

Purpose

What is the Affordable Care Act?

On March 23, 2010, the President signed into law the Patient Protection and Affordable Care Act of 2010 (Affordable Care Act or ACA) (P.L. 111-148) (http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_bills&docid=f:h3590enr.txt.pdf pages 216-225), historic and transformative legislation designed to make quality, affordable health care available to all Americans, reduce costs, improve health care quality, enhance disease prevention, and strengthen the health care workforce.

Why is the ACA Maternal, Infant, and Early Childhood Home Visiting Program funded under the Affordable Care Act?

Through a provision authorizing the creation of the Affordable Care Act (ACA) Maternal, Infant, and Early Childhood Home Visiting Program, the Act responds to the diverse needs of children and families in communities at risk and provides an unprecedented opportunity for collaboration and partnership at the Federal, State, and community levels to improve health and development outcomes for at-risk children through evidence-based home visiting programs. The funds are intended to assure effective coordination and delivery of critical health, development, early learning, child abuse and neglect prevention, and family support services to these children and families through home visiting programs. This new program plays a crucial role in the national effort to build quality, comprehensive statewide early childhood systems for pregnant women, parents and caregivers, and children from birth to 8 years of age – and, ultimately, to improve health and development outcomes.

What is the purpose of the ACA Maternal, Infant, and Early Childhood Home Visiting Program?

The primary purpose of the ACA Maternal, Infant, and Early Childhood Home Visiting Program is (1) to strengthen and improve the programs and activities carried out under Title V of the Social Security Act; (2) to improve 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.

Timeline

What steps are involved in submitting an application for the FY 2010 ACA Maternal, Infant, and Early Childhood Home Visiting Program?

The process for fulfilling the requirements for the FY 2010 ACA Maternal, Infant, and Early Childhood Home Visiting Program includes three steps:

First Step- The first step is submission of an application for funding (which will include a plan for completing the needs assessment and a plan for developing the program in order to meet the criteria identified in the legislation)

Second Step- The second step is submission of the needs assessment itself.

Third Step- The third step is submission of an updated plan for addressing the needs identified in the assessment. If a State has chosen to apply for home visiting funding under this program, the third submission should include an updated description and justification for the proposed program design, including how proposed models meet the evidence-based criteria as part of its plan for addressing

identified needs and how the State will implement the selected program/s effectively and with fidelity to the model/s.

What is the timeline for responding to the funding announcements?

Three funding opportunity announcements will be issued.

Estimated Timeline:

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| Initial FOA published | June 10, 2010 |
| State application for funding opportunity due | July 9, 2010 |
| Full Needs Assessment FOA published | July 2010 |
| FY 2010 funds awarded to States (with restrictions) | Mid-July 2010 |
| FOA published for Updated State Plan (including evidence-based criteria) | Mid-August 2010 |
| State Needs Assessment due | September 1, 2010 |
| Updated State Plan due | Early FY 2011 |

When in “early FY 2011” will the Updated State Plan application be due in response to the 3rd FOA?

The issuance date for the third FOA is yet to be determined. Sufficient time will be given to allow States to prepare thoughtful and complete plans.

When will the 3rd FOA funds be released to States?

A State’s entire FY 2010 allocation, estimated in Appendix B of the FOA, will be provided to the State if the State submits an approvable application in response to the 1st FOA. However, only \$500,000 of the total allocation will be available for use by the State until they have submitted an approvable Updated State Plan in response to the 3rd FOA. Once this application has been approved, the FY 2010 allocation will be released for use by the State.

Program Overview

For what existing home visiting programs must States maintain funding levels in order to meet the Maintenance of Effort requirement on page 7 of the FOA?

