
Written Testimony for the House Ways and Means Committee

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Chairman LaHood, Ranking Member Davis, and all members of the subcommittee, thank you for the opportunity to share testimony today regarding the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program and its impact on families across Iowa. My name is PJ West, and I serve as the MIECHV Program Director with the Iowa Department of Health and Human Services. I oversee Iowa's MIECHV portfolio, along with key workforce and quality initiatives that support home visiting services statewide.

I am honored to speak with you about why MIECHV remains one of the most effective, evidence-based early childhood programs we have — and why its reauthorization next year is critical for the wellbeing of Iowa's families.

My journey into this work began more than a decade ago when I entered the family support field. I worked directly with families as a home visitor for nearly 14 years, serving pregnant women, infants, toddlers, and caregivers navigating complex life situations. This experience fundamentally shaped my understanding of what families need — and what can transform outcomes. My mother was 16 years old when she had me, just a child herself really. She was lucky enough to have my paternal grandmother, a kind, caring woman, who was also a labor and delivery nurse. She knew how important it was to support mothers and their babies and in turn helped teach my mother those important skills. Parents oftentimes parent the way they were parented unless they learn a different way. I am truly thankful each and every day that my mom learned a new way. To me, that is the ultimate gift of home visiting. Being able to support parents and their families with what they need, when they need it. Walking alongside families on their journey, helping them understand the importance of connection, safety, and nurturing during the moments that matter most.

I began working in the department and within the MIECHV program 15 years ago. I have seen the change in how Iowa provides supports to families and there is no question that MIECHV has been a leader in that work. There is more evidence-based family support programming in Iowa because of this federal investment in families. MIECHV's innovation and quality standards have been key in making those changes happen. I have served in many capacities in my time at HHS, but one that stands out and has influenced a deeper understanding of the work, was serving as the Parents as Teachers (PAT) State Lead, supporting statewide guidance, model fidelity, training, and quality improvement efforts. These roles gave me a unique perspective: I have been both the person sitting on a family's living room floor supporting a newborn's development, and the person shaping systems, policy, and state level supports for Iowa's home visiting workforce.

Today, as a state administrator, I carry both perspectives with me — the policy lens and the lived professional experience of being a home visitor.

Home Visiting in Iowa Before and After the Creation of MIECHV

Prior to the creation of MIECHV in 2010, Iowa’s home visiting landscape was supported by a strong early childhood system, but funding was stagnant and evidence-based model programming was not readily available. The programs were rarely evidence-based and funding was inconsistent. There was a lack of a statewide data system and there was essentially no capacity for ongoing evaluation or workforce development.

The introduction of MIECHV brought major improvements:

- Stable federal funding created sustainable, long-term programming.
- Evidence-based models ensured fidelity and measurable outcomes.
- Statewide data and reporting systems allowed Iowa to evaluate impact and guide resources effectively.
- Workforce supports improved training, retention, and professionalization.
- Quality standards unified practices across Iowa’s formerly disconnected programs.

In short, MIECHV transformed home visiting in Iowa from a patchwork of small locally developed model programs into a cohesive, accountable, evidence-based statewide system.

Current Reach of MIECHV in Iowa

MIECHV-funded programs currently operate in targeted Iowa communities based on a statewide needs assessment. While MIECHV does not operate in all 99 counties, it funds strategically placed services in the counties with the highest indicators of:

- Poverty
- Preterm birth
- Low birth weight
- Child maltreatment
- Domestic violence
- Substance use
- Limited access to prenatal or pediatric care

In FY2025, Iowa’s MIECHV program served:

- 852 households
- 910 children
- Provided more than 12,000 home visits

MIECHV reaches families at the highest risk of adverse outcomes. Over 90% of enrolled households are low income, nearly 60% are below 100% of Federal Poverty Level (FPL), and almost one quarter of caregivers lack a high school diploma.

