



Welcome to Home Visiting Budget (HV-BAT)

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Health Resources and Services Administration
Maternal and Child Health Bureau
Division of Home Visiting and Early Childhood Systems
5600 Fisher Lane
Rockville, MD 20857

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Public Burden Statement: The Home Visiting Budget Assistance tool (HV-BAT) is a reporting tool to collect information about home visiting services. The information requested by this tool will be used to assist Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program planning, sub-recipient monitoring, and research and evaluation activities. A collection of information unless it displays a currently valid OMB control number. The OMB control number is 0950-0047-0001. This information collection is required to obtain or retain a benefit (Social Security Act, Title IV-E). The burden estimate for this collection of information is estimated to average 18 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Washington, DC 20503, OMB, Paperwork Project Director (0950-0047-0001) or paperwork@hhsa.



the

Assistance Tool

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lect information on standardized cost metrics from programs that deliver home
rly Childhood (MIECHV) Program awardees in having the cost information they
n agency may not conduct or sponsor, and a person is not required to respond
ol number for this information collection is 0906-0025 and it is valid until
itle V, § 511 (42 U.S.C. § 711(c))). Public reporting burden for this collection of
ns, searching existing data sources, and completing and reviewing the collection
f information, including suggestions for reducing this burden, to HRSA Reports
gov.

Home Visiting Budget Assistance Tool

The Home Visiting Budget Assistance Tool (HV-BAT) was designed to collect costs that local implementing agencies report. The reported costs should include all resources used for the home visiting model regardless of funding source.

Data Entry Worksheets

Please go through each of the nine data entry worksheets listed below by clicking on the tab name at the bottom of the tool. Do not enter data pulled from other worksheets, such as model name and reporting period. Users should not enter data in any grayed-out cells.

- (1) **LIA Characteristics:** Collects information on the characteristics of the LIA completing the HV-BAT
- (2) **Labor Costs:** Collects information on the number of staff working on the home visiting model, their salaries, and the program activity below
- (3) **Overhead and Infrastructure:** Collects information on indirect costs incurred when delivering the home visiting model
- (4) **Contracted Services:** Collects information on costs associated with outside contracts and consultants that support the home visiting model
- (5) **Model Costs, Tools, and Curricula:** Collects information on costs associated with model, tools, and curricula used in the home visiting model
- (6) **Training:** Collects information on training costs incurred as part of implementing the home visiting model
- (7) **Consumable Supplies:** Collects information on costs of consumable supplies purchased for the home visiting model
- (8) **Non-consumable Supplies:** Collects information on purchases of non-consumable equipment and supplies during this period
- (9) **Travel:** Collects information on travel costs associated with implementing the home visiting model

The **Summary** worksheet provides a summary of costs entered in the HV-BAT; no data entry is needed in this worksheet.

The **Help** worksheets (denoted as "Help" and "Help_overhead") provide additional guidance on how to answer questions on the **LIA Characteristics** worksheet or report costs that are shared across models; no data entry is needed in these worksheets.

In the **Labor Costs** worksheet, we request additional information about how program staff spend their time on specific program activity below. As you complete the Labor Costs worksheet, you may find it helpful to refer to these definitions in the **Labor Costs** worksheet when you hover your computer mouse over the activity name.

Program Activities for Labor Costs

- (1) **Service Delivery:** Includes time spent providing services directly to families, such as home visits and family group meetings
- (2) **Outreach:** Includes time spent conducting outreach activities to recruit and enroll families in the program
- (3) **Program Management and Coordination:** Includes time spent coordinating program activities and overseeing program implementation
- (4) **Supervising:** Includes time spent overseeing service delivery personnel, such as home visiting staff
- (5) **Admin/Data Entry:** Includes time spent providing administrative support, such as scheduling, data entry, and reporting
- (6) **Executive:** Includes time spent by executive staff overseeing the larger program, facility, or agency
- (7) **Other:** Includes staff roles not included in any other category (e.g., translators, cultural advisors)

Assistance Tool (HV-BAT)

es (LIAs) incur when implementing a home visiting model during a 12-month period.