For purposes of this FOA (HRSA-10-275), home visiting is defined as an evidence-based program, implemented in response to findings from a needs assessment, that includes home visiting as a primary service delivery strategy (excluding programs with infrequent or supplemental home visiting), and is offered on a voluntary basis to pregnant women or children birth to age 5 targeting the participant outcomes in the legislation which include improved maternal and child health, prevention of child injuries, child abuse, or maltreatment, and reduction of emergency department visits, improvement in

school readiness and achievement, reduction in crime or domestic violence, improvements in family economic self-sufficiency, and improvements in the coordination and referrals for other community resources and supports.

Will the target population have to be across the State or can it be focused in a particular region?

In accordance with the stated purposes of the program and provisions of the law, the intended target population is “at risk communities.” The needs assessment will assist in prioritizing which at risk communities and populations are in need of services.

It is clear that home visitation should be a part of a comprehensive system for early childhood; however, are funds allocated to operate an evidence-based home visitation service delivery program, or for an early childhood systems building initiative for home visitation?

This question will be addressed in the third FOA, to be released later this year.

Which HHS agency will administer the program at the federal level? What is the role of HRSA v. ACF? How will other federal agencies be involved?

HRSA is by law the agency responsible for this program, overall. However, also by law, as well as in spirit and in practice, HRSA and ACF will be collaborating on all aspects of implementation, including development of policy and program guidance, technical assistance and monitoring, and research and evaluation. HRSA is the administering agency for the State grants and ACF is the administering agency for the Tribal grants. HHS has also been convening interagency workgroups since last fall including agencies across the government (including HHS agencies such as CDC, SAMHSA, and the IHS, the Department of Education, and others) in order to ensure that this program is coordinated with other programs serving young children and vulnerable communities. We intend to maintain these interagency relationships as the program develops and will encourage this level of collaboration at the State level as well.

What constitutes planning and implementation activities in FY 2010?

Planning and implementation activities could include conducting a needs assessment, developing a plan for responding to identified needs, and implementing the resulting plan, including providing services, as appropriate.

When will clarification on the requirements for measuring and meeting outcomes and benchmarks be provided?

These requirements will be clarified in the 3rd FOA.

Please provide a definition of “home visiting” and “home visiting program.”

These definitions will be clarified for purposes of programming in the 3rd FOA.

When will clarification about the use of funds be provided? For example, do States have the option to divide (and use) total funds by ages served? Can funds be spent on awareness, marketing or education? Can funds be spent on primary, secondary and tertiary prevention?

These requirements will be clarified in the 3rd FOA.

Eligibility

Who are eligible applicants? Is the District of Columbia eligible for funding?

As indicated in Section III of the FOA, eligibility for funding is limited to a single application from each State, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, the Northern Mariana Islands, and American Samoa. Yes, for the purposes of this grant, the District of Columbia is eligible as a "State." Awards are made directly to these entities, which may then allocate funds according to their respective award processes. Localities are not eligible to apply for funding under this announcement. Nonprofits will be eligible to apply if by FY 2012 a State has not submitted an approvable application for a home visiting program.

If this is the first of three funding announcements, will the other announcements explain how non-profits can apply for funding?

Per Section 511(h)(2)(B), nonprofit organizations are not eligible to apply for funding until the beginning of FY 2012, and only if a State has not applied or been approved for a grant under this program, to conduct an early childhood home visiting program in the State. Nonprofits will not have an opportunity to apply for FY 2010 funds under these FOAs.

Lead Agency

Will Governors receive any direct notification about their authority to designate a State lead (i.e. is a letter from Secretary Sebelius to each of them in the works?)

No, this FOA gives the governor full authority and the responsibility for designating the State lead agency.

With the change in Governors throughout the nation, can States change their agency designation later? For example, if a new Governor reorganizes State agencies can changes be made?

While the FOA requires that the Governor designate an administering agency, Governors will have the opportunity to amend this designation in response to the future FOAs, if necessary.

Will Governors be required to send a letter to HHS designating a lead agency? Isn't a letter needed to ensure that State funding will not be affected as a result of this grant? What constitutes "proof" that an agency has been designated?

