

NC Collaborative for Children, Youth and Families

DATE: January 24, 2019

Upcoming Pertinent Legislative Meetings:

Date and Time	Committee	Location Legislative Office Building (LOB) Legislative Building (LB) Audio link: https://www.ncleg.gov/Audio
January 27, 10:00 a.m.	Child Fatality Task Force- Unintentional Death Prevention Committee	1027/1128 LB, audio available

System of Care in the Tailored Care Management Provider Manual:

Drafted on December 5, 2019, [NCDHHS released a manual](#) with more specifics on how the care management function under the BH/IDD Tailored Plan will operate, be accountable, and serve members. Eligibility will be available continuously throughout enrollment for beneficiaries except where care management is already imbedded into the program/service and those members include:

- Individuals obtaining Assertive Community Treatment
- Individuals residing in Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Children participating in Care Management for At-Risk Children
- Children participating in the High Fidelity Wraparound program

[High fidelity wraparound](#) is a key service that is aligned with the guiding principles of System of Care and will become a focused means of addressing children’s behavioral healthcare needs.

As an umbrella to care management, each BH/IDD Tailored Plan will act as a federally-designated Behavioral Health Home, allowing federal Medicaid reimbursement. The BH/IDD Tailored Plan will assign members to a care manager through an AMH+, CMA, or Tailored Plan.

- Members can change this up to twice a year without cause or any time with cause.
- Assignments are made based on existing provider relationships the beneficiary has and even distribution of members across all acuity levels.

The BH I/DD Tailored Plan for children ages 3-21 will require additional assessments including Child and Family Teams and strengths assessments. The care manager (AMH+, CMA, or Tailored Plan) must establish a plan to engage providers outside of their practice. Care Management includes:

- Care coordination
- 24 hour coverage
- Annual physical exams
- Continuous monitoring
- Medication monitoring
- Individual and Family Supports
- Health promotion
- Annual physical exams

Lastly, the care manager will address any unmet health-related resources such as disability benefits, employment services, education, financial literacy, child welfare services, after-school programs, rehabilitative services, domestic violence services, and legal services. The care manager will also provide in-depth transition services to all members.

Federal Families First Prevention Services Act Updates:

On January 22, 2020, the Title IV-E Prevention Services Clearinghouse [released a directory](#) of the thirteen current prevention programs in different states. The database describes the differences between the programs, links to the legislation, and a summary of what these programs can do. This resource allows states to compare programs between themselves and track new ideas that can be implemented in North Carolina. North Carolina is noted as one of the programs, but the program is pending the approval of the state budget. Additionally, the Families First Transition Act has been introduced as a federal bill that would provide \$500 million to support states trying to implement the Families First Prevention Services Act. The pending changes to the federal act could offset planning, resource alignment, and program start-up costs, thus allowing a healthy sustainable system that isn't as reliant on congregate care and other foster care settings. This act also delays the requirement that 50% of the services need to be well-supported.

N.C. Bills we are tracking:

- [H5](#): Close the Medicaid Insurance Gap (see S3)
- [H76](#): School Safety Omnibus
- [H102](#): Enhance Permanency Innovation Institute (see S245)
- [H121](#): Expunction Related to Raise the Age/No Conviction
- [H234](#): Funds for Child Advocacy Centers
- [H241](#): Education Bond Act of 2019
- [H250](#): Dept. of Health and Human Services Revisions
- [H291](#): Continue Social Services Regional Supervision and Collaboration Work Group (SSWG) and Extend Children's Council

[H297](#): Psychologist Interjurisdictional Compact

[H434](#): Suicide Risk Ref./Mental Health/Teen Violence

[H471](#): Reduce Administrative Duplication MH/DD/SAS Providers

[H555](#): Medicaid Transformation Implementation, the Senate has withdrawn this bill from the calendar and re-referred it to the Senate Committee on Rules and Operations.

[H580](#): Increase Foster Care Rates/Funds (see S636)

[H601](#): Funds for NAMI North Carolina, Inc.

[H613](#): Essential Services for Homeless Youth

[H655](#): NC Health Care for Working Families, the bill was re-referred to the House Committee on Health, received a favorable committee substitute, and was re-referred to the House Committee on Rules, Calendar, and Operations.

[H702](#): Modify Juvenile Crime Prevention Councils (see S555)

[H822](#): Comprehensive Behavioral Health Plan, the bill has been sent to the Senate, passed the 1st Senate reading, and has been sent to the Senate Committee on Rules and Operations.

[H825](#): Strengthen Child Fatality Prevention System: passed first reading and referred to the House Committee on Health.

[H826](#): Standardized Assessment/Foster Care Pilot

[H956](#): Funds/Youth Villages and Other Purposes

[H966](#): 2019 Appropriations Act, this bill was placed on the calendar for January 14, 2020, withdrawn from the calendar and re-referred to the Senate Committee on Rules and Operations.

