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April 16, 2014

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The Honorable Dave Reichert  
Chairman, Subcommittee on Human Resources  
Committee on Ways and Means  
U.S. House of Representatives  
Washington, DC 20515

Dear Chairman Reichert:

Thank you again for the opportunity to testify at the Subcommittee's April 2<sup>nd</sup> hearing on the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV). I'm writing in response to your follow-up questions about my testimony. The questions, along with my written responses, are as follows:

**Question:**

**How can the Subcommittee apply the evidence-based approach used in MIECHV to major entitlement programs within the Subcommittee's jurisdiction?** As noted in your letter, MIECHV's approach of using rigorous evidence of effectiveness as a central factor in determining which program models to fund is lacking in almost every other social program administered by the federal government.

**Response:**

- **A newly-enacted \$200 million initiative in the Supplemental Nutrition Assistance Program (SNAP) shows how an evidence-based approach might work in a major entitlement program.**

Specifically, section 4022 of the Agricultural Act of 2014 (Public Law 113-79) provides \$200 million in mandatory funding for up to 10 state pilot projects that provide employment and training assistance to SNAP program participants, designed to increase their workforce participation and reduce their reliance on public assistance. Importantly, the legislation requires a rigorous, independent evaluation of each pilot project, using program and control groups, to determine the project's impact on participants' employment, income, economic well-being, and use of public assistance. Similar demonstration-evaluations in welfare policy in the 1980s and 1990s successfully identified a set of program strategies that increased participants' economic well-being while reducing government spending, and had a major impact on federal and state welfare policy.<sup>1</sup>

- **Building on the SNAP and MIECHV approaches, we suggest the Subcommittee consider incorporating the following evidence-based provisions into major entitlement programs:**
  1. **Provide a modest amount of mandatory funding (similar to what was done in the SNAP initiative) for pilot projects designed to –**
    - (a) **Improve participant outcomes without increasing the program's cost; or**
    - (b) **Reduce the program's cost without loss of quality or impact on participants' well-being.**

<sup>1</sup>The welfare studies and their policy impact are summarized in: *Increasing the Effectiveness of Social Spending While Reducing Its Cost: An Evidence-Based Approach*, Testimony by Jon Baron before the House Ways and Means Subcommittee on Human Resources, July 2013 ([link](#))

2. For each project, require a rigorous (preferably randomized) impact evaluation, to determine whether it produces the hoped-for improvements in participants' lives and/or budget savings.
3. For projects found, in the above evaluations, to produce such improvements and/or savings, authorize the Secretary to fund/facilitate their larger-scale implementation with program funds (while ensuring close adherence to the proven approach). We suggest that the legislation allow the administering federal agency to use waivers from law or regulation, where appropriate, to help advance such implementation. The legislation might also require OMB budget-scoring officials to confirm, based on the evaluation findings, that the project is indeed budget-neutral or budget-saving, before the agency can go forward with such implementation.

Provision 3 would replicate a core feature of MIECHV that currently does not exist in federal entitlement programs: rigorous evidence of effectiveness determines which program strategies/approaches are put into large-scale implementation. Doing so would thereby inject a dynamic for evidence-driven improvements into a social spending process where evidence currently has little role.

### **Question:**

**How would you suggest the evidence standard be changed in the current MIECHV statute to ensure models that have been proven to result in significant, meaningful outcomes are the ones that receive the most funding?**

### **Response:**

- **As discussed in my testimony, MIECHV's current evidence standard contains a loophole that has allowed a number of unproven and/or ineffective program models to qualify as "evidence based."** Specifically, the current standard, as set out in detailed language in MIECHV's authorizing statute, focuses on whether rigorous evaluations have found that the model produced *statistically-significant* effects, but not on whether these effects have *policy or practical importance*. This has opened a loophole, allowing some models to qualify as evidence based solely on the basis of statistically-significant effects, even if those effects were –
  1. On intermediate or process measures (such as referrals to community services) that may never lead to ultimate, policy-important outcomes (such as parents' employment and earnings);
  2. So small in size as to be of little practical importance; or
  3. Likely to be chance findings (e.g., because the studies measured a large number of outcomes).

Illustrative examples of models that have qualified as evidence based in MIECHV, based on such effects, are described in my written testimony.

- **We therefore recommend that Congress revise MIECHV's evidence standard to close this loophole, drawing on approaches that have been used in other legislation and programs.**

Drawing on an evidence standard used in the Department of Education's Investing in Innovation Fund (described in my testimony), as well as that used in Congress' 2007 authorization of the pilot program for MIECHV,<sup>2</sup> we recommend that the Congress replace MIECHV's current standard for "evidence

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<sup>2</sup> The Congressional evidence standard in the 2007 pilot was "well-designed randomized controlled trials, [demonstrating] sizeable, sustained effects on important child outcomes such as abuse and neglect." The Congressional language instructed HHS "to adhere closely to evidence-based models of home visitation and not to

based,” whose complexity has helped created the above loophole, with a streamlined, rigorous standard as follows:

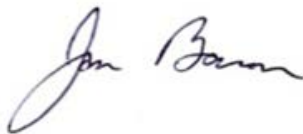
*An “evidence-based” home visiting model is one that has been shown, in rigorous evaluations that allow for strong causal inferences, to produce statistically-significant, sizeable, and sustained effects on policy-important child and family outcomes (such as child maltreatment, K-12 student achievement, or family income), and not just intermediate outcomes (such as referrals to community services, or positive parenting practices) that may or may not ultimately lead to improvements in policy-important outcomes.*

Such a straightforward statement of principle would send a clear signal to HHS, MIECHV grant applicants, and the larger policy community, that Congress expects MIECHV to fund models backed by strong scientific evidence of policy-important (and not just statistically-significant) improvements in people’s lives. As with MIECHV’s current authorizing statute, the legislation could charge HHS with developing a more specific evidence standard within this statement of principle.

Because only a few home visiting models would currently meet this new standard, Congress might consider allowing HHS to allocate a portion of MIECHV funding for modest-sized grants to program models that are backed by moderate – but not yet strong – evidence of effectiveness, with a requirement that such models be rigorously evaluated. (This would be in addition to, or instead of, MIECHV’s current allocation of up to 25% of its funds for models that are not evidence based.) If found effective, these models can become designated as evidence based and therefore eligible for larger, scale-up funding; if not, their funds would be redirected to other, more promising models. Over time, this would increase the number of evidence-based models, giving state and local grant applicants a larger menu of such models to choose from, and enabling MIECHV to effectively address a wider array of problems in a more diverse set of population groups that are at-risk. The Investing in Innovation Fund follows an approach similar to this, which could be implemented with appropriate adaptations in the MIECHV reauthorizing legislation.

I hope this is helpful in addressing your questions. Please let me know if you have additional questions or would like further information.

Sincerely,

A handwritten signature in cursive script that reads "Jon Baron".

Jon Baron