional resources to MIECHV beginning in FY 2020 and increase funding for tribes without offsetting the increase with reductions in other spending, was not agreed to by a roll call vote of 22 nays to 15 yeas (with a quorum being present). The vote was as follows:

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Brady		X		Mr. Neal	X		

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Johnson		X		Mr. Levin	X		
Mr. Nunes		X		Mr. Lewis	X		
Mr. Tiberi				Mr. Doggett	X		
Mr. Reichert		X		Mr. Thompson	X		
Mr. Roskam		X		Mr. Larson			
Mr. Buchanan		X		Mr. Blumenauer	X		
Mr. Smith (NE)		X		Mr. Kind	X		
Ms. Jenkins		X		Mr. Pascrell	X		
Mr. Paulsen		X		Mr. Crowley	X		
Mr. Marchant		X		Mr. Davis	X		
Ms. Black				Ms. Sanchez	X		
Mr. Reed		X		Mr. Higgins	X		
Mr. Kelly		X		Ms. Sewell	X		
Mr. Renacci		X		Ms. DelBene	X		
Mr. Meehan		X		Ms. Chu	X		
Ms. Noem		X					
Mr. Holding		X					
Mr. Smith (MO)		X					
Mr. Rice		X					
Mr. Schweikert		X					
Ms. Walorski		X					
Mr. Curbelo		X					
Mr. Bishop		X					

H.R. 2842 as ordered favorably reported to the House of Representatives as amended by a roll call vote of 22 yeas to 15 nays (with a quorum being present). The vote was as follows:

Representative	Yea	Nay	Present	Representative	Yea	Nay	Present
Mr. Brady		X		Mr. Neal	X		
Mr. Johnson		X		Mr. Levin	X		
Mr. Nunes		X		Mr. Lewis	X		
Mr. Tiberi				Mr. Doggett	X		
Mr. Reichert		X		Mr. Thompson	X		
Mr. Roskam		X		Mr. Larson			
Mr. Buchanan		X		Mr. Blumenauer	X		
Mr. Smith (NE)		X		Mr. Kind	X		
Ms. Jenkins		X		Mr. Pascrell	X		
Mr. Paulsen		X		Mr. Crowley	X		
Mr. Marchant		X		Mr. Davis	X		
Ms. Black				Ms. Sanchez	X		
Mr. Reed		X		Mr. Higgins	X		
Mr. Kelly		X		Ms. Sewell	X		
Mr. Renacci		X		Ms. DelBene	X		
Mr. Meehan		X		Ms. Chu	X		
Ms. Noem		X					
Mr. Holding		X					
Mr. Smith (MO)		X					
Mr. Rice		X					
Mr. Schweikert		X					
Ms. Walorski		X					
Mr. Curbelo		X					
Mr. Bishop		X					

IV. BUDGET EFFECTS OF THE BILL

A. COMMITTEE ESTIMATE OF BUDGETARY EFFECTS

In compliance with clause 3(d) of rule XIII of the Rules of the House of Representatives, the following statement is made concerning the effects on the budget of the bill, H.R. 2824, as reported. The Committee agrees with the estimate prepared by the Congressional Budget Office (CBO), which is included below.

B. STATEMENT REGARDING NEW BUDGET AUTHORITY AND TAX
EXPENDITURES BUDGET AUTHORITY

In compliance with clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee states that the bill would create new budget authority to fund the MIECHV program through FY 2022, but is intended to be accompanied by H.R. 2972, the Control of Unlawful Fugitive Felons (CUFF) Act, which will more than offset increase in budget authority in this bill. The Committee states further that the bill involves no new or increased tax expenditures.

C. COST ESTIMATE PREPARED BY THE CONGRESSIONAL BUDGET
OFFICE

In compliance with clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, requiring a cost estimate prepared by the CBO, the following statement by CBO is provided.

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, September 20, 2017.

Hon. KEVIN BRADY,
*Chairman, Committee on Ways and Means,
House of Representatives, Washington, DC.*

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 2824, the Increasing Opportunity and Success for Children and Parents through Evidence-Based Home Visiting Act.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Lisa Ramirez-Branum.
Sincerely,

KEITH HALL, *Director.*

Enclosure.

H.R. 2824—Increasing Opportunity and Success for Children and Parents Through Evidence-Based Home Visiting Act

Summary: H.R. 2824 would reauthorize the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program through fiscal year 2022 and would directly appropriate \$400 million for each fiscal year 2018 through 2022 for the program. CBO estimates that enacting the bill would cost about \$2 billion over the 2017–2027 period.

Pay-as-you-go procedures apply because enacting the bill would affect direct spending. H.R. 2824 would not affect revenues.

CBO estimates that enacting the bill would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2028.

H.R. 2824 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA).

Estimated cost to the Federal Government: The estimated budgetary effect of H.R. 2824 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By fiscal year, in millions of dollars—													2017– 2022	2017– 2027
	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027				
INCREASES IN DIRECT SPENDING															
Budget Authority	0	400	400	400	400	400	0	0	0	0	0	0	2,000	2,000	
Estimated Outlays	0	12	140	300	396	396	384	256	96	0	0	1,244	1,980		

Basis of estimate: The Health Resources and Services Administration (HRSA) administers the MIECHV grant program. The funds are distributed to states, territories, and tribal entities to develop and implement evidence-based, voluntary programs that aim to improve maternal and child health, prevent child abuse and neglect, encourage positive parenting, and promote child development and school readiness. In fiscal year 2017, the MIECHV program received \$372 million, after accounting for sequestration. The program expires at the end of fiscal year 2017.