of the screen and following the instructions on each tab. Gray cells contain instructions and information / cells.

s, and the percentage time allocations across program activities (please see definitions for each program

iting model

were used when delivering the home visiting model

a used to deliver the home visiting model

ng model

used for the home visiting model; includes items purchased before the reporting period that were used

rksheet.

ected questions in the **Local Implementing Agency (LIA)**
neets.

even program activities. We provide definitions for each
initions. The definitions are also shown in the Labor Costs

assessments

ing the program

nd reimbursement

Local Implementing Agency Characteristics

Instructions: In this section, please respond to the following questions about your organization's services by filling out the table below. The boxes with default text "(Select one)" are dropdown menus: Click on the box to view and select an option. Click on the gray "Help" buttons for guidance on how to answer applicable questions.

Question	
1.	What are the dates of the 12-month reporting period for which the costs are reported in this table? Start Date (Month, Day, Year) End Date (Month, Day, Year)
2.	What is the name of the home visiting model for which the costs are reported?
3.	How many years has your agency been implementing this home visiting model?
4.	Does your agency also implement other home visiting models?
5.	What are the funding sources for this home visiting model and the percentage of funding from each source? Funding Source #1 Funding Source #2 Funding Source #3 Funding Source #4 Funding Source #5
6.	Does this home visiting model receive outreach services from another organization free of charge? (Outreach services include family recruitment, for example, through a centralized intake and referral system.)
7.	In the reporting period, what percentage of this home visiting model's home visits took place in rural areas? (Click the "Help" button to see the definition of rural areas.)
8.	In the reporting period, what percentage of this home visiting model's home visits took place in frontier areas? (Click the "Help" button to see the definition of frontier areas.)
9.	

In the reporting period, what percentage of this home visiting model's scheduled home visits were successfully completed (i.e., services were provided to the family per the evidence-based model's guidance)?

10. In the reporting period, what was the total number of home visits completed for this home visiting model?
11. In the reporting period, what was the unduplicated count of households served by this home visiting model?
12. In the reporting period, what percentage of the families served by this home visiting model were below 200% of the federal poverty line? (Click the "Help" button for guidance on federal poverty line thresholds.)
13. For this home visiting model, approximately what percentage of visits had more than one person from your agency attending the visit (e.g., another home visitor, trainee, supervisor)?

stics

illing in the outlined boxes in the “Response”
an entry from the dropdown menu. Click on the

Response
ool?
(Select one)
(Select one)

Funding Sources	Percentage
(Select one)	
(Select one)	
(Select one)	
(Select one)	
(Select one)	
Total:	0%

(Select one)

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Help

Help

Home Visiting Model: (Select one)

Instructions: Enter information on the staff who worked on this home visiting model during the reporting period.

Column A (Job Title): Enter the job title of each employee who worked on the home visiting model.

Column B (FTE Number): Enter the full-time equivalent (FTE) number of staff for whom data are being reported.

1. For a supervisor who works full time and splits her time equally between two home visiting models, enter 0.5.
2. For an outreach coordinator who works 75% and spends all of her time on this home visiting model, enter 0.75.
You may report data for multiple staff in the same row if these staff perform similar roles. For example, for five staff who each work 50% of the time, enter 5*0.5.

Column C (Annual Salary per Person): Enter per person the annual salary amount assuming full-time status. salary. The reported amount should include salary plus fringe benefits. If fringe benefits or the fringe benefit

Column D (Are Fringe Benefits Included?): From the dropdown menu, select whether fringe benefits are included.

Column E (Total Compensation Amount): Do not enter anything in this cell. This cell calculates the total compensation based on the salary entered in column C, a national average fringe rate of 46% is used to inflate the salary and calculate total compensation.

Column F (Is Position MIECHV Funded?): From the dropdown menu, select the appropriate response about

Column G (Percentage MIECHV Funded): If “Yes, partially” is selected in column F, enter the percentage of the

Columns H-N (Percentage Time Allocations): Enter the percentage of total time spent on the home visiting are also displayed as hover-over text for each activity name.

