

**Louisiana Maternal, Infant, and Early Childhood Home Visiting**  
**Family Coaching and Support Program**

Please review program information on the other side of referral form prior to completing.

**Referral Date:** \_\_\_\_\_

Referring Agency/Program: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**Pregnant Mother or Parenting Family Information:**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Preferred Language: \_\_\_\_\_

Parish: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip Code

Phone Number: \_\_\_\_\_ Preferred method for initial contact:  Phone call  Text  
Alternate Number: \_\_\_\_\_  Other \_\_\_\_\_

Eligible or receiving one or more of following (check all that may apply):  Medicaid  WIC  SNAP  TANF  SSI

Currently pregnant?  Yes **Due Date:** \_\_\_\_\_  No

Have children?  Yes  No

First time mom\*?  Yes  No

How many children? \_\_\_\_\_

*\*Please inquire about possible eligibility for special circumstances, such as death of baby or loss of custody within 30 days of birth.*

Children's ages? \_\_\_\_\_

**Health Insurance Information:**

Pregnant mom or family have insurance?  Yes  No

If yes, insurance type:  Medicaid  Private

Medicaid Number: \_\_\_\_\_

Insurance plan:  
Aetna Amerigroup Amerihealth Caritas Louisiana Health Care Connections UnitedHealthcare  
Other \_\_\_\_\_ Unknown

**Pregnant Mom or Parenting Family Consent:**

\_\_\_\_\_ I am interested in finding out more about the MIECHV Family Coaching and Support Program.  Yes  No  
Initial

**Referral Authorization:**

Client gave verbal consent authorizing referral and permission to share outcome of the referral with referring agency.

Agency Representative Signature: \_\_\_\_\_

**Referral Submission:**

**Please fax completed form to 985-340-3008**



**If you have questions or would like additional information please call 985-520-5440**

**For MIECHV Program Use Only**

Referral Received:	ETO Entered:	Letter Mailed:					
1st phone:	2nd Phone:	3rd Phone:					
Dismissal Date:	Dismissal Reason:						
	1=Enrolled in NFP	2=Refused Participation	3=Unable to locate	4=Did not meet NFP criteria	5=Did not meet local criteria	6=Program Full	7=Already enrolled in another program

## MIECHV Program Information

The Louisiana Maternal, Infant, and Early Childhood Home Visiting (LA MIECHV) is a no-cost, voluntary family coaching program that supports the health and well-being of pregnant women and parenting families with young children from birth to kindergarten entry. Families are matched with registered nurses or parent educators who provide personalized education, guidance, and support to meet each family's individual needs and empower them to reach their goals. LA MIECHV implements two evidenced-based models, Nurse-Family Partnership (NFP) and Parents as Teachers (PAT).

Evidence-Based Models	Major Program Outcomes	Criteria for Eligibility	Parish Availability
 <p>Services and supports are provided to first-time moms and families from pregnancy until the child's second birthday</p>	<ul style="list-style-type: none"> <li>Improved pregnancy outcomes</li> <li>Reduced child abuse and neglect and fewer injuries</li> <li>Improved child health</li> <li>Improved school readiness</li> <li>Decreased use of welfare and other government assistance</li> <li>Fewer closely spaced subsequent pregnancies</li> </ul>	<ul style="list-style-type: none"> <li>First-time mother*</li> <li>Enroll before 29 weeks of pregnancy. Early enrollment encouraged, preferably at or before 16 weeks gestation</li> <li>Must live in the parish where NFP services are received</li> <li>Must be eligible for one or more of the following: Medicaid, WIC, SNAP, TANF or SSI.</li> </ul> <p><i>*Eligibility can be granted by the program under special circumstances such as a woman who has lost a child or surrendered her child to adoption or lost custody of the child within first 30 days after delivery.</i></p>	<p>NFP is available in all parishes with the exception of:</p> <p>Caldwell East Carroll Madison Tensas Union West Carroll</p> <p>Evangeline (Available summer 2017)</p>
 <p>Services and supports are provided to expectant or parenting families from pregnancy until their child enters kindergarten</p>	<ul style="list-style-type: none"> <li>Early identification and intervention of developmental delays and health problems</li> <li>Prevention of child abuse and neglect</li> <li>Improved parenting knowledge and skill</li> <li>Increased kindergarten readiness, narrowing achievement gap</li> <li>Increased language and literacy activities in the home</li> </ul>	<ul style="list-style-type: none"> <li>Pregnant women OR parenting families with children less than 24 months of age.</li> <li>Priority given to NFP graduates and families with children 12 months or younger, with preference provided for families with children 4 months or younger.</li> <li>Must live in the parish where PAT services are received</li> <li>Must be eligible for one or more of the following: Medicaid, WIC, SNAP, TANF or SSI.</li> </ul>	<p>PAT is available in the following parishes:</p> <p><u>Monroe Area</u> Caldwell East Carroll Franklin (available summer 2017) Madison Morehouse Ouachita Tensas Union West Carroll Richland (available summer 2017)</p> <p><u>Shreveport Area</u> Bienville Bossier Caddo Claiborne Natchitoches Red River Webster</p> <p><u>New Orleans Area (available Fall 2017)</u> Jefferson Orleans Plaquemines St. Bernard</p>