No, there is no requirement for a letter to be sent to HHS designating a lead agency. The FOA does not require that the Governor submit a letter designating the administering agency to HHS, but such a letter may be included in the State's application if desired. The lead agency is described in the narrative and this is sufficient.

Who is responsible for submitting the application that is due by July 9th?

The lead State agency, with written concurrence from the entities listed under “Eligible Entities,” is responsible for submitting the application that is due by July 9th, 2010.

Will the final State Plan have to include a single administrative entity for the funds or can the administrative responsibility be distributed among several agencies?

The Governor may designate a group of entities to apply for and administer home visiting program funds on behalf of the State. The responsibilities of the different agencies should be determined at the State level. However, a single agency fiscal agent must be identified to receive and disperse funds under this grant.

What happens if a Governor does not ‘designate’ an agency to administer the funds? Can other entities in the State apply for funding?

No, the Governor must designate an agency to administer the funds.

How should a State respond to Item G on page 14 if it does not intend to seek funding under the home visiting program?

The State should respond that it does not intend to seek funding under the home visiting program FOA.

Partnering Agencies

Why is the Part C Lead Agency not included in the list of entities with which the home visiting lead agency must coordinate?

The role of the IDEA Part C and 619 lead agencies will be addressed in future FOAs.

In the 1st FOA, you ask for copies of all our MOUs with partnering agencies on home visitation. This would amount to more than 25 pages in and of itself. What are you really looking for? Could we just provide a list of MOUs?

The only letters of concurrence required are from the agencies identified under “Eligible Entities.” These are the partnering agencies to which the FOA refers.

Needs Assessment

What is the role of the statewide needs assessment required for the State Advisory Council application?

Coordination with the needs assessment conducted for the Statewide Advisory Council (SAC) is not required, although it is always desirable, for purposes of a complete needs assessment. The needs assessment can be updated in the 3rd FOA incorporating the results of the SAC needs assessment if there isn’t sufficient time at present.

What if the needs assessment is not submitted by the 6-month deadline?

By law, if the needs assessment is not submitted by the 6 month deadline, the State will not be able to receive its FY 2011 allocation under the Title V Block Grant program.

Do States have to meet all the benchmarks or can we chose which benchmarks we will address based on the needs assessment?

Benchmark requirements will be addressed in the 3rd FOA. It is important to note that the law does indicate that 4 of the 6 benchmarks should be met by year 3, and by the end of year 5 the eligible entity is to submit a report demonstrating improvements (if any) in each of the benchmark areas.

What does "communities" mean under the needs assessment?

This issue will be addressed in the 2nd FOA.

The first FOA mentioned templates that will be provided for us to use in our data collection efforts. Will there be a specific survey designed for us to use in conducting the needs assessment of existing home visiting programs?

This will be addressed in the 2nd FOA.

What are your expectations around "coordinating" needs assessment with Community-Based Child Abuse Prevention Program (CBCAP), State Early Childhood Advisory Council, etc?

This will be addressed further in the 2nd FOA. Please see expectations about collaboration between Title V, CBCAP, and Head Start that are clearly described on page 3 of the 1st FOA.

The legislation amends Title V section 511 (b)(1)(C) to require that the needs assessment identify “the State’s capacity for providing substance abuse treatment and counseling services to individuals and families in need of such treatment or services.” Does “counseling services” there specifically mean counseling related to substance abuse, or is that any type of mental health counseling?

“Counseling” refers to counseling services related to substance abuse treatment.

What does the word “types” mean in section 511(b)(1)(B)(i): “the number and types of individuals and families who are receiving services under such programs or initiatives?”

The definition of “types” of individuals and families currently receiving services will be dependent on the way existing services presently collect data. There are no other specific requirements for purposes of this FOA.

Evidence Based Model

Is it expected that there will be one specific evidence-based model, or can multiple models be adopted within a State?

This will be addressed in the 3rd FOA.