Column O (Total): Do not enter anything in this cell. This cell calculates the total percentage of allocations across all categories.

[illegible]

[illegible]

Labor Costs	
	Reporting Period: -
Total Reported Labor Costs: \$0	

ted in this row. Include the time spent on this home visiting model only. For example—

0.75.

ive FTE home visitors who dedicate all of their time to this home visiting model, enter 5. For five home visitors:

For example, if you had five home visitors who worked 50% each with part-time salaries of \$25,000 each during the year, and the agency's rate is unknown, enter the salary amount and select "No" in column D.

luded in the amount reported in column C (Annual Salary). A national average fringe rate of 46% is used to int

compensation amount for each row by multiplying FTE number (column B) by the annual salary per person (column C) to get the compensation amount.

the MIECHV funding of each position. Response options include “Yes, 100%”; “Yes, partially”; and “No.”

the salary that is funded by MIECHV. Do not enter anything if "Yes, 100%" or "No" is selected in column F.

model that was dedicated to each program activity. The total percentage across activities must add up to 100

cross activities. If the total does not add up to 100%, the cell will be red. If the total is 100%, the cell will be green.

[illegible]

[illegible]

s who each dedicate 50% of their time to this model, enter 2.5

ing the year, you should enter \$50,000 as the per-person annual

flate salary amounts that do not include fringe benefits.

mn C). If fringe benefits are not included in the annual salary

% . Definitions of activities are listed in the Introduction tab and

een.

[illegible]

[illegible]

Overhead

Home Visiting Model: (Select one)

Total Reported Cost

Instructions: Enter information on the overhead and infrastructure costs incurred.

Column A (Description): Do not enter anything in this column. Categories for work are entered in the cell with the category name and view the definition that appears in the popup list across models or other programs.

Column B (Annual Expenditures): Enter the annual expenditure for each category using the method that is most appropriate for your organization. If your organization has tracked the overhead costs separately, include liability insurance and payroll and maintenance separately from indirect costs, include those expenses as infrastructure costs.

Column C (Is Expense MIECHV Funded?): From the dropdown menu, select the "Yes, partially"; and "No."

Column D (Percentage MIECHV Funded): If "Yes, partially" is selected in column C, enter the percentage of the cost that is MIECHV funded. If "No" is selected in column C, leave this column blank.

Description (A)	Annual Expenditures (B)
--------------------	----------------------------

Overhead Costs

Institutional Indirect Costs	
Unallowable Indirect Costs	
Other Overhead Costs	

Infrastructure Expenses

Office Rent	
Utilities and Maintenance	

Help

Overhead and Infrastructure Costs

Reporting Period: -

Overhead and Infrastructure Costs: \$0

ed for the home visiting model during the reporting period.

hich expenditures should be reported are listed here. For additional detail on each category, click on the box. Click the gray "Help" button for additional guidance on reporting overhead costs that are shared

ory listed in column A. Organizations charge for overhead and infrastructure costs differently, so use the an indirect rate that covers general overhead expenses, include total annual costs for those expenses in taxes in "Other Overhead Costs". If your organization tracks infrastructure expenses such as rent, utilities, astructure expenses.

: appropriate response for the MIECHV funding of each expense. Response options include "Yes, 100%";

n C, enter the percentage of the expense that is funded by MIECHV. Do not enter anything if "Yes, 100%"

Is Expense MIECHV Funded? (C)	Percentage MIECHV Funded (if partial) (D)
(Select one)	
(Select one)	
(Select one)	
(Select one)	
(Select one)	

Cont

Home Visiting Model: (Select one)

Total R

Instructions: Enter information on the costs associated with contracted service

Column A (Contracted Services): Do not enter anything in this column. Contract each type of contracted service, click on the cell with the name of the service and

Column B (Annual Expenditures): Enter the annual expenditure associated with

Column C (Is Expense MIECHV Funded?): From the dropdown menu, select the “Yes, partially”; and “No.”

Column D (Percentage MIECHV Funded): If “Yes, partially” is selected in column C, column D.

