

PUBLIC CHAPTER NO. 530**HOUSE BILL NO. 1892****By Representatives John DeBerry, Lois DeBerry, Armstrong, Hardaway, Favors****Substituted for: Senate Bill No. 2040****By Senators Black, Harper, Marrero, Kurita**

AN ACT to amend Tennessee Code Annotated, Title 4; Title 63; Title 68 and Title 71, relative to nurse home visiting programs.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 68, Chapter 1, is amended by adding the following language as a new, appropriately designated part:

§ 68-1-2401. This part shall be known and may be cited as the "Tennessee Nurse Home Visitor Program Act".

§ 68-1-2402. The general assembly hereby finds that, in order to adequately care for their newborns and young children, new mothers may often benefit from receiving professional assistance and information. Without such assistance and information, a young mother may develop habits or practices that are detrimental to her health and well-being and the health and well-being of her child. The general assembly further finds that inadequate prenatal care and inadequate care in infancy and early childhood often inhibit a child's ability to learn and develop throughout his or her childhood and may have lasting, adverse affects on the child's ability to function as an adult. The general assembly recognizes that implementation of a nurse home visitor program that provides educational, health, and other resources for new young mothers during pregnancy and the first years of their infants' lives has been proven to significantly reduce the amount of drug, including nicotine, and alcohol use and abuse by mothers, the occurrence of criminal activity committed by mothers and their children under fifteen (15) years of age, and the number of reported incidents of child abuse and neglect. Such a program has also been proven to reduce the number of subsequent births, increase the length of time between subsequent births, and reduce the mother's need for other forms of public assistance. It is the intent of the general assembly that such a program be established for the state of Tennessee, beginning with a limited number of participants and expanding by the year 2017 to be available to all low-income, first-time mothers in the state who consent to receiving services.

§ 68-1-2403. As used in this part, unless the context otherwise requires:

(1) "Department" means the department of health.

(2) "Entity" means any nonprofit, not-for-profit, or for-profit corporation, religious or charitable organization, institution of

higher education, visiting nurse association, existing visiting nurse program, local health department, county department of social services, political subdivision of the state, or other governmental agency or any combination thereof.

(3) "Health care and services facility" means a health care entity or facility identified pursuant to § 68-1-2405 to assist the department in administering the program.

(4) "Low-income" means an annual income that does not exceed two hundred percent (200%) of the federal poverty level.

(5) "Nurse" means a person licensed as a professional nurse pursuant to Title 63, Chapter 7.

(6) "Program" means the nurse home visitor program established in this part.

§ 68-1-2404.

(a) There is hereby established the nurse home visitor program to provide regular, in-home, visiting nurse services to low-income, first-time mothers, with their consent, during their pregnancies and through their children's second birthday. The program shall provide trained visiting nurses to help educate mothers on the importance of nutrition and avoiding alcohol and drugs, including nicotine, and to assist and educate mothers in providing general care for their children and in improving health outcomes for their children. In addition, visiting nurses may help mothers in locating assistance with educational achievement and employment. Any assistance provided through the program shall be provided only with the consent of the low-income, first-time mother, and she may refuse further services at any time. The program should be significantly modeled on the national Nurse Family Partnership program.

(b) The program shall be administered in communities throughout the state by entities selected on a competitive basis by the department. Any entity that seeks to administer the program shall submit an application to the department as provided in § 68-1-2406. The entities selected pursuant to § 68-1-2407 shall be expected to provide services to a minimum of one hundred (100) low-income, first-time mothers in the community in which the entity administers the program; except that the department may grant a waiver of this requirement if the population base of the community does not have the capacity to enroll one hundred (100) eligible families. The department shall consult with the health care and services facility prior to granting the waiver to ensure that the entity can implement the program within the smaller community and maintain compliance with the program requirements. A mother shall be eligible to receive services through the program if she is pregnant with her first child, and her gross annual income does not exceed two hundred percent (200%) of the federal poverty level.

(c) The department shall promulgate, pursuant to the provisions of title 4, chapter 5, rules for the implementation of the program. The department shall base the rules establishing program training requirements, program protocols, program management information systems, and program evaluation requirements on research-based model programs that have been replicated in multiple, rigorous, randomized clinical trials and in multiple sites that have shown significant reductions in:

(1) The occurrence among families receiving services through the model program of infant behavioral impairments due to use of alcohol and other drugs, including nicotine;

(2) The number of reported incidents of child abuse and neglect among families receiving services through the model program;

(3) The number of subsequent pregnancies by mothers receiving services through the model program;

(4) The receipt of public assistance by mothers receiving services through the model program;

(5) Criminal activity engaged in by mothers receiving services through the model program and their children.