Evidence-Based Models Used in Iowa

Iowa implements three federally approved models:

- Healthy Families America (HFA)
- Nurse-Family Partnership (NFP)
- Parents as Teachers (PAT)

This model diversity allows Iowa to serve a broader range of family needs.

Growth Since the 2022 Walorski Reauthorization

The Jackie Walorski Maternal and Child Home Visiting Reauthorization Act of 2022 expanded Iowa's capacity in several key ways:

- Increased federal base funding allowed Iowa to stabilize staffing and reduce caseload fluctuations.
- The new federal matching program enabled Iowa to begin leveraging state funds to draw down additional federal dollars, increasing service capacity.
- Clarified policies around virtual visits helped Iowa adjust service delivery models without sacrificing quality or compliance.

As a result, Iowa has begun serving more families and is well positioned to continue increasing reach.

Impact of the 2022 Jackie Walorski Reauthorization Act

The 2022 reauthorization represented a significant expansion of MIECHV. In Iowa, this expansion has increased the number of families served by nearly 100 and broadened the program's reach from 18 counties to 24. Iowa's most recent population estimates show approximately 235,910 children from birth to age five, with more than 25,000 living in poverty. While Iowa MIECHV is able to support some of these children and their families, the need remains great. For this reason, Iowa MIECHV continues to invest in both the state and federal match grant, with plans to further expand its reach.

Increased Base Funding

Annual base funding increased from \$400 million to \$500 million nationally, providing Iowa a larger allocation to stabilize programming and invest in workforce development.

Federal Match and State Match Requirements

For the first time, states can receive additional federal funds through a 3:1 federal match on non-federal dollars.

Iowa has:

- Met the required Maintenance of Effort
- Successfully drawn down matching funds in their entirety
- Plans to increase the state match next fiscal year, maximizing the opportunity to expand evidence-based home visiting reach
- Increased the per family slot rate for local implementing agencies

This is one of the most significant opportunities Iowa has ever had to grow evidence-based home visiting capacity.

Reduction in Administrative Burden

Federal guidance required at least a 15% reduction in administrative demands. Iowa saw:

- Streamlined reporting
- Fewer duplicative data submissions
- A clearer set of federal performance expectations

This reduction significantly helped frontline staff. Home visitors now spend more time with families and less time on documentation, improving retention and job satisfaction. Reduction in administrative burden at the local implementing agency level remains a priority of the Iowa MIECHV program.

Guidance on Virtual Visits

The reauthorization clarified:

- Virtual visits are an enhancement, not a replacement
- Each family must receive at least one in-person visit per year

Iowa MIECHV strengthened this expectation by requiring that most home visits take place in the family's home. This clarity has helped maintain high-quality services while still allowing flexibility for rural families and those facing transportation or health challenges. Iowa MIECHV closely monitors both in-person and virtual visit data to ensure the majority of visits continue to occur in the family's home.

Iowa Workforce Investments Enabled by MIECHV

Iowa, along with the state of Virginia, leveraged MIECHV funding to build and utilize the Institute for the Advancement of Family Support Professionals, one of the most significant workforce investments our state has made.

This Institute:

- Provides free, standardized professional development
- Offers a nationally recognized competency framework and certification exam
- Supports supervisors in reflective supervision
- Creates career pathways for home visitors
- Ensures consistent, high-quality workforce training across providers and counties

The national Family Support Certification exam is a requirement of all Iowa state or federally funded home visiting program staff. This, along with the list of other workforce investments has meant better retention, clearer expectations, and a more stable, skilled workforce.

Other Federal Funding Streams Supporting Home Visiting

MIECHV coordinates with other federal streams including:

- **Title IV-E Prevention Funds**
- **CBCAP (Community-Based Child Abuse Prevention)**
- **Early Head Start**

While other funding sources play important roles in supporting children and families, none provide the dedicated, evidence-driven infrastructure for early childhood home visiting that MIECHV delivers. MIECHV intentionally coordinates with complementary federal streams—including Title IV-E Prevention Funds, CBCAP, and Early Head Start—but these sources are not designed to replace it. Instead, they fill specific gaps.