Contracted Services (A)	Annual Expenditures (B)
Data Services	
Outreach Services	
Service Delivery	
Other Services	

Contracted Services Costs

Reporting Period: -	
Reported Contracted Services Costs: \$0	

Costs incurred for the home visiting model during the reporting period.

Contracted services categories for which expenditures should be reported are listed here. For additional detail on each category, click on the category name to view the definition that appears in the popup box.

For each contracted service listed in column A.

Select the appropriate response about the MIECHV funding of each expense. Response options include "Yes, 100%";

If "Yes, 100%" is selected in column C, enter percentage that is funded by MIECHV. Do not enter anything if "Yes, 100%" or "No" is selected in

Is Expense MIECHV Funded? (C)	Percentage MIECHV Funded (if partial) (D)
(Select one)	
(Select one)	
(Select one)	
(Select one)	

Model C

Home Visiting Model: (Select one)

Total Reported Cost

Instructions: Enter information on the fees your organization paid to the home visiting model during the reporting period.

Column A (Description): Do not enter anything in this column. The categories for the cell with the category name and view the definition that appears in the pop

Column B (Annual Expenditures): Enter the annual expenditure for each category reported here only if they were paid during the reporting period, so if the model fees not covered in the overall model fee, such as training tuition, should be reported.

Column C (Is Expense MIECHV Funded?): From the dropdown menu, select the "Yes, partially"; and "No."

Column D (Percentage% MIECHV Funded): If ""Yes, partially,"" is selected in column C, is selected in column D.

Description (A)	Annual Expenditures (B)
--------------------	----------------------------

Model Fees

Startup Model Fee	
Annual Model Fee	

Assessment, Tools, and Curricula

Startup Model Curricula Fees	
Annual Model Curricula Fees	
Additional Curricula Fees	
Developmental Screening, Assessment, and Outcome Measurement Tools	

Cost, Tools, and Curricula

Reporting Period: -	
Costs for Model, Tools, and Curricula: \$0	

visiting model developer and expenses related to assessment, tools, and curricula incurred for the home

or which expenditures should be reported are listed here. For additional detail on each category, click on
up box.

ory listed in Column A. Model fees include the startup fee and ongoing annual fees. Startup fees should be
el startup fees were paid before the reporting period began, do not report those costs here. Additional
ported in the "Training" worksheet and not here.

: appropriate response about the MIECHV funding of each expense. Response options include "Yes, 100%";

olumn C, enter the percentage that is funded by MIECHV. Do not enter anything if ""Yes, 100%,"" or ""No""

Is Expense MIECHV Funded? (C)	Percentage MIECHV Funded (if partial) (D)
(Select one)	
(Select one)	
(Select one)	
(Select one)	
(Select one)	

Home Visiting Model: (Select one)

Instructions: Enter information on the training costs incurred for this home visiting model to be reported in the "Model Cost, Tools, and Curricula" worksheet and not here. Do not enter information in the "Travel" worksheet.

Column A (Trainings): Do not enter anything in this column. Training categories for which you enter information are listed with the category name and view the definition that appears in the popup box.

Column B (Annual Expenditures): Enter the annual expenditure associated with each training category. If a training category does not include training tuition, report model training costs here. Initial training tuition is reported in column C.

Column C (Is Expense MIECHV Funded?): From the dropdown menu, select the appropriate funding source: "Yes, fully"; "Yes, partially"; and "No."

Column D (Percentage MIECHV Funded): If "Yes, partially" is selected in column C, enter the percentage of the expense that is MIECHV funded in column D.

