DATE: January 20, 2011

FROM: Reports Clearance Officer, HRSA

TO: Office of Information and Regulatory Affairs, OMB

Through: Office of Strategic Operations and Regulatory Affairs, CMS

SUBJECT: HRSA Request for Supplemental Information Request for the Submission of the Updated State Plan for a Home Visiting Program (Section 2951 of the Affordable Care Act) (OMB # 0915-XXX): NEW Information Collection Request (ICR)

The Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB) is requesting Office of Management and Budget (OMB) review and approval of the Supplemental Information Request for the Submission of the Updated State Plan for a Home Visiting Program, under the Patient Protection and Affordable Care Act of 2010 (P.L. 111-148). HRSA is requesting emergency processing procedures for this supplemental information request because the information is needed before the expiration of the normal time limits under regulations at 5 CFR Part 1320 to ensure that states complete the required development of an Updated State Plan for a Home Visiting Program and the Department meet its statutory deadlines.

Through a provision authorizing the creation of the Affordable Care Act 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. Section 2951 of the Patient Protection and Affordable Care Act of 2010 (Affordable Care Act), which added Section 511 to Title V of the Social Security Act (SSA), requires States to provide a description of how they intend to address needs identified as a result of their needs assessment.

The supplemental information request must be made available in January 2011, to allow States the requisite time needed to plan and implement programs likely to achieve the legislatively mandated benchmarks for demonstrating improvements among eligible families participating in the States’ home visiting programs. This updated state plan submission is required in order to receive the remainder of the grant funds available under the Home Visiting Program. Emergency processing is necessary because of the critical timing of this post-award submission request for grantees and is unavoidable for the following reasons:

* The legislation required that within six months of passage, every eligible state and jurisdiction was required to complete a statewide needs assessment. At the same time, because the Affordable Care Act was passed six months into FY 2010, HRSA had to obligate all FY2010 grant funds within the same 6-month period. Because this time frame made it impossible for states to propose their state implementation plans within the same time frame, HRSA has divided the grant process into three parts: (1) Issuance of the initial Funding Opportunity Announcement (FOA) awarding FY 2010 funds based on states’ applications stating how they would plan the home visiting program; (2) a Supplemental Information Request (SIR) to the grantees providing guidance on how the statewide needs assessments were to be conducted and reported; (3) a second SIR to the state grantees providing specific guidance on the home visiting models considered “evidence-based,” data collection for meeting benchmark requirements, and for targeting appropriate interventions to the communities at risk that the states identified in the needs assessment (step 2, above). This second SIR for the Submission of the Updated State Plan for a Home Visiting Program is still in the process of being cleared by the Department and OMB.
* If we were to obtain normal clearance through even an abbreviated public comment period, this would result in a significant delay in publishing the SIR for the Submission of the Updated State Plan for a Home Visiting Program. This would result in public harm, harm to the program as legislated, and significant difficulty for states, in that they would not have sufficient time to develop and implement their home visiting plans within the legislatively determined time period for expending their FY 2010 funds.
* The development of the second SIR has depended on the completion of two prior steps. The first is the analysis of the statewide needs assessments submitted in late September 2010. The second is analysis of the extensive comments received in response to a Federal Register Notice (FRN) seeking public review of proposed criteria for establishing the evidence base for home visiting models eligible to be implemented under this program. In August 2010, 140 responses, each addressing multiple issues, had been received and had to be analyzed. It was on this basis that the criteria were developed that will be published in the second SIR. Because the development of this second SIR for the Submission of the Updated State Plan for a Home Visiting Program was dependent on completion of these prior steps, HRSA only recently has been able to send a draft SIR forward for clearance through the Department and now through OMB, and the need for emergency processing of the information collection request (ICR) has been unavoidable.

The ICR including the Supporting Statement will be submitted through standard processes (via ICRAS) as soon as possible along with publication of a 60-day Federal Register Notice requesting public comment. Attached is the draft guidance for the Updated State Plan Supplemental Information Request.

Thank you.

Nidhi Singh

Nidhi Singh, MPH

Public Health Analyst

Office of Planning, Analysis and Evaluation

Health Resources and Services Administration

5600 Fishers Lane, 10-49

Rockville, MD 20857

(301) 443-0371 | [nsingh@hrsa.gov](mailto:nsingh@hrsa.gov)