

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 2019

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BILL DRAFT 2019-NBz-66A [v.10]

(THIS IS A DRAFT AND IS NOT READY FOR INTRODUCTION)

7/22/2020 10:13:02 AM

Short Title: Social Services/Foster Care Reform/CWBTC.

(Public)

Sponsors:

Referred to:

A BILL TO BE ENTITLED

AN ACT TO DIRECT THE DEPARTMENT OF HEALTH AND HUMAN SERVICES TO CONDUCT VARIOUS STUDIES AND MAKE REFORMS TO IMPROVE SOCIAL SERVICES, THE FOSTER CARE SYSTEM, AND CHILD WELFARE SERVICES, TO IMPROVE INTERCOUNTY COLLABORATION BETWEEN DEPARTMENTS OF SOCIAL SERVICES, TO EXTEND THE SOCIAL SERVICES REGIONAL SUPERVISION AND COLLABORATION WORKING GROUP, AND TO SUPPORT THE IMPLEMENTATION OF THE FAMILY FIRST PREVENTION SERVICES ACT, AS RECOMMENDED BY THE NORTH CAROLINA CHILD WELL-BEING TRANSFORMATION COUNCIL.

The General Assembly of North Carolina enacts:

PART I. FOSTER CARE AND SOCIAL SERVICES REFORM

SECTION 1.(a) In order to ensure continuity of care for children in foster care who are nearing the age of eighteen, the Department of Health and Human Services, Division of Social Services (Department) shall develop policies and procedures to require coordination between counties for children who reside outside of the county that has custody of the child no later than 90 days after the child's 17th birthday. The policies and procedures shall ensure the child has a point of contact within the county that has custody of the child to assist the child with securing Medicaid and NC Health Choice program assistance and access physical and mental health services for which the child is eligible. The policies and procedures shall ensure children have, at a minimum, all of the following:

- (1) Educational plans.
(2) Employment plans.
(3) Mechanisms to ensure continuity and amplify services for children transitioning out of foster care.

SECTION 1.(b) Report. - The Department shall report to the Chairs of the Senate Appropriations Committee on Health and Human Services, and the Chairs of the House Appropriations Committee on Health and Human Services by February 1, 2021 on (i) its progress in developing and implementing the policies and procedures set forth in subsection (a) of this section, (ii) the method of disseminating the policies and procedures to all counties, and (iii) how the Department will ensure the implementation and utilization of all of the policies and procedures.



1           **SECTION 2.(a)** The Department of Health and Human Services, Division of Social  
2 Services shall develop policies and procedures to outline the permanency plan process and to  
3 require caseworkers in all county departments of social services to begin developing permanency  
4 plans no later than 90 days after the child's seventeenth birthday, and to finalize permanency  
5 plans no later than 15 days prior to transitioning out of foster care on a child's eighteenth birthday,  
6 as allowed by federal law. The Division shall study the current age of transitioning out of foster  
7 care, and evaluate whether the age of transition should be changed and the associated impacts,  
8 benefits, and outcomes.

9           **SECTION 2.(b)** Report. – The Department shall report to the Chairs of the House  
10 Appropriations Committee on Health and Human Services and the Chairs of the Senate  
11 Appropriations Committee on Health and Human Services by April 1, 2021 on the policies and  
12 procedures required under subsection (a) of this section and any recommended legislative  
13 changes necessary to modify the age of transition.

14           **SECTION 3.** The Department of Health and Human Services shall develop and  
15 implement a plan to encourage and keep foster children in community-based settings, including  
16 outpatient therapy, in-home services, and foster care, and avoid inappropriate residential  
17 behavioral health placements. The Department shall begin implementation of the plan by April  
18 1, 2021, and report to the Chairs of the House Appropriations Committee on Health and Human  
19 Services and the Chairs of the Senate Appropriations Committee on Health and Human Services  
20 on the implementation of the plan by July 1, 2021.