Trainings (A)	Annual Expenditures (B)
Home Visitor Initial Training Tuition	
Supervisor Initial Training Tuition	
Administrator Initial Training Tuition	
Other Staff Initial Training Tuition	
Ongoing Trainings and Professional Development	

Training Costs	
Reporting Period: -	
Total Reported Training Costs: \$0	

del during the reporting period. If model training costs are included in the model fee, those costs should report costs incurred for travel to trainings in this worksheet; travel costs should be reported in the

ich expenditures should be reported are listed here. For additional detail on each category, click on the cell

aining listed in column A. If the model fee reported in the "Model Cost, Tools, and Curricula" worksheet on categories include training tuition for new staff.

ropriate response about the MIECHV funding of each expense. Response options include "Yes, 100%"; "Yes,

er the percentage that is funded by MIECHV. Do not enter anything if "Yes, 100%" or "No" is selected in

Is Expense MIECHV Funded? (C)	Percentage MIECHV Funded (if partial) (D)
(Select one)	
(Select one)	
(Select one)	
(Select one)	
(Select one)	

Consumable Supplies

Home Visiting Model: (Select one)

Total Requested

Instructions: Enter information on the costs of consumable supplies purchased that are purchased recurrently and get used up or depleted, such as office supplies.

Column A (Consumable Supplies): Do not enter anything in this column. Consumable supplies are listed on each category, click on the cell with the category name and view the definition.

Column B (Annual Expenditures): Enter the annual expenditure for each consumable supply category. Administrative supplies.

Column C (Is Expense MIECHV Funded?): From the dropdown menu, select the "Yes, partially"; and "No."

Column D (Percentage MIECHV Funded): If "Yes, partially" is selected in column C, enter the percentage of the total cost of the supply that is funded by MIECHV. If "No" is selected in column C, leave this column blank.

Consumable Supplies (A)	Annual Expenditures (B)
Administrative Supplies	
Startup Supply Costs	
Consumable Administrative Supplies	
Service Delivery Materials	
Client Support Materials	
Consumable Programmatic Materials	

Consumable Supplies Costs
Reporting Period: -
Reported Consumable Supplies Costs: \$0

for the home visiting model during the reporting period. Consumable supplies are supplies and materials or phone usage fees.

Consumable supplies categories for which expenditures should be reported are listed here. For additional detail on that appears in the popup box.

Consumable supplies category listed in column A. Cell phone usage fees should be reported as consumable

Provide appropriate response about the MIECHV funding of each expense. Response options include “Yes, 100%”;

In C, enter the percentage that is funded by MIECHV. Do not enter anything if “Yes, 100%” or “No” is

Is Expense MIECHV Funded? (C)	Percentage MIECHV Funded (if partial) (D)
(Select one)	
(Select one)	
(Select one)	
(Select one)	

Non-consumal

Home Visiting Model: (Select one)

Instructions: Enter information on the costs of non-consumable supplies used for the home visiting model during these items cannot be used up or depleted. Examples of non-consumable equipment include computers and other the maintenance costs associated with vehicles. Include purchases made in this reporting period and in prior years were used during the reporting period, report the costs for those computers here.

Column A (Non-consumable Equipment and Supplies): Enter a description of the non-consumable equipment c
prior years if used during the reporting period.

Column B (Purchase Price): Enter the purchase price of the non-consumable equipment or supply. The cost will

Column C (Expected Years of Use): Enter the number of years that you expect the equipment or supply will be used.

Column D (Annualized Cost): Do not enter anything in this column. The annualized cost is automatically calculated.

Column E (Is Expense MIECHV Funded?): From the dropdown menu, select the appropriate response about the

Column F (Percentage MIECHV Funded): If “Yes, partially” is selected in column C, enter the percentage of the €

[illegible]

Non-Consumable Supplies Costs	
Reporting Period: -	
Annualized Costs for Non-consumable Supplies	

Reporting Period: -

Annualized Costs for Non-consumable Supplies

ing the reporting period. Non-consumable supplies include equipment that her electronics equipment, computer software, phones, and automobiles. ars if the supply was used during the reporting period. For example, if you

or supply used in the reporting period. Include equipment and supplies pur

be annualized automatically based on the number of expected years of use used.

ted as purchase price (column B) divided by the number of expected years

• MIECHV funding of each expense. Response options include “Yes, 100%”;

expense that is funded by MIECHV. Do not enter anything if "Yes, 100%" or

[illegible]

Home Visiting Model: (Select one)

Instructions: Enter information on travel expenses incurred for the home visit

Column A (Travel): Do not enter anything in this column. Travel categories for v cell with the name of the category and view the definition that appears in the p option to report costs in aggregate by selecting “Yes” for the question “Do you table.