H.R. 2824 would appropriate \$400 million for each fiscal year 2018 through 2022 for the MIECHV program and would make several other programmatic changes. The bill would:

- Require states to review and update assessments on state-wide needs and identify at-risk communities by October 1, 2020;
- Set standards for data exchange with state agencies;
- Authorize a grantee to use funds for pay-for-outcomes initiatives;
- Alter several reporting and benchmark requirements; and
- Require grantees, starting in 2020, to provide matching funds. Grantees could count spending on relevant activities from other federal funds or by third parties toward the matching requirement.

Based on historical spending patterns, CBO estimates enacting H.R. 2824 would cost about \$2 billion over the 2018–2027 period.

Pay-As-You-Go considerations: The Statutory Pay-As-You-Go Act of 2010 establishes budget-reporting and enforcement procedures for legislation affecting direct spending or revenues. The net changes in outlays that are subject to those pay-as-you-go procedures are shown in the following table.

CBO ESTIMATE OF PAY-AS-YOU-GO EFFECTS FOR H.R. 2824, AS ORDERED REPORTED BY THE HOUSE COMMITTEE ON WAYS AND MEANS ON SEPTEMBER 13, 2017

	By fiscal year, in millions of dollars—													2017– 2022	2017– 2027
	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027				
NET INCREASE IN THE DEFICIT															
Statutory Pay-As-You-Go Impact	0	12	140	300	396	396	384	256	96	0	0	1,244	1,980		

Increase in long-term direct spending and deficits: CBO estimates that enacting the legislation would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2028.

Intergovernmental and private-sector impact: H.R. 2824 contains no intergovernmental or private-sector mandates as defined in UMRA.

Estimate prepared by: Federal costs: Lisa Ramirez-Branum, Ellen Werble, and Emily King; Impact on state, local, and tribal governments; Zachary Byrum; Impact on the Private Sector: Amy Petz.

Estimate approved by: H. Samuel Papenfuss, Deputy Assistant Director for Budget Analysis.

V. OTHER MATTERS TO BE DISCUSSED UNDER THE RULES OF THE HOUSE

A. COMMITTEE OVERSIGHT FINDINGS AND RECOMMENDATIONS

With respect to clause 3(c)(1) of rule XIII of the Rules of the House of Representatives, the Committee made findings and recommendations that are reflected in this report.

B. STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

With respect to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, Committee establishes the following performance related goals and objectives for this legislation: To fund evidence-based programs that improve the lives of families in at-risk communities by reducing child abuse and neglect, improving maternal and child health, and improving self-sufficiency.

C. INFORMATION RELATING TO UNFUNDED MANDATES

This information is provided in accordance with section 423 of the Unfunded Mandates Reform Act of 1995 (Pub. L. No. 104-4). The Committee has determined that the bill does not contain Federal mandates on the private sector. The Committee has determined that the bill does not impose a Federal intergovernmental mandate on State, local, or tribal governments.

D. CONGRESSIONAL EARMARKS, LIMITED TAX BENEFITS, AND LIMITED TARIFF BENEFITS

With respect to clause 9 of rule XXI of the Rules of the House of Representatives, the Committee has carefully reviewed the provisions of the bill, and states that the provisions of the bill do not contain any congressional earmarks, limited tax benefits, or limited tariff benefits within the meaning of the rule.

E. DUPLICATION OF FEDERAL PROGRAMS

In compliance with clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, the Committee states that no provision of the bill establishes or reauthorizes: (1) a program of the Federal Government known to be duplicative of another Federal program; (2) a program included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111-139; or (3) a program related to a program identified in the most recent Catalog of Federal Domestic Assistance, published pursuant to the Federal Program Information Act (Pub. L. No. 95-220, as amended by Pub. L. No. 98-169).

F. DISCLOSURE OF DIRECTED RULE MAKINGS

In compliance with Sec. 3(i) of H. Res. 5 (115th Congress), the following statement is made concerning directed rule makings: The Committee advises that the bill requires no directed rulemakings within the meaning of such section.

VI. CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (new matter in printed in italic and existing law in which no change is proposed is shown in roman):

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, and existing law in which no change is proposed is shown in roman):

SOCIAL SECURITY ACT

* * * * *

**TITLE V—MATERNAL AND CHILD HEALTH SERVICES
BLOCK GRANT**

* * * * *

SEC. 511. MATERNAL, INFANT, AND EARLY CHILDHOOD HOME VISITING PROGRAMS.

(a) PURPOSES.—The purposes of this section are—

- (1) to strengthen and improve the programs and activities carried out under this title;
- (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.

(b) REQUIREMENT FOR ALL STATES TO ASSESS STATEWIDE NEEDS AND IDENTIFY AT RISK COMMUNITIES.—

(1) IN GENERAL.—[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] *Each State shall, as a condition of receiving payments from an allotment for the State under section 502, review and update the statewide needs assessment not later than October 1, 2020 (which may be separate from but in coordination with the statewide needs assessment required under section 505(a)) that identifies—*

(A) communities with concentrations of—

- (i) premature birth, low-birth weight infants, and infant mortality, including infant death due to neglect,

or other indicators of at-risk prenatal, maternal, newborn, or child health;

- (ii) poverty;
- (iii) crime;
- (iv) domestic violence;
- (v) high rates of high-school drop-outs;
- (vi) substance abuse;
- (vii) unemployment; or
- (viii) child maltreatment;

(B) the quality and capacity of existing programs or initiatives for early childhood home visitation in the State including—

- (i) the number and types of individuals and families who are receiving services under such programs or initiatives;
- (ii) the gaps in early childhood home visitation in the State; and
- (iii) the extent to which such programs or initiatives are meeting the needs of eligible families described in subsection (k)(2); and

(C) the State's capacity for providing substance abuse treatment and counseling services to individuals and families in need of such treatment or services.