Will the proposed rules on the criteria of evidence include a list of program models and outcomes for States to make informed decisions?

Criteria will be proposed in a forthcoming Federal Register Notice soliciting public comment. Final criteria will be addressed in the 3rd FOA.

Do States need to outline their plan for choosing evidence-based models to implement in the FOA due July 9th?

No, these plans will be included in the State's application in response to the 3rd FOA.

Can you provide a list of the research used to justify the claims by the legislation that the Home Visiting Program will improve child outcomes? What research was used to support the program's priorities and objectives? As a side question, when the public comment concludes and the criteria for assessing evidence of effectiveness is formalized, can a list of the research used to make it "evidence-based" be made publicly available?

The program's objectives were established by legislation as part of the Patient Protection and Affordable Care Act of 2010. There is research available that suggests that home visiting is successful. These issues will be addressed in a forthcoming Federal Register Notice seeking public review on proposed criteria for establishing an evidence base for home visiting programs..

Will the proposed guidance/rules regarding the criteria for evidence of effectiveness include a menu of programs in each category with the outcomes of each program?

These questions will be addressed in a forthcoming Federal Register Notice and in the 3rd FOA.

Will there be a list of evidence-based programs accompanying phase three of the guidance, similar to the list of effective programs for the teen pregnancy prevention grants?

These questions will be addressed in a forthcoming Federal Register Notice and in the 3rd FOA.

Budget

When may we begin expending all but the \$500,000? When may we begin drawing down the \$500,000?

The \$500,000 may begin to be drawn down upon receipt of the State's Notice of Grant Award (NGA). However, these funds must be drawn down quarterly, i.e. \$125,000 immediately and the same amount for each of 3-month period after that.

How do we list the forecasted cash needs on the SF424? The funds are supposed to be spent within the 27 months but do we request all the funds in the first quarter or spread the funds across four quarters?

The budget should be written for 12 months. Funds may be drawn down quarterly and so forecasted cash needs should be spread across four quarters.

Is the budget justification supposed to reflect just what's needed for the needs assessment or for all Year 1 activity?

A 12-month budget should be provided for all Year 1 activities.

Should the budget include allocations for FY2011 and FY2012 or just the original funding designated in FY2010?

This funding opportunity announcement requires a budget only for the funding designated for expenditure in FY 2010.

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How much detail must States provide for their budget justification to be included in the first FOA?

It is anticipated that a specific budget justification tailored to the Updated State Plan will be required as part of the response to the 3rd FOA. For purposes of this first application, the State should prepare a budget justification on the basis of a best estimate, given what information they have at their disposal at the time the application is submitted.

Is the budget justification part of the 25-page count?

Yes, the budget justification is part of the 25 page count. See page 8 of the FOA.

What is meant by expenditure? Is this the same as appropriation?

The appropriation is the funding made available to HHS by Congress. Your State's award is the amount that will be available for your State to spend. Expenditures are those amounts that are actually spend out of the State's awarded funds.

There is no indication in the guidance when the project period begins and ends. Is the budget period different from the project period and if so what are these periods?

The project period and budget period are the same for purposes of this application. Please see page 11 of the guidance. The budget and project period is from July 15, 2010 to September 30, 2012.

How should the EBHV grant allocation be presented in the budget? Would it be advisable to place the total EBHV grantee budget amount in the "other" category and provide a detailed budget justification for each cost element of the EBHV program?

You should place the entire EBHV grant allocation as one line under the "Other" category. No detailed budget or budget justification is required for the EBHV line item.

ACF' Supporting Evidence Based Home Visiting Grants (EBHV)

When will FY 2010 funds for EBHV become available?

The EBHV portion of the allocation is not part of the \$500,000 in unrestricted funds; the EBHV portion of the State's allocation will be unrestricted and available for expenditure only when a State has submitted an approved needs assessment and Updated State Plan in response to the 3rd FOA.