Column B (Annual Expenditures): Enter the annual expenditure associated with selecting “Yes” to the question “Do you want to report travel costs in aggregate

Column C (Is Expense MIECHV Funded?): From the dropdown menu, select the “Yes, partially”; and “No.”

Column D (Percentage MIECHV Funded): If “Yes, partially” is selected in column selected in column C.

Travel (A)	Annual Expenditures (B)
Mileage to Families for Service Delivery	
Mileage for Outreach	
Travel to Trainings and Meetings	

Do you want to report travel costs in aggregate

Travel Costs

Reporting Period: -

Total Reported Travel Costs: \$0

ing model during the reporting period.

which expenditures should be reported are listed here. For additional detail on each category, click on the popup box. If you do not track travel costs separately for each category shown in column A, you have the option to report travel costs in aggregate rather than by categories show above?" at the bottom of the

n each travel type listed in column A. Note, you have the option to report travel costs in aggregate by rather than by categories show above?" at the bottom of the table.

: appropriate response about the MIECHV funding of each expense. Response options include "Yes, 100%";

n C, enter the percentage that is funded by MIECHV. Do not enter anything if "Yes, 100%" or "No" is

Is Expense MIECHV Funded? (C)	Percentage MIECHV Funded (if partial) (D)
(Select one)	
(Select one)	
(Select one)	

rather than by categories shown above?

(Select one)

Summary of Reports

Home Visiting Model: (Select one)	Report
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Table 1. Total and Per Family Costs of Home Visiting Model by Cost Category

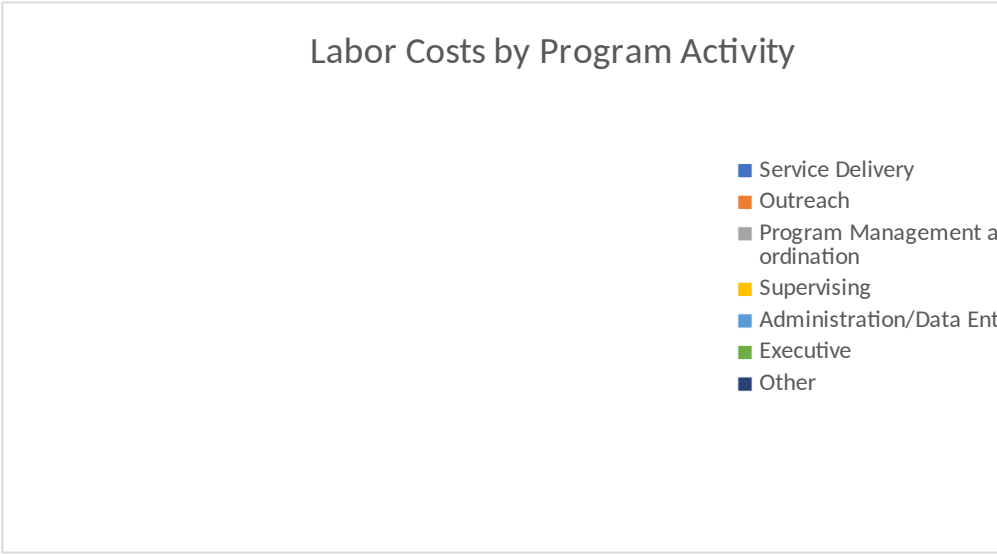
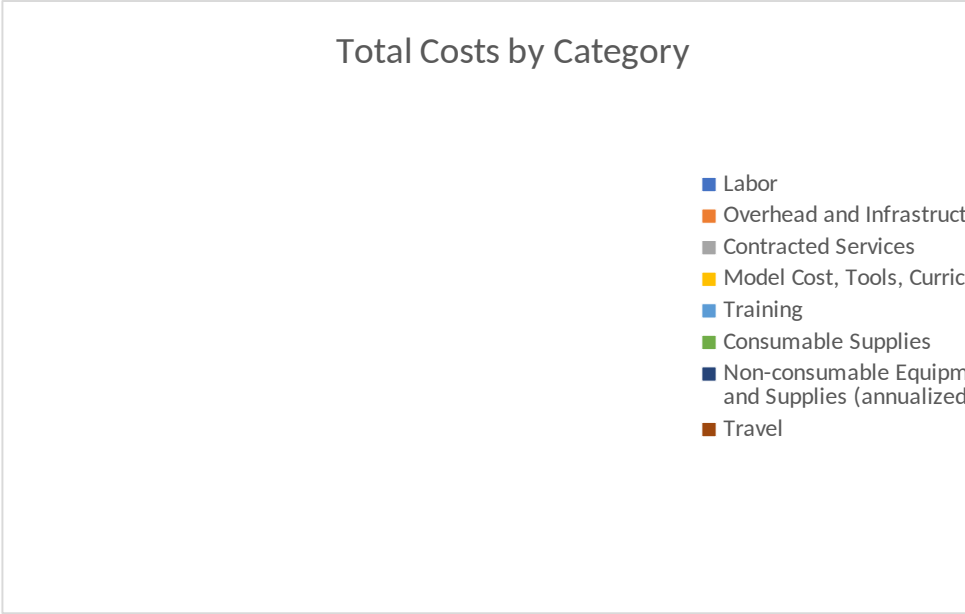
Cost Category	Total Cost	
	\$	%
Labor	\$0	0%
Overhead and Infrastructure	\$0	0%
Contracted Services	\$0	0%
Model Cost, Tools, Curricula	\$0	0%
Training	\$0	0%
Consumable Supplies	\$0	0%
Non-consumable Equipment and Supplies (annualized)	\$0	0%
Travel	\$0	0%
Total Costs	\$0	0%