(2) COORDINATION WITH OTHER ASSESSMENTS.—In conducting the statewide needs assessment required under paragraph (1), the State shall coordinate with, and take into account, other appropriate needs assessments conducted by the State, as determined by the Secretary, including the needs assessment required under section 505(a) (both the most recently completed assessment and any such assessment in progress), the communitywide strategic planning and needs assessments conducted in accordance with section 640(g)(1)(C) of the Head Start Act, and the inventory of current unmet needs and current community-based and prevention-focused programs and activities to prevent child abuse and neglect, and other family resource services operating in the State required under section 205(3) of the Child Abuse Prevention and Treatment Act.

(3) SUBMISSION TO THE SECRETARY.—Each State shall submit to the Secretary, in such form and manner as the Secretary shall require—

- (A) the results of the statewide needs assessment required under paragraph (1); and
- (B) a description of how the State intends to address needs identified by the assessment, particularly with respect to communities identified under paragraph (1)(A), which may include applying for a grant to conduct an early childhood home visitation program in accordance with the requirements of this section.

(c) GRANTS FOR EARLY CHILDHOOD HOME VISITATION PROGRAMS.—

(1) AUTHORITY TO MAKE GRANTS.—In addition to any other payments made under this title to a State, the Secretary shall make grants to eligible entities to enable the entities to deliver services under early childhood home visitation programs that satisfy the requirements of subsection (d) to eligible families in

order to promote improvements in maternal and prenatal health, infant health, child health and development, parenting related to child development outcomes, school readiness, and the socioeconomic status of such families, and reductions in child abuse, neglect, and injuries.

(2) **AUTHORITY TO USE INITIAL GRANT FUNDS FOR PLANNING OR IMPLEMENTATION.**—An eligible entity that receives a grant under paragraph (1) may use a portion of the funds made available to the entity during the first 6 months of the period for which the grant is made for planning or implementation activities to assist with the establishment of early childhood home visitation programs that satisfy the requirements of subsection (d).

(3) **AUTHORITY TO USE GRANT FOR A PAY FOR OUTCOMES INITIATIVE.**—An eligible entity to which a grant is made under paragraph (1) may use the grant to pay for the results of a pay for outcomes initiative that satisfies the requirements of subsection (d) and that will not result in a reduction of funding for services delivered under this section while an eligible entity develops or operates such an initiative.

[(3)] (4) **GRANT DURATION.**—The Secretary shall determine the period of years for which a grant is made to an eligible entity under paragraph (1).

[(4)] (5) **TECHNICAL ASSISTANCE.**—The Secretary shall provide an eligible entity that receives a grant under paragraph (1) with technical assistance in administering programs or activities conducted in whole or in part with grant funds.

(d) **REQUIREMENTS.**—The requirements of this subsection for an early childhood home visitation program conducted with a grant made under this section are as follows:

(1) **QUANTIFIABLE, MEASURABLE IMPROVEMENT IN BENCHMARK AREAS.**—

(A) **IN GENERAL.**—The eligible entity establishes, subject to the approval of the Secretary, quantifiable, measurable 3- and 5-year benchmarks for demonstrating that the program results in improvements for the eligible families participating in the program in [each of] the following areas:

- (i) Improved maternal and newborn health.
- (ii) Prevention of child injuries, child abuse, neglect, or maltreatment, and reduction of emergency department visits.
- (iii) Improvement in school readiness and achievement.
- (iv) Reduction in crime or domestic violence.
- (v) Improvements in family economic self-sufficiency (which shall include measures of employment and earnings).
- (vi) Improvements in the coordination and referrals for other community resources and supports.

(B) **DEMONSTRATION OF IMPROVEMENTS AFTER 3 YEARS.**—

- (i) **REPORT TO THE SECRETARY.**—Not later than 30 days after the end of the 3rd year in which the eligible entity conducts the program, the entity submits to the Secretary a report demonstrating improvement in at least 4 of the areas specified in subparagraph (A).

(ii) **CORRECTIVE ACTION PLAN.**—If the report submitted by the eligible entity under clause (i) fails to demonstrate improvement in at least 4 of the areas specified in subparagraph (A), the entity shall develop and implement a plan to improve outcomes in each of the areas specified in subparagraph (A), subject to approval by the Secretary. The plan shall include provisions for the Secretary to monitor implementation of the plan and conduct continued oversight of the program, including through submission by the entity of regular reports to the Secretary.

(iii) **TECHNICAL ASSISTANCE.**—

(I) **IN GENERAL.**—The Secretary shall provide an eligible entity required to develop and implement an improvement plan under clause (ii) with technical assistance to develop and implement the plan. The Secretary may provide the technical assistance directly or through grants, contracts, or cooperative agreements.

(II) **ADVISORY PANEL.**—The Secretary shall establish an advisory panel for purposes of obtaining recommendations regarding the technical assistance provided to entities in accordance with subclause (I).

(iv) **NO IMPROVEMENT OR FAILURE TO SUBMIT REPORT.**—If the Secretary determines after a period of time specified by the Secretary that an eligible entity implementing an improvement plan under clause (ii) has failed to demonstrate any improvement in the areas specified in subparagraph (A), or if the Secretary determines that an eligible entity has failed to submit the report required under clause (i), the Secretary shall terminate the entity's grant and may include any unexpended grant funds in grants made to nonprofit organizations under subsection (h)(2)(B).

(C) **FINAL REPORT.**—Not later than December 31, 2015, the eligible entity shall submit a report to the Secretary demonstrating improvements (if any) in each of the areas specified in subparagraph (A).

