

NC Collaborative for Children, Youth and Families

DATE: December 18, 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 10, 10:00 a.m.	Child Fatality Task Force- Intentional Death Prevention Committee	1027/1128 LB, audio available

North Carolina Child Well-Being Transformation Council 12/13 Meeting Review:

The meeting on December 13th featured three panels centering on the foster care system needs from the perspective of foster families, Guardians Ad Litem (GAL), and judges. After the foster family panel shared their experiences, the discussion following produced a few key points:

- Currently, the physical safety of the child is the focus of the courts at the sacrifice of a child's mental and emotional safety.
- Increased monitoring was suggested instead of removing kids from homes.
- There is a need for more trauma-informed and trained social workers.
- A time limit for CPS allegations must be implemented.
- Foster parents should have a bigger voice, influence, and rights when working with the social workers.
- Children are medicated for symptoms instead of treating the underlying issues, these are chronically related to trauma and adverse experiences.

The discussion with the Guardians Ad Litem (GAL) produced the following key points:

- The DSS staff need to be better trained in trauma-informed approaches.
- DSS needs to provide better care for the staff to minimize burnout and turnover.

The panel of judges created the following recommendations for improving foster care:

- There is a need for more mental health resources in every county. Some counties can afford resource judges while others cannot. To improve care, all counties must have equal resources in terms of operational care.
- Judges must be more trauma-informed.
- Using telemedicine for rural counties could be beneficial in treatment courts.

- The foster care system is not structured to have a focus on mental health from the beginning and it often is delayed until mental health is a big issue. This ends up costing more than had regular mental health care been part of the foster care system.
- There is no evaluation definition of performance. This is necessary for monitoring improvements in our push for evidence-based practices.
- Linking data of family members is useful for better understanding and caring for foster children.

Recap of the 12/3 Medicaid Transformation Pre-Con Symposium at i2i Center Conference:

Just days after the Secretary had made the announcement of suspended Medicaid managed care implementation, the symposium was packed with in-depth information on the current and future state of Medicaid in North Carolina.

Opening the day, Secretary of the NC Department of Health and Human Services, Dr. Mandy Cohen, focused on the Department's intention for the health and human services system in general. She noted that the DHHS priorities span plans for Early Childhood Action, Opioid Action and Medicaid Transformation. Dr. Cohen urged stakeholders to wait for the imminent managed care implementation and continue to prepare for this transition. She characterized the beginning of Medicaid managed care as not an "IF" but a "WHEN". Two themes for her vision of health care: timely access to high quality services and whole person centered care. She described addressing the whole person through:

- NCCARE360: Offers a way to coordinate all aspects of care across the state. She hopes this program will become operational statewide in 2020.
- The Medicaid Healthy Opportunities Pilots: \$650 million dollars in federal grants for pilots to help North Carolina broaden our Medicaid focus from just healthcare to non-medical drivers that include housing, food, transportation, and interpersonal violence.
- The Opioid Action Plan 2.0: Focuses on rehabilitating recently released prisoners.
- 2025 Goals At-A-Glance Early Childhood Action Plan: Seeks to create healthy, safe, learning environments for North Carolina's children.

Points made by other NC DHHS staff in the Pre-Con Symposium:

- LME/MCOs will be held to the same standards as the PHPs. It was noted that PHPs cannot be held to the same transparency standard as LME/MCOs because they are private entities.
- The geographical jurisdiction of Carolina Complete is now also available to region 4, the Triangle region.
- The oversight direction for the standard plans includes constant communication in the form of weekly meetings, contract compliance, and NCQA accreditation.

- The adequacy of the current network and the opportunity with the delay in implementation to build an even richer network of providers.
- In terms of readiness assessment, all efforts will be paused until a new implementation date with the exception of inbound deliverable review.
- Access to Medicaid services must be increased through creating healthy opportunities such as stable and safe housing. The Department will be releasing more grants to address this issue.
- Integration for individuals with BH/IDD will be improved.
- There is a need to improve the operational excellence of the system through standardization.
- Boundless behavioral health, reaching people throughout the state that need Medicaid services needs to be increased.
- The External Quality Review Organization, EQRO, requires PHPs to achieve NOQA Health Plan accreditation by year 3.
- The Quality Assessment and Performance Improvement measure will also be used to evaluate the tailored plans.
- The department will be creating a certification for AMHs to become AMH+s, responsible for oversight of individuals in the tailored plans.
- Another option for care management, CMAs, include Clinically Integrated Networks (CIN). These help facilitate care management when there is no need for IT or risk stratification.
- A Needs Hot Spot Map will be available to everyone to identify community resources
- The Healthy Opportunities Pilot will bring in up to \$650 million in pilot funding set up to test non-medical services using Medicaid money. Many initiatives are hosting pilot applications that are due January 21, 2020 with an anticipated award date of April 15, 2020.

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.

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

[H935](#): Social Services Reform/DHHS Recommendations, the bill has passed the third reading in the house, passed the first Senate reading, and referred to the Senate Committee on Rules and Operations.

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

[H966](#): 2019 Appropriations Act, this bill was 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)

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
December 12, 2:00 – 4:00 p.m.	B-3 Interagency Council	North Carolina Department of Transportation, Board Room 150, 1 S Wilmington Street, Raleigh
December 13, 10:00 a.m.-3:00 p.m.	NC Child Well Being Transformation Council	544 LOB, audio available