Table 2. Total and per Family Labor Costs by Program Activity

Program Activity	Total Cost	
	\$	%
Service Delivery	\$0	0%
Outreach	\$0	0%
Program Management and Coordination	\$0	0%
Supervising	\$0	0%
Administration/Data Entry	\$0	0%
Executive	\$0	0%
Other	\$0	0%
Total Labor Costs	\$0	0%

Cost per Family Served
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0

Cost per Family Served
\$0
\$0
\$0
\$0
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\$0



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Rural and Frontier Definitions (Questions

We recommend that you use the rural-urban continuum codes (RUCC) from the United States Department of Agriculture provided in rural and frontier areas. These codes for each county in the United States are provided at the link showing percentages of home visits in rural and frontier areas:

1. Download the Rural-urban Continuum codes from the US Department of Agriculture: <https://www.ers.usda.gov/data-products/rural-urban-continuum-codes/>
2. Download excel file: Rural-urban Continuum Code 2013. Filter the data to select your state.
 - a. You can do so by clicking on the drop down menu in the State column (column B), then unchecking "Select all states"
3. Filter the data to select the counties (column C) in which your agency provides home visits.
4. Use the codes in the RUCC_2013 column (column E) to determine the urban/frontier status of each county.
 - a. Codes 1, 2, and 3 correspond to urban areas.
 - b. Codes 4, 5, and 6 correspond to rural areas.
 - c. Codes 7, 8, and 9 correspond to frontier areas.
5. Use the number of home visits in each county and the corresponding RUCC to calculate the percentage of home visits in rural and frontier areas.

For example, for an agency that is located in North Carolina and provides 50% of home visits in Vance County (RUCC = 4), 50% of home visits are provided in rural areas and 20% are provided in frontier areas.

Federal Poverty Line Definitions (Question 1

We recommend that you use the HHS guidelines for a family of 4 to determine the federal poverty line (FPL) threshold. The District of Columbia was household/family income of \$24,300. Based on this number, the specific threshold for each state is determined by the HHS guidelines.