(D) **DEMONSTRATION OF IMPROVEMENTS IN SUBSEQUENT YEARS.**—

(i) **CONTINUED MEASUREMENT OF IMPROVEMENT IN APPLICABLE BENCHMARK AREAS.**—*The eligible entity, after demonstrating improvements for eligible families as specified in subparagraphs (A) and (B), shall continue to track and report not later than 30 days after the end of fiscal year 2020 and every three years thereafter, information demonstrating that the program results in improvements for the eligible families participating in the program in at least 4 of the areas specified in subparagraph (A) that the service delivery model or models, selected by the entity, intend to improve.*

(ii) **CORRECTIVE ACTION PLAN.**—*If the eligible entity fails to demonstrate improvement in at least 4 of the*

areas specified in subparagraph (A), the entity shall develop and implement a plan to improve outcomes in each of the areas specified in subparagraph (A) that the service delivery model or models, selected by the entity, intend to improve, subject to approval by the Secretary. The plan shall include provisions for the Secretary to monitor implementation of the plan and conduct continued oversight of the program, including through submission by the entity of regular reports to the Secretary.

(iii) *TECHNICAL ASSISTANCE.*—The Secretary shall provide an eligible entity required to develop and implement an improvement plan under clause (ii) with technical assistance to develop and implement the plan. The Secretary may provide the technical assistance directly or through grants, contracts, or cooperative agreements.

(iv) *NO IMPROVEMENT OR FAILURE TO SUBMIT REPORT.*—If the Secretary determines after a period of time specified by the Secretary that an eligible entity implementing an improvement plan under clause (ii) has failed to demonstrate any improvement in at least 4 of the areas specified in subparagraph (A) that the service delivery model or models intend to improve, or if the Secretary determines that an eligible entity has failed to submit the report required by clause (i), the Secretary shall terminate the grant made to the entity under this section and may include any unexpended grant funds in grants made to nonprofit organizations under subsection (h)(2)(B).

(2) IMPROVEMENTS IN OUTCOMES FOR INDIVIDUAL FAMILIES.—

(A) *IN GENERAL.*—The program is designed, with respect to an eligible family participating in the program, to result in the participant outcomes described in subparagraph (B) that the eligible entity identifies on the basis of an individualized assessment of the family, are relevant for that family.

(B) *PARTICIPANT OUTCOMES.*—The participant outcomes described in this subparagraph are the following:

(i) Improvements in prenatal, maternal, and newborn health, including improved pregnancy outcomes

(ii) Improvements in child health and development, including the prevention of child injuries and maltreatment and improvements in cognitive, language, social-emotional, and physical developmental indicators.

(iii) Improvements in parenting skills.

(iv) Improvements in school readiness and child academic achievement.

(v) Reductions in crime or domestic violence.

(vi) Improvements in family economic self-sufficiency.

(vii) Improvements in the coordination of referrals for, and the provision of, other community resources

and supports for eligible families, consistent with State child welfare agency training.

(3) CORE COMPONENTS.—The program includes the following core components:

(A) SERVICE DELIVERY MODEL OR MODELS.—

(i) IN GENERAL.—Subject to clause (ii), the program is conducted using 1 or more of the service delivery models described in item (aa) or (bb) of subclause (I) or in subclause (II) selected by the eligible entity:

(I) The model conforms to a clear consistent home visitation model that has been in existence for at least 3 years and is research-based, grounded in relevant empirically-based knowledge, linked to program determined outcomes, associated with a national organization or institution of higher education that has comprehensive home visitation program standards that ensure high quality service delivery and continuous program quality improvement, and has demonstrated significant, (and in the case of the service delivery model described in item (aa), sustained) positive outcomes, as described in the benchmark areas specified in paragraph (1)(A) and the participant outcomes described in paragraph (2)(B), when evaluated using well-designed and rigorous—

(aa) randomized controlled research designs, and the evaluation results have been published in a peer-reviewed journal; or

(bb) quasi-experimental research designs.

(II) The model conforms to a promising and new approach to achieving the benchmark areas specified in paragraph (1)(A) and the participant outcomes described in paragraph (2)(B), has been developed or identified by a national organization or institution of higher education, and will be evaluated through well-designed and rigorous process.

(ii) MAJORITY OF GRANT FUNDS USED FOR EVIDENCE-BASED MODELS.—An eligible entity shall use not more than 25 percent of the amount of the grant paid to the entity for a fiscal year for purposes of conducting a program using the service delivery model described in clause (i)(II).

(iii) CRITERIA FOR EVIDENCE OF EFFECTIVENESS OF MODELS.—The Secretary shall establish criteria for evidence of effectiveness of the service delivery models and shall ensure that the process for establishing the criteria is transparent and provides the opportunity for public comment.

(B) ADDITIONAL REQUIREMENTS.—

(i) The program adheres to a clear, consistent model that satisfies the requirements of being grounded in empirically-based knowledge related to home visiting and linked to the benchmark areas specified in paragraph (1)(A) and the participant outcomes described in

paragraph (2)(B) related to the purposes of the program.

(ii) The program employs well-trained and competent staff, as demonstrated by education or training, such as nurses, social workers, educators, child development specialists, or other well-trained and competent staff, and provides ongoing and specific training on the model being delivered.

(iii) The program maintains high quality supervision to establish home visitor competencies.

(iv) The program demonstrates strong organizational capacity to implement the activities involved.

(v) The program establishes appropriate linkages and referral networks to other community resources and supports for eligible families.

(vi) The program monitors the fidelity of program implementation to ensure that services are delivered pursuant to the specified model.