(d) Notwithstanding the provisions of subsection (c), the board shall adopt rules pursuant to which a nurse home visitation program that is in operation in the state as of July 1, 2007, may qualify for participation in the program if it can demonstrate that it has been in operation in the state for a minimum of five (5) years and that it has achieved a reduction in the occurrences specified in subsection (c). Any program so approved shall be exempt from the rules adopted regarding program training requirements, program protocols, program management information systems, and program evaluation requirements so long as said program continues to demonstrate a reduction in the occurrences specified in subsection (c).

§ 68-1-2405.

(1) The commissioner of health shall select the National Service Organization of the Nurse Family Partnership program as the health care and services facility with the knowledge and expertise necessary to assist the department in selecting entities from among the applications submitted pursuant to § 68-1-2406 and in monitoring and evaluating the implementation of the program in communities throughout the state.

(2) The health care and services facility shall monitor the administration of the program by the selected entities to ensure that the program is implemented according to the program training

requirements, program protocols, program management information systems, and program evaluation requirements established by rule of the department. The health care and services facility shall evaluate the overall implementation of the program and include such evaluation, along with any recommendations concerning the selected entities or changes in the program training requirements, program protocols, program management information systems, or program evaluation requirements, in the annual report submitted to the department pursuant to § 68-1-2408.

(3) The department shall compensate the health care and services facility for the costs incurred in performing its duties under this article. Such compensation shall be included in the actual costs incurred by the department in administering the program and paid out of the amount allocated to the department for administrative costs.

§ 68-1-2406.

(a) Any entity that seeks to administer the program in a community shall submit an application to the department in accordance with rules adopted by the department. At a minimum, the application shall specify the basic elements and procedures that the entity shall use in administering the program. Basic program elements shall include, but are not limited to, the following:

(1) The specific training to be received by each nurse employed by the entity to provide home nursing services through the program, which training shall meet or exceed the visiting nurse training requirements established by rule of the department;

(2) The protocols to be followed by the entity in administering the program, which protocols at a minimum shall comply with the program protocols established by rule of the department;

(3) The management information system to be used by the entity in administering the program, which at a minimum shall comply with the management information system requirements established by rule of the department;

(4) The reporting and evaluation system to be used by the entity in measuring the effectiveness of the program in assisting low-income, first-time mothers, which at a minimum shall meet the reporting and evaluation requirements specified by rule of the department;

(5) An annual report to both the health care and services facility and the community in which the entity administers the program that reports on the effectiveness of the program within

the community and is written in a manner that is understandable for both the health care and services facility and members of the community.

(b) Any program application submitted pursuant to this section shall demonstrate strong, bipartisan public support for and a long-time commitment to operation of the program in the community.

(c) The department shall initially review the applications received pursuant to this section and submit to the health care and services facility for review those applications that include the basic program elements as required by the rules adopted by the department. Following its review, the health care and services facility shall submit to the department a list of the applying entities that the health care and services facility recommends to administer the program in communities throughout the state.

§ 68-1-2407.

(a) On receipt of the list of entities recommended by the health care and services facility, the department shall select the entities that will administer the program in communities throughout the state. In selecting entities, the department shall give special consideration to entities that are proposing to administer the program as a collaborative effort among multiple entities.

(b)

(1) The entities selected to operate the program shall receive grants in amounts specified by the department. The grants may include operating costs and additional amounts for training and development of any infrastructure, including but not limited to development of the information management system, necessary to administer the program. For the 2007-08 fiscal year, the department shall award grants to no more than twelve (12) entities in at least eight (8) communities. The number of entities selected and the number of communities in which the program shall be implemented in subsequent fiscal years shall be determined by moneys available in the nurse home visitor program fund created in subdivision (2).

(2) Grants awarded pursuant to subdivision (1) shall be payable from the nurse home visitor program fund, which fund is hereby created in the state treasury. The nurse home visitor program fund, referred to in this section as the "fund", shall consist of moneys appropriated thereto by the general assembly from general revenue and moneys received from the federal government. Any revenues or moneys deposited in the fund shall remain in the fund until expended for purposes consistent with this part and shall not revert to the general fund on any June 30. In addition, the state treasurer may credit to the fund any public or private gifts, grants, or donations received by the department for

implementation of the program. The fund shall be subject to annual appropriation by the general assembly to the department for grants to entities for operation of the program. Notwithstanding any other provision of law, all interest derived from the deposit and investment of moneys in the fund shall be credited to the fund.

§ 68-1-2408. Entities receiving grants shall report to the health sciences facility as often as the department determines to be beneficial to program oversight. The health care and services facility shall report to the department as often as the department determines to be beneficial to program oversight, but at least annually. The department shall report in writing on an annual basis to the general assembly.

SECTION 2. This act shall take effect July 1, 2007, the public welfare requiring it.

PASSED: June 12, 2007



JIMMY NAIFEH, SPEAKER
HOUSE OF REPRESENTATIVES



RON RAMSEY
SPEAKER OF THE SENATE

APPROVED this 26th day of June 2007



PHIL BREDESEN, GOVERNOR