

Family Home Visiting Services

Reduce Risks & Improve Outcomes

Talking Points

Legislative Request

The Minnesota Coalition for Targeted Home Visiting continues to recognize the importance of family home visiting as a successful strategy to reduce risks and improve outcomes for families and their children. Additional resources for quality family home visiting services can help provide stabilizing supports to families in need and give them a strong start. The Coalition supports a variety of home visiting programs and aims to increase access to services that best meet the needs of each family in need.

The Coalition and its partners propose increase funding for targeted home visiting services to first-time moms living in poverty as well as families living in poverty experiencing high needs with children ages prenatal through age five. Priority high-needs populations include, but are not limited to, pregnant and parenting teens; families experiencing violence; families experiencing isolation; families with mental health needs; families with children having special health care needs; and families experiencing homelessness.

What is the need? (Based on 185% of poverty)

- There are over 81,000 children ages 0-3 living in poverty in Minnesota
- Annually there are an estimated 10,000 births in to Mom's on Medicaid in Minnesota

How many families will be served?

- The Legislature allocated \$12 million for FY18-FY19 and \$33 million for FY20-FY21, it is expected and additional 1,000 families will receive services by FY2022.
- However, there is an estimated gap in service of 28,000 eligible families
- The Coalition proposes to serve an additional 3,856 over the next couple biennium.

What will it cost?

- The average costs of home visiting services for a family is \$6,500/year
- The range of costs for home visiting services is \$3,500-13,000/year based on frequency of home visits and program requirements
- The cost to serve an additional 3,865 families is \$23 million in 2020, \$41.6 million in 2021 and \$56.5 million in the base beginning 2022.

Some Details

- Eligible entities include community health boards, tribal departments, and non-profit organizations that have been operating quality home visiting programs for more than two years.
- Quality programs include evidence-based programs, evidence-informed programs, and emerging practices that have been informed by evidence.