(4) PRIORITY FOR SERVING HIGH-RISK POPULATIONS.—The eligible entity gives priority to providing services under the program to the following:

(A) Eligible families who reside in communities in need of such services, as identified in the statewide needs assessment required under subsection (b)(1)(A), *taking into account the staffing, community resource, and other requirements of the service delivery model or models that the eligible entity may need to develop for the model to operate and demonstrate improvements for eligible families.*

(B) Low-income eligible families.

(C) Eligible families who are pregnant women who have not attained age 21.

(D) Eligible families that have a history of child abuse or neglect or have had interactions with child welfare services.

(E) Eligible families that have a history of substance abuse or need substance abuse treatment.

(F) Eligible families that have users of tobacco products in the home.

(G) Eligible families that are or have children with low student achievement.

(H) Eligible families with children with developmental delays or disabilities.

(I) Eligible families who, or that include individuals who, are serving or formerly served in the Armed Forces, including such families that have members of the Armed Forces who have had multiple deployments outside of the United States.

(e) APPLICATION REQUIREMENTS.—An eligible entity desiring a grant under this section shall submit an application to the Secretary for approval, in such manner as the Secretary may require, that includes the following:

(1) A description of the populations to be served by the entity, including specific information regarding how the entity will serve high risk populations described in subsection (d)(4).

(2) An assurance that the entity will give priority to serving low-income eligible families and eligible families who reside in at risk communities identified in the statewide needs assessment required under subsection (b)(1)(A).

(3) The service delivery model or models described in subsection (d)(3)(A) that the entity will use under the program and the basis for the selection of the model or models.

(4) A statement identifying how the selection of the populations to be served and the service delivery model or models that the entity will use under the program for such populations is consistent with the results of the statewide needs assessment conducted under subsection (b).

(5) The quantifiable, measurable benchmarks established by the State to demonstrate that the program contributes to improvements in the areas specified in subsection (d)(1)(A) *that the service delivery model or models, selected by the entity, intend to improve.*

(6) An assurance that the entity will obtain and submit documentation or other appropriate evidence from the organization or entity that developed the service delivery model or models used under the program to verify that the program is implemented and services are delivered according to the model specifications.

(7) Assurances that the entity will establish procedures to ensure that—

(A) the participation of each eligible family in the program is voluntary; and

(B) services are provided to an eligible family in accordance with the individual assessment for that family.

(8) Assurances that the entity will—

(A) submit annual reports to the Secretary regarding the program and activities carried out under the program that include such information and data as the Secretary shall require; and

(B) participate in, and cooperate with, data and information collection necessary for the evaluation required under subsection (g)(2) and other research and evaluation activities carried out under subsection (h)(3).

(9) A description of other State programs that include home visitation services, including, if applicable to the State, other programs carried out under this title with funds made available from allotments under section 502(c), programs funded under title IV, title II of the Child Abuse Prevention and Treatment Act (relating to community-based grants for the prevention of child abuse and neglect), and section 645A of the Head Start Act (relating to Early Head Start programs).

(10) Other information as required by the Secretary.

(f) MAINTENANCE OF EFFORT.—Funds provided to an eligible entity receiving a grant under this section shall supplement, and not supplant, funds from other sources for early childhood home visitation programs or initiatives.

(g) EVALUATION.—

(1) INDEPENDENT, EXPERT ADVISORY PANEL.—The Secretary, in accordance with subsection (h)(1)(A), shall appoint an independent advisory panel consisting of experts in program eval-

uation and research, education, and early childhood development—

(A) to review, and make recommendations on, the design and plan for the evaluation required under paragraph (2) within 1 year after the date of enactment of this section;

(B) to maintain and advise the Secretary regarding the progress of the evaluation; and

(C) to comment, if the panel so desires, on the report submitted under paragraph (3).

(2) **AUTHORITY TO CONDUCT EVALUATION.**—On the basis of the recommendations of the advisory panel under paragraph (1), the Secretary shall, by grant, contract, or interagency agreement, conduct an evaluation of the statewide needs assessments submitted under subsection (b) and the grants made under subsections (c) and (h)(3)(B). The evaluation shall include—

(A) an analysis, on a State-by-State basis, of the results of such assessments, including indicators of maternal and prenatal health and infant health and mortality, and State actions in response to the assessments; and

(B) an assessment of—

(i) the effect of early childhood home visitation programs on child and parent outcomes, including with respect to each of the benchmark areas specified in subsection (d)(1)(A) and the participant outcomes described in subsection (d)(2)(B);

(ii) the effectiveness of such programs on different populations, including the extent to which the ability of programs to improve participant outcomes varies across programs and populations; and

(iii) the potential for the activities conducted under such programs, if scaled broadly, to improve health care practices, eliminate health disparities, and improve health care system quality, efficiencies, and reduce costs.

(3) **REPORT.**—Not later than March 31, 2015, the Secretary shall submit a report to Congress on the results of the evaluation conducted under paragraph (2) and shall make the report publicly available.

(h) **OTHER PROVISIONS.**—

(1) **INTRA-AGENCY COLLABORATION.**—The Secretary shall ensure that the Maternal and Child Health Bureau and the Administration for Children and Families collaborate with respect to carrying out this section, including with respect to—

(A) reviewing and analyzing the statewide needs assessments required under subsection (b), the awarding and oversight of grants awarded under this section, the establishment of the advisory panels required under subsections (d)(1)(B)(iii)(II) and (g)(1), and the evaluation and report required under subsection (g); and

(B) consulting with other Federal agencies with responsibility for administering or evaluating programs that serve eligible families to coordinate and collaborate with respect to research related to such programs and families, including the Office of the Assistant Secretary for Plan-

ning and Evaluation of the Department of Health and Human Services, the Centers for Disease Control and Prevention, the National Institute of Child Health and Human Development of the National Institutes of Health, the Office of Juvenile Justice and Delinquency Prevention of the Department of Justice, and the Institute of Education Sciences of the Department of Education.