21           **SECTION 4.(a)** The Department of Health and Human Services shall study the  
22 statutory requirements of the social services system, juvenile justice system, and the Medicaid  
23 and NC Health Choice program applicable to children in foster care. The Department shall study,  
24 at a minimum, all of the following:

- 25           (1) Differences, consistencies, overlaps, and gaps in the State social services  
26 system, State juvenile justice system, and Medicaid and NC Health Choice  
27 programs, as applied to children in foster care.
- 28           (2) Challenges and solutions in systematic communications between local  
29 management entities/managed care organizations (LME/MCOs) and  
30 stakeholders.
- 31           (3) Federal and State funding streams associated with LME/MCOs, the State  
32 social services system, State juvenile justice system, and Medicaid and NC  
33 Health Choice programs, as applied to children in foster care.
- 34           (4) Benefits and challenges of the current managed care arrangement with  
35 LME/MCOs for providing services to children and their families.
- 36           (5) Options for replacement of the current system and any anticipated cost savings  
37 or anticipated requirements.

38           **SECTION 4.(b)** Report. – The Department shall report on the information required  
39 in subsection (a) of this section to the Joint Legislative Oversight Committee on Health and  
40 Human Services and the Joint Legislative Oversight Committee on Medicaid and NC Health  
41 Choice by February 1, 2022.

42           **SECTION 5.** The Department of Health and Human Services shall develop and  
43 identify standardized, trauma-informed assessment tools and require that only trained clinicians  
44 deemed as appropriate by the Department assess the applicability of the use of the tool in the  
45 treatment. The Department shall evaluate the costs and benefits of the implementation of the  
46 assessment tools, including training and administration costs, and costs associated with  
47 measuring ongoing fidelity of the tools and the data collection and analysis needed to perform  
48 fidelity monitoring. The Department shall report the results of the study to the Chairs of the  
49 House Appropriations Committee on Health and Human Services and the Chairs of the Senate  
50 Appropriations Committee on Health and Human Services by June 1, 2021.

51

**PART II. GUARDIANSHIP ASSISTANCE PROGRAM**

**SECTION 6.(a)** Guardianship Assistance Program. – The Department of Health and Human Services, Division of Social Services shall do all of the following as it applies to the Guardianship Assistance Program and the Kinship Care Program:

- (1) Define and implement oversight mechanisms for each program.
- (2) Increase the utilization of both programs across the State.
- (3) Explore the feasibility of reducing the age of children served by each program.
- (4) Reduce the age of eligibility of the Guardianship Assistance Program to age 12.
- (5) Provide recommendations for incentivizing use of each program, as appropriate, with corresponding cost estimates and anticipated outcomes.

**SECTION 6.(b).** Nothing in this section shall be construed or interpreted as guardianship replacing or supplanting permanency.

**SECTION 6.(c)** Report. -- The Department shall report to the Chairs of the House Appropriations Committee on Health and Human Services and the Chairs of the Senate Appropriations Committee on Health and Human Services on these activities by February 1, 2021.

**PART III. MEMORANDUM OF AGREEMENT FOR STAFFING**

**SECTION 7.(a)** The Department of Health and Human Services, Division of Social Services and the North Carolina Association of Regional Councils of Governments (Councils of Governments) shall explore entering into a memorandum of agreement to utilize Councils of Governments physical office space and office-related needs for Division of Social Services staff and facilitate cooperation between regions, and evaluate the estimated costs by region for the office space and sample agreements between the Division and the Councils of Governments.

**SECTION 7.(b)** Report. – The Division shall file a report that contains the estimated costs by region for office space and sample agreements, as described in subsection (a) of this section, to the Chairs of the House Appropriations Committee on Health and Human Services and the Chairs of the Senate Appropriations Committee on Health and Human Services by June 1, 2021.

**PART IV. FAMILY FIRST PREVENTION SERVICES ACT**

**SECTION 8.** Family First Prevention Services Act Report. – The Department of Health and Human Services shall compile a list of programs that qualify for federal reimbursement through the Family First Prevention Services Act (Division E, Title VII of Public Law 115-123) and submit a report to the Joint Legislative Oversight Committee on Health and Human Services beginning on December 1, 2021 and each year thereafter, until December 1, 2024. The annual report shall include all of the following:

- (1) Identification of federal funds obtained by the State for all qualifying programs and services.
- (2) Strategies to improve and expand the qualifying programs, where needed, across the State.