Source: (<https://www.federalregister.gov/articles/2016/01/25/2016-01450/annual-update-of-the-hhs-poverty-guidelines>)

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culture to report the percentages of your agency's home visits
wn below. Please follow the steps below to determine

gov/data-products/rural-urban-continuum-codes/

ll" box, and then checking the box with your state.

ome visits provided in rural and frontier areas.

CC = 4), 30% of visits in Franklin County (RUCC = 1), and 20% of
frontier areas.

**Return to the LIA
Characteristics Tab**

12)

hold. In 2016, the FPL for a family of 4 in the 48 Contiguous States
old for below 200% of FPL is \$48,600.

idelines#t-1)

Reporting Shared Overhead Costs

Some LIAs have costs for resources that are used to support more than one home visiting model. Other LIAs within one agency. For example, an LIA that provides multiple home visiting models will have administrative costs that together may incur costs to support the efforts of another agency (e.g., administrative support may be provided by other level LIAs). In these cases, it is important to report in a way that avoids double-counting of costs. We have provided examples of these shared costs to report in the HV-BAT.

Example 1 (an LIA that provides more than one model): The Apple LIA has been asked to report costs for programs like NFP and SafeCare. Suppose Apple has 100 families: 60 receive NFP, 20 receive HIPPO, and 20 receive SafeCare. If Apple has \$1000 of administrative costs that support all 3 models. When reporting the share of costs that goes to the families receiving NFP. In this example, Apple would report 60% of their \$1000 shared administrative costs, or \$600.

Example 2 (an LIA that supports other LIAs' home visiting programs): The Beets LIA has been asked to report costs for their home visiting program. However, Beets works closely with 2 other LIAs that provide home visiting models in nearby counties. When reporting these administrative costs, Beets should report only the fraction that is used for their home visiting program. Assume that costs shared across LIAs are divided equally among those LIAs. If Beets' administrative costs are \$999 per year, we would assume that 1/3 of those costs are for Beets' home visiting program. Beets would report \$333 for administrative costs in their respective HV-BATs.

Example 3 (an LIA that both supports other LIAs' programs and provides more than one model): Cilantro LIA provides home visiting services to 40 families receiving Family Spirit and another 60 families receiving EHS. They also have shared administrative costs with other LIAs in the county and supports a total of 4 home visiting LIAs. Cilantro will need to report its share of the administrative costs for each program. Cilantro will also need to report only Family Spirit costs for any of their costs shared across Family Spirit and EHS. In this example, if the annual administrative costs of \$1000 that support 4 LIAs, including Cilantro. Cilantro should account for 1/4 of the total administrative costs. If Cilantro's work on both Family Spirit and EHS, they should be further prorated to reflect the Family Spirit costs. Cilantro will report 40% of \$250, or \$100, in the HV-BAT. If Cilantro has additional costs that are shared between the two programs, then Cilantro should report 40% of those costs.

Costs

may have costs that contribute to the work of more than one model. Similarly, agencies that work closely together may be divided by an LIA that organizes the efforts of multiple county-level models. We provided 3 examples below to help you calculate the portion

providing NFP. In addition to NFP, Apple also provides HIPPA. In other words, 60% of their families are receiving NFP. Apple support NFP, Apple should apply the fraction of their client or \$600.

t costs for providing HFA. HFA is the only model provided by . Beets pays an administrative staff that supports all 3 LIAs. Visiting services. The other 2 LIAs should also report a e LIAs. In this example, if Beets has administrative costs of report a cost of \$333 in the HV-BAT. The other 2 LIAs would

has been asked to report costs for Family Spirit. Cilantro has never had staff paid for by another LIA (Dill) that operates in a nearby area. The service provided by Dill that is used for Family Spirit. Cilantro has never had staff paid for by another LIA (Dill) that operates in a nearby area. For example, suppose Dill (the overall administrative agency) has never had staff paid for by another LIA (Dill) that operates in a nearby area. For those costs, or \$250. However, if those costs help support staff. Because 40% of Cilantro's families receive Family Spirit, the difference between Family Spirit and EHS largely in proportion to the staff costs in the HV-BAT.

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