(2) GRANTS TO ELIGIBLE ENTITIES THAT ARE NOT STATES.—

(A) INDIAN TRIBES, TRIBAL ORGANIZATIONS, OR URBAN INDIAN ORGANIZATIONS.—The Secretary shall specify requirements for eligible entities that are Indian Tribes (or a consortium of Indian Tribes), Tribal Organizations, or Urban Indian Organizations to apply for and conduct an early childhood home visitation program with a grant under this section. **[Such]** *Except as provided in subsection (l)(1), such* requirements shall, to the greatest extent practicable, be consistent with the requirements applicable to eligible entities that are States and shall require an Indian Tribe (or consortium), Tribal Organization, or Urban Indian Organization to—

- (i) conduct a needs assessment similar to the assessment required for all States under subsection (b); and
- (ii) establish quantifiable, measurable 3- and 5-year benchmarks consistent with subsection (d)(1)(A).

(B) NONPROFIT ORGANIZATIONS.—If, as of the beginning of fiscal year 2012, a State has not applied or been approved for a grant under this section, the Secretary may use amounts appropriated under paragraph (1) of subsection (j) that are available for expenditure under paragraph (3) of that subsection to make a grant to an eligible entity that is a nonprofit organization described in subsection (k)(1)(B) to conduct an early childhood home visitation program in the State. The Secretary shall specify the requirements for such an organization to apply for and conduct the program which shall, to the greatest extent practicable, be consistent with the requirements applicable to eligible entities that are States and shall require the organization to—

- (i) carry out the program based on the needs assessment conducted by the State under subsection (b); and
- (ii) establish quantifiable, measurable 3- and 5-year benchmarks consistent with subsection (d)(1)(A).

(3) RESEARCH AND OTHER EVALUATION ACTIVITIES.—

(A) IN GENERAL.—The Secretary shall carry out a continuous program of research and evaluation activities in order to increase knowledge about the implementation and effectiveness of home visiting programs, using random assignment designs to the maximum extent feasible. The Secretary may carry out such activities directly, or through grants, cooperative agreements, or contracts.

(B) REQUIREMENTS.—The Secretary shall ensure that—

- (i) evaluation of a specific program or project is conducted by persons or individuals not directly involved in the operation of such program or project; and

(ii) the conduct of research and evaluation activities includes consultation with independent researchers, State officials, and developers and providers of home visiting programs on topics including research design and administrative data matching.

(4) REPORT AND RECOMMENDATION.—Not later than December 31, 2015, the Secretary shall submit a report to Congress regarding the programs conducted with grants under this section. The report required under this paragraph shall include—

(A) information regarding the extent to which eligible entities receiving grants under this section demonstrated improvements in [each of] the areas specified in subsection (d)(1)(A);

(B) information regarding any technical assistance provided under subsection (d)(1)(B)(iii)(I), including the type of any such assistance provided; and

(C) recommendations for such legislative or administrative action as the Secretary determines appropriate.

(5) DATA EXCHANGE STANDARDS FOR IMPROVED INTEROPERABILITY.—

(A) DESIGNATION AND USE OF DATA EXCHANGE STANDARDS.—

(i) DESIGNATION.—*The head of the department or agency responsible for administering a program funded under this section shall, in consultation with an interagency work group established by the Office of Management and Budget and considering State government perspectives, designate data exchange standards for necessary categories of information that a State agency operating the program is required to electronically exchange with another State agency under applicable Federal law.*

(ii) DATA EXCHANGE STANDARDS MUST BE NON-PROPRIETARY AND INTEROPERABLE.—*The data exchange standards designated under clause (i) shall, to the extent practicable, be nonproprietary and interoperable.*

(iii) OTHER REQUIREMENTS.—*In designating data exchange standards under this paragraph, the Secretary shall, to the extent practicable, incorporate—*

(I) *interoperable standards developed and maintained by an international voluntary consensus standards body, as defined by the Office of Management and Budget;*

(II) *interoperable standards developed and maintained by intergovernmental partnerships, such as the National Information Exchange Model; and*

(III) *interoperable standards developed and maintained by Federal entities with authority over contracting and financial assistance.*

(B) DATA EXCHANGE STANDARDS FOR FEDERAL REPORTING.—

(i) DESIGNATION.—*The head of the department or agency responsible for administering a program referred to in this section shall, in consultation with an*

interagency work group established by the Office of Management and Budget, and considering State government perspectives, designate data exchange standards to govern Federal reporting and exchange requirements under applicable Federal law.

(ii) *REQUIREMENTS.—The data exchange reporting standards required by clause (i) shall, to the extent practicable—*

(I) incorporate a widely accepted, nonproprietary, searchable, computer-readable format;

(II) be consistent with and implement applicable accounting principles;

(III) be implemented in a manner that is cost-effective and improves program efficiency and effectiveness; and

(IV) be capable of being continually upgraded as necessary.

(iii) *INCORPORATION OF NONPROPRIETARY STANDARDS.—In designating data exchange standards under this paragraph, the Secretary shall, to the extent practicable, incorporate existing nonproprietary standards, such as the eXtensible Mark up Language.*

(iv) *RULE OF CONSTRUCTION.—Nothing in this paragraph shall be construed to require a change to existing data exchange standards for Federal reporting about a program referred to in this section, if the head of the department or agency responsible for administering the program finds the standards to be effective and efficient.*

(i) **APPLICATION OF OTHER PROVISIONS OF TITLE.—**

(1) **IN GENERAL.—**Except as provided in paragraph (2), the other provisions of this title shall not apply to a grant made under this section.