MIECHV remains one of only two federal programs that offers comprehensive early childhood home visiting grounded in rigorous evidence requirements and robust wraparound supports for families. Other funding streams may extend access to home visiting for some communities, but they do not sustain the statewide systems, workforce, and quality infrastructure that MIECHV uniquely supports.

How MIECHV Helps Families Achieve Self Sufficiency

MIECHV's goals include:

- Improved maternal and newborn health
- Reduction in child maltreatment
- Family economic stability
- Improved school readiness
- Coordination of community supports

Home visiting is targeted to families experiencing the highest number of risk factors, including poverty, mental health challenges, housing instability, substance use, and limited social support.

Whole-Family Support

MIECHV does not serve only the mother. Home visitors support:

- Fathers and co-parents
- Extended family members involved in caregiving
- Siblings
- Household economic and safety needs

Below are a sample of Iowa MIECHV outcomes:

- 95% of caregivers are screened for depression and referred to appropriate services
- 85% of families with infants are following safe sleep practices by placing their child to sleep on their back, without bedsharing
- 89% of families are screened using a parent child interaction observation tool.
- 100% of families are focusing on the importance of parent child interaction.
- 88% of families focus on early language and literacy activities by reading stories and singing songs with their children every day
- 92% of children were screened for developmental delays

These are not small wins. These are life-changing outcomes. Iowa MIECHV continues to provide quality technical assistance and supports to assist local implementing agencies to focus on Iowa MIECHV outcomes and improve upon them annually.

Iowa-Led Initiatives and Innovations

The PAEYS (Performance and Employee Yield Support) program is Iowa's innovative workforce and quality improvement initiative. It:

- Incentivizes accurate, timely data entry
- Rewards strong performance and reflective practice
- Supports workforce retention
- Strengthens accountability without penalizing staff

This project has improved data quality and lowered home visitor turnover in key sites.

Home Visitor Well Being Supports

With the support of MIECHV funds Iowa has been able to invest in:

- Reflective supervision
- Mental Health Consultation
- Peer to peer support groups
- Crisis support tools
- Training on burnout reduction

Home visiting is relational, emotional work. Iowa prioritizes staff wellbeing because a supported workforce provides better support to families.

The TEACH Family Support Initiative provides educational scholarships to home visitation staff, including financial supports for coursework. This leads to credentialing pathways and career advancement opportunities. TEACH has helped professionalize the field and retain skilled home visitors.

Additional Iowa innovations supported with MIECHV funding include a robust Continuous Quality Improvement (CQI) system resulting in enhanced quality assurance systems. Implementation fidelity supports are made easy by having both the Parents as Teachers and Healthy Families America state leaders housed within the department and a part of the Iowa MIECHV team. Stronger than ever statewide collaboration across the early childhood sectors have made advancing all of Iowa's home visitation much more efficient, bringing quality programming to the forefront as an expectation. Intensive and frequent technical assistance is standard for Iowa MIECHV.

From my perspective — as a former home visitor, home visitation program supervisor, a state administrator, and someone who has seen firsthand the impact on families — MIECHV is irreplaceable. Congress should reauthorize MIECHV because:

- It is evidence-based and delivers measurable outcomes
- It improves maternal and child health
- It prevents child maltreatment
- It strengthens families' economic stability
- It supports rural and high-poverty communities
- It funds a trained, professional workforce
- It brings unmatched federal accountability and transparency
- The need in Iowa continues to grow — not shrink

The 2022 Walorski Reauthorization made historic improvements. Continuing that trajectory ensures we do not lose momentum in supporting some of the most vulnerable families in our state. MIECHV is a smart investment. It works. And Iowa families depend on it.

Thank you for the opportunity to share Iowa's experience and outcomes. I look forward to answering your questions and working with you to ensure this critical program continues to provide stability, health, and opportunity for families across Iowa.