[S3](#): Close the Medicaid Insurance Gap (see H5)

[S175](#): Funds/Eliminate NC Pre-K Waitlist

[S212](#): NC Fast/Early Child/Transformation/ACH Assess., the conference committees have been appointed.

[S245](#): Enhance Permanency Innovation Institute (see H102)

[S251](#): Modernization of Drug Court Programs

[S361](#): Healthy NC, the Senate failed to concur on the health committee substitution, so the Senate and House have appointed committee conferees for the bill.

[S382](#): School Psychologist Compensation and Recruitment (see H482)

[S427](#): Smart Start Funds (see H124)

[S476](#): Compt-Based Assess. & Mental Health/Teen Viol., after over three months of inactivity, the bill has conference committees appointed in the House and the Senate.

[S549](#): Child Welfare/Behavioral Health Pilot/Funds

[S624](#): Guilford County Mental Health Facility /Funds (see H360)

[S636](#): Increase Foster Care Rates/Funds (see H580)

N.C. Bills that have been signed into law:

[H75](#): School Mental Health Screening Study, presented to the governor and signed into law as Ch. SL 2019-222.

[S199](#): Child Sex Abuse/Strengthen Laws, the bill was presented to the governor and signed into law on 11/7/19 as Ch. SL 2019 – 245.

[H301](#): CIP Revisions/Juvenile Code, signed by the governor on 6/21/19 as Ch. SL 2019-33.

[S413](#): Raise the Age Modifications, signed into law on 8/1/19 as Ch. SL 2019-186.

[H609](#): Once known as Raise the Age Modifications but now labeled Salary Increases/Adult Correctional Employees, the bill was presented to and signed by the governor as Ch. SL 2019-208.

[H656](#): Medicaid Changes for Transformation, signed into law by the Governor on 7/4/19 as Ch. SL 2019-81.

[H1001](#): Raise the Age Funding, ratified, presented to the governor and signed into law on 10/14/19 as Ch. SL 2019-229.

Upcoming Collaborative Mental Health Meetings:

Date and Time	Collaborative	Location
February 19, 10:00 – 3:00 p.m.	NC Child Well Being Transformation Council	544 LOB, audio available

Other Federal Bills to be aware of:

[S.1172](#): Keep Our Promise to America's Children and Teachers Act: read twice and referred to the Committee on Health, Education, Labor, and Pensions

[S. 1465](#): Childhood Outcomes Need New Efficient Community Teams: read twice and referred to the Committee on Finance

[S. 1642](#): Increasing Access to Mental Health in Schools Act: Read twice and referred to the Committee on Health, Education, Labor, and Pensions

[S. 1668](#): Defending Access to Mental Health Care Act: Read twice and referred to the committee on Health, Education, Labor, and Pensions

[S. 1670](#): Care Across Generations Act: read twice and referred to the Committee on Health, Education, Labor, and Pensions

[H.R. 1109](#): Mental Health Services for Students Act of 2019: Referred to the House Committee on Energy and Commerce

[H.R. 1301](#): Mental Health Telemedicine Expansion Act: Referred to the Subcommittee on Health

[H.R. 1395](#): Youth Mental Health Services Act of 2019: Referred to the House Committee on Education and Labor

[H.R. 1838](#): Social Security Child Protection Act of 2019: Referred to the House Committee on Ways and Means

[H.R. 2958](#): Increasing Access to Mental Health in Schools Act: Referred to the House Committee on Education and Labor

[H.R. 3116](#): State Flexibility for Family First Transitions Act: Referred to the House Committee on Ways and Means

[H.R. 2702](#): Family First Transition and Support Act of 2019: Referred to the House Committee on Ways and Means

[H.R. 3074](#): Continuing Access to Mental and Behavioral Health Care Act: referred to the House Committee on Energy and Commerce

[H.R. 3438](#): Child Welfare Data Modernization Act: Referred to the House Committee on Ways and Means

[H.R. 4025](#): Mental Health in Schools Excellence Program Act of 2019: Referred to the House Committee on Education and Labor.

[H.R. 4420](#): Timely Mental Health for Foster Youth Act: Referred to the Subcommittee on Worker and Family Support

[H.R. 4428](#): Greater Mental Health Access Act: Referred to the Subcommittee on Health

[H.R. 4602](#): Continuation of Useful Resources to States Act: Referred to the Subcommittee on Worker and Family Support

[H.R. 4835](#): Supporting Trauma-Informed Education Practices Act: referred to the House Committee on Education and Labor

[H.R. 5569](#): Early Childhood Mental Health Support Act of 2020: Referred to the House Committee on Education and Labor