(2) **EXCEPTIONS.—**The following provisions of this title shall apply to a grant made under this section to the same extent and in the same manner as such provisions apply to allotments made under section 502(c):

(A) Section 504(b)(6) (relating to prohibition on payments to excluded individuals and entities).

(B) Section 504(c) (relating to the use of funds for the purchase of technical assistance).

(C) Section 504(d) (relating to a limitation on administrative expenditures).

(D) Section 506 (relating to reports and audits), but only to the extent determined by the Secretary to be appropriate for grants made under this section.

(E) Section 507 (relating to penalties for false statements).

(F) Section 508 (relating to nondiscrimination).

(G) Section 509(a) (relating to the administration of the grant program).

(j) **APPROPRIATIONS.—**

(1) **IN GENERAL.—**Out of any funds in the Treasury not otherwise appropriated, there are appropriated to the Secretary to carry out this section—

- (A) \$100,000,000 for fiscal year 2010;
- (B) \$250,000,000 for fiscal year 2011;
- (C) \$350,000,000 for fiscal year 2012;
- (D) \$400,000,000 for fiscal year 2013;
- (E) \$400,000,000 for fiscal year 2014;
- (F) for fiscal year 2015, \$400,000,000;
- (G) for fiscal year 2016, \$400,000,000; and
- (H) for **[fiscal year 2017]** *each of fiscal years 2017 through 2022*, \$400,000,000.

(2) RESERVATIONS.—Of the amount appropriated under this subsection for a fiscal year (or portion of a fiscal year), the Secretary shall reserve—

- (A) 3 percent of such amount for purposes of making grants to eligible entities that are Indian Tribes (or a consortium of Indian Tribes), Tribal Organizations, or Urban Indian Organizations; and
- (B) 3 percent of such amount for purposes of carrying out subsections (d)(1)(B)(iii), (g), and (h)(3).

[(3) AVAILABILITY.—Funds]

(3) AVAILABILITY.—

(A) *IN GENERAL.—Except as provided in subparagraph (B), funds made available to an eligible entity under this section for a fiscal year (or portion of a fiscal year) shall remain available for expenditure by the eligible entity through the end of the second succeeding fiscal year after award. Any funds that are not expended by the eligible entity during the period in which the funds are available under the preceding sentence may be used for grants to nonprofit organizations under subsection (h)(2)(B).*

(B) *FUNDS FOR PAY FOR OUTCOMES INITIATIVES.—Funds made available to an eligible entity under this section for a fiscal year (or portion of a fiscal year) for a pay for outcomes initiative shall remain available for expenditure by the eligible entity for not more than 10 years after the funds are so made available.*

(k) DEFINITIONS.—In this section:

(1) ELIGIBLE ENTITY.—

(A) *IN GENERAL.—The term “eligible entity” means a State, an Indian Tribe, Tribal Organization, or Urban Indian Organization, Puerto Rico, Guam, the Virgin Islands, the Northern Mariana Islands, and American Samoa.*

(B) *NONPROFIT ORGANIZATIONS.—Only for purposes of awarding grants under subsection (h)(2)(B), such term shall include a nonprofit organization with an established record of providing early childhood home visitation programs or initiatives in a State or several States.*

(2) ELIGIBLE FAMILY.—The term “eligible family” means—

(A) a woman who is pregnant, and the father of the child if the father is available; or

(B) a parent or primary caregiver of a child, including grandparents or other relatives of the child, and foster parents, who are serving as the child’s primary caregiver from birth to kindergarten entry, and including a noncustodial parent who has an ongoing relationship with, and at times provides physical care for, the child.

(3) INDIAN TRIBE; TRIBAL ORGANIZATION.—The terms “Indian Tribe” and “Tribal Organization”, and “Urban Indian Organization” have the meanings given such terms in section 4 of the Indian Health Care Improvement Act.

(4) PAY FOR OUTCOMES INITIATIVE.—The term “pay for outcomes initiative” means a performance-based grant, contract, cooperative agreement, or other agreement awarded by a public entity in which a commitment is made to pay for improved outcomes that result in social benefit and direct cost savings or cost avoidance to the public sector. Such an initiative shall include—

(A) a feasibility study that describes how the proposed intervention is based on evidence of effectiveness;

(B) a rigorous, third-party evaluation that uses experimental or quasi-experimental design or other research methodologies that allow for the strongest possible causal inferences to determine whether the initiative has met its proposed outcomes;

(C) an annual, publicly available report on the progress of the initiative; and

(D) a requirement that payments are made to the recipient of a grant, contract, or cooperative agreement only when agreed upon outcomes are achieved, except that this requirement shall not apply with respect to payments to a third party conducting the evaluation described in subparagraph (B).

(l) MATCHING REQUIREMENT.—

(1) PROGRAM HOME VISITING SHARE.—

(A) IN GENERAL.—An eligible entity to which a grant is made under this section for fiscal year 2020 or any succeeding fiscal year shall not use the grant to cover more than the applicable percentage of the costs of providing services or conducting activities under this section during the fiscal year.

(B) APPLICABLE PERCENTAGE.—In subparagraph (A), the term “applicable percentage” means, with respect to a fiscal year—

(i) in the case of an eligible entity that is a State or nonprofit organization—

(I) 70 percent, in the case of fiscal year 2020;

(II) 60 percent, in the case of fiscal year 2021; or

(III) 50 percent, in the case of fiscal year 2022 or any succeeding fiscal year; or

(ii) in the case of an eligible entity that is an Indian Tribe (or a consortium of Indian Tribes), a Tribal Organization, or an Urban Indian Organization—

(I) 100 percent, in the case of fiscal year 2020 or 2021; or

(II) 70 percent, in the case of fiscal year 2022 or any succeeding fiscal year.