Will FY 2010 funding be restored to the original \$500,000 per year amount or to the later increased amount of approximately \$673,000 per year?

The EBHV portion of the State's allocation is meant to restore funding to existing EBHV grantees through the end of the project period, at the current level level of funding for Year 2 of these grants.

Will EBHV grantees receive the FY 2010 portion of the allocation on top of the \$150,000 in FY 2010 continuation funding they are already going to receive?

To support the continuation of the ACF EBHV grants, HRSA has added \$673,000 for each ACF EBHV grant to the State's estimated FY2010 funding listed in Appendix B of the FOA. Of the total amount listed per State, \$673,000 (i.e., the amount equal to their current Year 2 grant) must be used to continue funding for each project that currently receives an ACF EBHV grant. These funds will be included in the State's FY2010 grant award for the Maternal, Infant and Early Childhood Home Visiting Program.

The Children's Bureau at ACF will continue to award \$150,000 to each of the 17 ACF EBHV for the continuation applications that were submitted this year. The funds will be awarded in September 2010 for the project period September 30, 2010 to September 29, 2011.

Can you please tell us if the EBHV funds go into the base budget for future years, or is it only the original grant allocation for 5 years? What happens after the fifth year?

The EBHV grants are existing grants, currently in their 2nd year of a 5-year project period ending in FY 2013, that are administered by the Children's Bureau in ACF. These grants, of which there are 17 located in 15 States, were de-funded in the FY 2010 Congressional appropriations process, with the assumption that the ACA HV funding would allow grant activities to continue. The EBHV portion of the State's allocation is meant to restore funding to these grantees through the end of the project period, and the requirement that States use the funds to support the EBHV does not constitute a reduction in the State's total allocation. When the EBHV grant period ends, the State allocation will decrease by the respective amount.

What happens to EBHV grantees if their State does not apply for funding? Will they still get their FY 2010 funding?

No, the EBHV funding is contingent upon the State submitting an approvable plan in their application for the home visiting program. If a State does not apply for or receive HV program funds, the EBHV grantee will not receive an allocation under this program.

Is this a pass-through of existing funding or additional funding on top of the EBHV grantee's current funding? How can EBHV grantees ensure that they receive their funding?

This is a pass-through to existing EBHV grants. States with these programs will be contacted to determine the most efficient way to transfer funding to the grantees.

Is there an expectation that State will maintain or increase allocation to EBHV grantees?

No, the State will not be involved in maintaining or increasing allocations to EBHV grantees but only in transferring the \$673,000 to the existing grantees.

Does State have flexibility NOT to fund the EBHV grantees if a determination is made as a result of the needs assessment that the grant is not of benefit to State, or if the EBHV program does not meet evidence criteria?

No, the EBHV program is an ongoing program administered by the Children's Bureau within the Administration for Children and Families and there is no connection between the EBHV programs and the evidence criteria that will be established in the 3rd FOA for the Home Visiting Program. The EBHV programs are entirely separate from the State home visiting program, and the State does not have the flexibility *not* to fund these programs. However, because of similar goals between the EBHV grants and this new home visiting program, States should encourage coordination and collaboration across these two complementary programs.

Will the funds for the EBHV cross-site evaluation also continue for the next 3 years? How will this evaluation relate to the required evaluation of the State home visiting program?

Yes, the EBHV cross-site evaluation will continue and will be unrelated to the evaluation for the State home visiting program.

Will the EBHV grantee automatically be designated as the State agency administering the home visiting program?

No, the governor has the discretion to designate the State agency lead. There is no connection between the administration of the EBHV programs and the Home Visiting programs to be established under this new law.

Does acceptance of the funds (at whichever level) require adherence to the previous EBHV grant requirements?

Yes

When the EBHV grant period ends, will the State allocation be reduced by the amount of the grant?

Yes

Does the estimated allocation per State listed in Appendix B include the allotment specified for the ACF EBHV grants? Or are these amounts to be added to the estimated amount listed in Appendix B?

