

Ms. Cynthia Phillips
Director, Division of Home Visiting and Early Childhood Systems
Health Resources and Services Administration
Rockville, MD 20857

March 17, 2023

Dear Ms. Phillips,

Thank you again for the opportunity for the Association of State and Tribal Home Visiting Initiatives (ASTHVI) to work in collaboration with you and with HRSA to support the effective implementation and continuous quality improvement of home visiting programs. We are writing on behalf of our members to share our excitement about the recent reauthorization of the Maternal, Infant, and Early Childhood Home Visiting Act, as well as the many questions and concerns being raised by ASTHVI members about planning for the new match requirement. No state wants to leave any federal funds on the table because of misunderstandings about what "counts" towards the match or inadequate time for the lengthy budget processes that may be required to secure qualifying resources.

State administrators are already hearing from governors, secretaries, state legislators and advocates about what additional funds, if any, may need to be appropriated to fully draw down the federal match available to their state under the new formula. Plans for meeting the match cannot realistically move forward without additional, more detailed information about what HRSA will ultimately approve to count as matching funds.

Last October, ASTHVI attempted to address some of these questions by putting together a memo outlining provisions in the Jackie Walorski Maternal and Child Home Visiting Reauthorization Act that address MOE and match. Prior to distribution, we shared that document with Congressional staff so that we could be absolutely certain that the information we provided was accurate and consistent with Congressional intent. Some questions we could not answer; in addition, we are fully aware that HRSA and its Office of General Counsel will have the definitive word on interpreting the statute. Some states, particularly those with fiscally conservative elected leadership and those with biennial budgets, will require the maximum possible lead time, and the maximum possible clarity, to secure the matching funds they need to draw down additional resources in FY 2025. They are anxious and eager to receive guidance from you so they can work with state leaders to map out their options.

Among the specific questions ASTHVI members are asking:

- As MIECHV funds are allocated at the end of the fiscal year of many states, will states have enough time to apply for the match, or to know how much they would be eligible for?
- Will states receive the federal matching dollars before or after documenting they have expended the state match amount?

- In many cases, state fiscal years do not align with the federal fiscal year. What is the
 time period for which non-federal funds need to be appropriated in order to "count"
 as match for the FY 2025 grants? For what exact time period do states need to
 expend the state match? Will states have two years to expend the federal match
 amount?
- Does non-federal, non-state funding, such as investments by localities and philanthropy, count towards meeting the match? Do Master Tobacco Settlement funds count towards the match?
- What home visiting models qualify as non-federal match? Only HomVEE-approved models, or additional models? Do state funds spent on promising practices count towards the match?
- What documentation will be required to demonstrate that the non-federal funds are in fact being invested in home visiting programs that qualify as match?
- Do states need to monitor implementation with fidelity to the model of programs funded by the match, or request an attestation?
- Congress has assured ASTHVI members that programs funded by matching funds will
 not be subject to the same data collection and reporting requirements as MIECHVfunded programs. What data will states be required to collect and report for
 programs funded by non-federal matching funds?

We understand that there is a significant amount of work to be done to develop policy and implement the requirements of the statute, and we appreciate your efforts to undertake a thoughtful process that creates as few unintended consequences as possible. We look forward to being collaborative and helpful partners in that process, and hope that guidance regarding the match can be developed in time to give states the information they need to draw down the full amount of MIECHV resources available to them.

Thank you for the opportunity to share these concerns. We look forward to discussing this, and much more, with you in person at our joint meeting in May.

Sincerely,

ASTHVI Board of Directors

Kasondra Branwen, WA Juan Delara, OK Maggie Enlow, AL Kehaulani Fernandez, Lake County Tribal Health Pamela Finch, Southcentral Foundation Sarah Sanders, TN PJ West, IA