(2) NON-PROGRAM HOME VISITING SHARE.—The share of the costs of providing services or conducting activities under this section not covered by grant funds may include—

(A) State expenditures of Federal funds made available other than under this section expended for activities under this section;

(B) State expenditures of State funds expended for activities under this section as a condition of receiving Federal funds other than under this section; and

(C) contributions made for activities under this section from any other source, paid in cash or in kind, valued at the fair market value of such contribution.

* * * * *

VII. DISSENTING VIEWS

Democrats strongly support moving quickly to reauthorize the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) before it expires on September 30, 2017. We are concerned that by advancing a partisan bill with policy changes not supported by home visiting experts, the Majority has made a timely reauthorization more difficult. A delay in reauthorization could disrupt successful and effective programs in our districts and across the country.

H.R. 2824 does not provide a single penny of new funding, despite abundant evidence that MIECHV makes a real, measurable difference in the lives of children and families served by home visiting. At the current funding levels, only six percent of eligible families are getting this life-changing help, and less than one-third of our counties have MIECHV home visiting. We offered an amendment to double funding over the next five years, which was unfortunately rejected by the Majority.

Our understanding, both from our Committee hearings and from our own experience at home, is that MIECHV is working. However, H.R. 2824 makes policy changes to MIECHV that were not requested by any home visiting program or expert. We offered a number of amendments to remove or revise policies that we, and home visiting experts and advocates, believe would reduce the number of states and communities operating successful home visiting programs or undermine the programs that are currently helping families. We were disappointed that none of these amendments were accepted.

We also are concerned that the Majority plans to offset the budget impact of reauthorizing MIECHV by combining this bill with H.R. 2792, a bill to cut Supplemental Security Income (SSI). We unequivocally reject the idea that the only way to continue home visiting is to cut benefits for vulnerable seniors and Americans with severe disabilities. During our markup, we offered several amendments providing better ways to pay for the bill, which the Chairman ruled were not in order.

We continue to hope the Majority will reconsider their approach, and return to our long policy of bipartisan action to expand and strengthen home visiting for the families and communities that need it.

RICHARD E. NEAL.
JOHN LEWIS.
MIKE THOMPSON.
RON KIND.
JOSEPH CROWLEY.
LINDA T. SÁNCHEZ.
SUZAN DELBENE.
SANDER M. LEVIN.

LLOYD DOGGETT.
EARL BLUMENAUER.
BILL PASCRELL, JR.
DANNY K. DAVIS.
TERRI SEWELL.
JUDY CHU.
BRIAN HIGGINS.

MR. CHAIRMAN: On H.R. 2824, I am in full agreement with the dissenting views of my Democratic colleagues. Had I been present for the votes on the amendments submitted by my Democratic colleagues, I would have supported them.

Had I been present for the vote on reporting H.R. 2824 out of the Committee, I would have voted No.

JOHN B. LARSON,
Member of Congress.

VIII. EXCHANGES OF LETTERS WITH ADDITIONAL COMMITTEES OF REFERRAL.
GREG WALDEN, OREGON
CHAIRMAN

FRANK PALLONE, JR., NEW JERSEY
RANKING MEMBER

ONE HUNDRED FIFTEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115
Majority (202) 225-2927
Minority (202) 225-3641

September 18, 2017

The Honorable Kevin Brady
Chairman
Committee on Ways and Means
1102 Longworth House Office Building
Washington, DC 20515

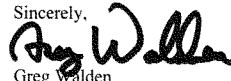
Dear Chairman Brady:

I write concerning H.R. 2824, Increasing Opportunity through Evidence-Based Home Visiting Act, which was additionally referred to the Committee on Energy and Commerce.

I wanted to notify you that the Committee will forgo action on H.R. 2824 so that it may proceed expeditiously to the House floor for consideration. This is done with the understanding that the Committee's jurisdictional interests over this and similar legislation are in no way diminished or altered. In addition, the Committee reserves the right to seek conferees on H.R. 2824 and requests your support when such a request is made.

I would appreciate your response confirming this understanding with respect to H.R. 2824 and ask that a copy of our exchange of letters on this matter be included in the Congressional Record during consideration of the bill on the House floor.

Sincerely,



Greg Walden
Chairman

COMMITTEE ON WAYS AND MEANS

U.S. HOUSE OF REPRESENTATIVES
WASHINGTON, DC 20515

September 18, 2017

The Honorable Greg Walden
Chairman
Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

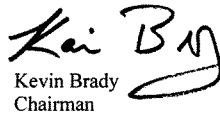
Dear Chairman Walden,

Thank you for your letter concerning H.R. 2824, the "Increasing Opportunity through Evidence-Based Home Visiting Act," on which the Energy and Commerce Committee was granted an additional referral.

I am most appreciative of your decision to waive formal consideration of H.R. 2824 so that it may proceed expeditiously to the House floor. I acknowledge that although you waived formal consideration of the bill, the Energy and Commerce Committee is in no way waiving its jurisdiction over the subject matter contained in those provisions of the bill that fall within your Rule X jurisdiction. I would support your effort to seek appointment of an appropriate number of conferees on any House-Senate conference involving this legislation.

I will include a copy of our letters in our committee report and in the *Congressional Record* during consideration of this legislation on the House floor.

Sincerely,


Kevin Brady
Chairman

cc: The Honorable Paul Ryan, Speaker
The Honorable Richard E. Neal
The Honorable Frank Pallone
Thomas J. Wickham, Jr., Parliamentarian