



## A BRIEF TIMELINE

- 2008** The Nebraska State Legislature allocated \$600,000 for home visiting services. The allocation was managed by the Div. of Children & Family Services and benefitted three independent programs offering nurse home visiting services.
- 2010** The federal Maternal, Infant & Early Childhood Home Visiting (MIECHV) grant is awarded to NE DHHS, Division of Public Health, authorized through the Affordable Care Act. \$1M federal funding is administered by the Health Resources and Services Administration (HRSA).
- 2010** NE DHHS conducts a Needs Assessment to identify “Priority” counties; the most “at risk” of poor health outcomes, which can lead to child maltreatment. 17 counties are identified. MIECHV/HRSA requires that all MIECHV-funded programs must be located/serve in a priority county.
- 2011** The 1<sup>st</sup> N-MIECHV site, or Local Implementing Agency (LIA) begins services in the Panhandle
- 2012** The Nebraska State Legislature raises the allocation to \$875,000. The benefitting programs continue to be managed by the Div. of Children & Family Services.
- 2013 – 2014** 2 more federally-funded LIAs are added in Lincoln & Omaha
- 2014** The Nebraska State Legislature raises the allocation to \$1.1M and the language is changed from “nurse home visiting” to “evidence-based home visiting.” The program management is moved to the Div. of Public Health, and the decision is made to treat any program funded from State General Funds to the same standards as the federal MIECHV program as best practice. An RFP (Request for Proposal) was issued resulting in 4 new LIAs. (Technically 3 because one of them was LLCHD which already received federal funding.)
- 2015 – 2018** Due to uncertainty in the federal landscape, the MIECHV program was removed from the ACA in 2015, and put into the Medicare Access and CHIP (Children’s Health Insurance Program) Reauthorization Act (MACRA) or the “Doc Fix” legislation. In 2018, MIECHV was reauthorized as part of the Bipartisan Budget Act.
- 2014 – 2020** 3 LIAs were federally funded, and 3 were State funded. Funding was stable and consistent. In general, NE DHHS receives approximately \$1.2M per year from MIECHV, and \$1.1M per year from the Legislature. We can only submit data to HRSA for the 3 federally-funded LIAs.
- 2019** NE DHHS, Division of Children & Family Services receives the Family First Prevention Services Act (FFPSA) grant funds. Healthy Families America model of evidence-based home visiting is listed as “well supported” on the federal clearinghouse. Knowing that Public Health already had existing HFA programs, DCFS approached us with an idea for partnership. We also received access to Temporary Assistance for Needy



Families for the next 5 years. This allowed for a huge expansion of services and the addition of another LIA. The plan is for up to four more LIAs over the next 5 years.

- 2020** Updated Needs Assessment identifies 31 “priority counties.” 1<sup>st</sup> braided subawards utilizing MIECHV, SGF, TANF, & FFPSA funds. This allows us to report on the data for all the LIAs rather than only 3. MIECHV allows us to count the entire caseload of any home visitor that is at least 0.25FTE supported by MIECHV funds so this becomes a requirement of the budgets from the LIAs moving forward.
- 2020-2021** Expansion of existing sites to serve 300 more families & in more priority communities, adding one program site that had been operating an HFA program independent to the N-MIECHV network.
- 2021-2025** Community Planning is taking place in central parts of the state in order to create up to 4 or 5 new programs utilizing TANF funds.