**PART V. CONFIDENTIALITY LAWS AS APPLIED TO INTER-COUNTY COLLABORATION AND DELIVERY OF SERVICES TO CHILDREN**

**SECTION 9.(a)** The Department of Health and Human Services, Division of Social Services (Division), shall conduct a study of all confidentiality laws that apply to State social services and programs. The Division shall request recommendations for any revisions that are necessary to improve inter-county cross-sector collaboration and delivery of services. The Division shall study, at a minimum, all of the following:

- 1 (1) All laws imposing confidentiality that apply to social services, including
- 2 G.S. 108A-80, 7B-302, 7B-2901, and Chapter 69 of the North Carolina
- 3 Administrative Code.
- 4 (2) Revisions necessary to accommodate the anticipated changes to the judicial
- 5 system's IT platform.
- 6 (3) Whether amendments to State law are necessary to facilitate improved
- 7 information sharing between child welfare and child support, and whether the
- 8 State should advocate for changes to current federal laws.
- 9 (4) Whether confidentiality laws applicable to the juvenile justice system are
- 10 sufficient to ensure that the information being shared between juvenile justice
- 11 and social services is adequate to provide the best service and support to
- 12 juveniles involved in both systems.

13 **SECTION 9.(b)** The Division shall consult with the Department of Public  
 14 Instruction, the Department of Public Safety, Division of Juvenile Justice, the Administrative  
 15 Office of the Courts, and the Department of Information Technology in the development of this  
 16 study.

17 **SECTION 9.(c)** The Division shall report the results of the study to the Chairs of the  
 18 House Appropriations Committee on Health and Human Services and the Chairs of the Senate  
 19 Appropriations Committee on Health and Human Services by June 1, 2021.

20  
 21 **PART VI. ELIMINATE PERMANENCY INNOVATION INITIATIVE OVERSIGHT**  
 22 **COMMITTEE**

23 **SECTION 10.** G.S. 131D-10.9A is repealed.

24  
 25 **PART VII. CONTINUE SOCIAL SERVICES REGIONAL SUPERVISION AND**  
 26 **COLLABORATION WORKING GROUP**

27 **SECTION 11.(a)** Part I of S.L. 2017-41 reads as rewritten:

28 **"SECTION 1.1.** Regional Supervision of and Collaboration by Local Social Services  
 29 Programs. –

- 30 ...
- 31 (3) The Department shall submit the plan to the Joint Legislative Oversight
- 32 Committee on Health and Human Services by November 15, 2018. The plan
- 33 shall provide for the system of regional supervision to be operational no later
- 34 than ~~March 1, 2020~~ August 1, 2022. The Department shall not implement the
- 35 plan without an act by the General Assembly.

36 **"SECTION 1.2.(a)** Social Services Regional Supervision and Collaboration Working  
 37 Group. – The School of Government at the University of North Carolina at Chapel Hill (SOG)  
 38 shall ~~convene a~~ continue the work of the Social Services Regional Supervision and Collaboration  
 39 Working Group (Working Group) to make recommendations to and provide oversight of the  
 40 Department regarding the regional supervision and collaboration plan. The Working Group shall  
 41 consist of the currently constituted members as of December 1, 2018.

42 **"SECTION 1.2.(b)** Composition. – The Working Group shall consist of the following  
 43 members:

- 44 (1) Three members ~~of the Senate~~ appointed by the President Pro Tempore of the
- 45 Senate, one of whom shall be designated as a cochair.
- 46 (2) Three members ~~of the House of Representatives~~ appointed by the Speaker of
- 47 the House of Representatives, one of whom shall be designated as a cochair.

48 ...

49 **"SECTION 1.2.(b1)** Vacancy. – A vacancy on the Working Group created by death,  
 50 resignation, or otherwise, shall be filled in the same manner as the original appointment.

51 ...

1 "SECTION 1.2.(d) Duties. – The Working Group shall continue to develop  
2 recommendations for the regional supervision and collaboration plan required by Section 1.1 of  
3 this act. The Working Group shall ~~divide its work into two stages, the first~~ continue to (i) address  
4 regional supervision and ~~the second to~~ (ii) address interagency collaboration and regionalization.