Yes, the EBHV allotments are included in the States' allocations.

Will ACF - or the State entity - monitor the remainder of the EBHV grant cycle?

The Administration for Children and Families will administer the EBHV program.

How will State lead agencies be notified regarding the exact budget amount for EBHV programs in the State?

The exact amount is \$673,000.

Other

Is there a page limit for this application? Is this single or double-spaced?

The total size of all uploaded files may not exceed the equivalent of 25 pages when printed. The total size may not exceed 10 MB. The application can be single or double-spaced as long as it does not exceed 10 MB. This 25-page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support. Standard forms are NOT included in the page limit. Applications that exceed the specified limits (approximately 10 MB, or that exceed 25 pages when printed) will be deemed non-compliant. All non-compliant applications and will not be considered for funding.

Webinar

**When will the recording/transcript of the webinar be posted, and where?
Are the Power Point slides available?**

The archived webcast of the **Maternal, Infant, and Early Childhood Home Visiting Program** which was broadcast on Thursday, June 17, 2010 is available at <http://webcast.hrsa.gov/postevents/archivedWebcastDetailNewInterface.asp?aeid=525>. In addition, a PowerPoint presentation, transcript, and audio only version are all available at this site also.

Eligible use of Funds

Will funding be available only directly to States, which will then set up their own criteria for others to apply for funding?

These questions will be addressed in a forthcoming Federal Register Notice and in the 3rd FOA.

Will the funding in years 2011-2014 above the \$100 million formula allocation this year be competitively distributed? What are the criteria for the competitive distribution?

Decisions regarding funding in future years are under discussion and have not yet been finalized.

Are the funding formula and a breakdown of what each State could potentially receive available?

The estimated allocation to each State is provided in Appendix B of the FOA. Final allocation amounts will be provided in the 3rd FOA.

Is it correct that we should anticipate a second year's funding for the same State allotment for FY 2012?

States should not make any assumptions regarding future years' funding. More information will be provided in future years' funding opportunity announcements.

What is the anticipated FY that funding will become available to local programs?

All grants made under this program are made to States. Whether or not to make some or all of these funds available to local programs will be at the discretion of the State.

Application

The staffing plan looks as though it can be included in attachment 1, along with the job descriptions. Is this correct, or does it belong somewhere else?

Yes, the staffing plan and job descriptions should both be included in Attachment 1 (pg 13 of guidance – vi. Staffing Plan and Personnel Requirements)

The anticipated need for technical assistance document looks like it would fall under attachment 5, i.e. other relevant documents. Is this correct?

The Need for Technical Assistance document should appear in section x. Program Narrative, F. A description of anticipated technical assistance needs, as described in “Anticipated Need for Technical Assistance,” and described below (pg 14 of guidance)
The actual description of Anticipated Need for Technical Assistance appears on page 16 of guidance

Tribal

How can Tribal organizations apply for funding?

A separate funding opportunity announcement for Tribes and Tribal Areas was released on June 24, 2010. The funding opportunity announcement and application information is now posted on www.grants.gov and can be found by searching for CFDA # 93.508. The announcement is also available on the Administration for Children and Families Grants Opportunities Page at <http://www.acf.hhs.gov/grants/open/foa/view/HHS-2010-ACF-OFA-TH-0134>.

If States want to work with Tribes or tribal entities to include service on/off reservations as part of their initiatives, will the funding allocation be adjusted? Is this type of collaboration permissible?

Are Tribes eligible for inclusion in the State Plan for the home visiting program, or are they only eligible for funding through the separate FOA for Tribes?

Should States include Tribal Entities in the statewide needs assessment?

How should States work with Tribes within their boundaries in developing their State Plan?

Members of a Tribe are part of a State's population and should be included in the State's needs assessment. If the State identifies Tribes and/or Tribal entities as communities at risk, they can be included in the State Plan and Updated State Plan.