5 (1) Stage One. – The Working Group shall convene ~~its first meeting~~ no later than  
6 ~~October 6, 2017. During the first stage, the Working Group shall develop~~  
7 October 4, 2019, and continue developing recommendations regarding:

- 8 a. The size, number, and location of the regions. Recommendations shall  
9 take into consideration (i) the need for regions to maintain direct, local  
10 connections with the jurisdictions they serve; (ii) alignment with other  
11 regional organizations that intersect with the work of social services,  
12 as appropriate; and (iii) awareness of the cultural differences and  
13 similarities between regions.
- 14 b. The allocation of responsibility between the central, regional, and local  
15 officials in supervising and administering the social services programs  
16 and services.
- 17 c. Methods for holding the regional offices accountable for performance  
18 and responsiveness.
- 19 d. Requirements for the regional offices to share information about local  
20 departmental performance with the relevant board or boards of county  
21 commissioners, county or regional board of social services, or  
22 consolidated human services board.
- 23 e. Options for authorizing the board of county commissioners to  
24 intervene in urgent situations to assume direct control of the  
25 department of social services at the local level prior to the State  
26 assuming control of service delivery pursuant to G.S. 108A-74.
- 27 f. Any other issues related to regional supervision identified by the  
28 cochairs.

29 (2) Stage Two. – ~~During the second stage, the~~ The Working Group shall:

- 30 a. Develop recommendations regarding legislative and regulatory  
31 changes necessary to improve collaboration between counties in the  
32 administration of social services programs and services. Recommendations shall address, at a minimum, information sharing,  
33 conflicts of interest, and intercounty movement of people enrolled in  
34 programs or receiving social services.
- 35 b. Develop a vision for transitioning the State from a  
36 county-administered system to a regionally administered system. The  
37 vision shall identify general benefits and challenges associated with  
38 making such a transition.

39 (3) Stage Three. – After completing the work in Stages One and Two, the  
40 Working Group shall:

- 41 a. Review the recommendations from the Center for the Support of  
42 Families and the Department. After reviewing both reports, the  
43 Working Group shall revise the Stage One recommendations  
44 regarding regional supervision.
- 45 b. Provide more detailed recommendations regarding the following:
- 46 1. The role of local elected officials and social services governing  
47 boards in social services oversight.
- 48 2. Legal representation of local social services agencies.
- 49 3. Managing conflicts of interest.
- 50

- 4. Determining residency for social services programs and services.
- 5. Transferring and changing venue in adult guardianship cases.
- 6. Notice requirements for adult guardianship cases.
- 7. Confidentiality of social services records, as it relates to improving interagency collaboration and service delivery.
- c. Conduct a study regarding appointments of and funding for publicly funded guardians. The study must include all of the following:
  - 1. A description of the current types of appointments of publicly funded guardians.
  - 2. An evaluation of the effectiveness of the various types of publicly funded guardians.
  - 3. Recommendations for management of publicly funded guardians.

**"SECTION 1.2.(e) Reports. –**

- (1) Stage One. – The Working Group shall submit a report to the Joint Legislative Oversight Committee on Health and Human Services (Committee) and the Department at the conclusion of Stage One, which shall be no later than April 15, 2018. After receiving the Stage One report, the Committee may terminate the Working Group if it concludes that the Working Group is not making sufficient progress.
- (2) Stage Two. – The Working Group shall submit a report to the Committee and the Department at the conclusion of Stage Two, which shall be no later than February 1, 2019.
- (3) Stage Three. – The Working Group shall submit a preliminary report to the Committee no later than April 15, 2021, providing an update on its continued work. After receiving the preliminary report, the Committee may terminate the Working Group if it concludes the Working Group is not making sufficient progress. The Working Group shall submit a final report of its recommendations to the Committee no later than February 1, 2022, and shall terminate upon the final report.

...."

**SECTION 11.(b)** If House Bill 291, 2019 Regular Session, becomes law, then Section 1 of that act, amending Part I of S.L. 2017-41, is repealed.

**SECTION 11.(c)** If House Bill 935, 2019 Regular Session, becomes law, then Section 7 of that act, amending Part I of S.L. 2017-41, is repealed.

**PART VIII. ANNUAL NOTIFICATION FOR SCHOOL SOCIAL WORKERS REGARDING COMPULSORY ATTENDANCE REQUIREMENT FOR CHILDREN UNDER AGE SEVEN**

**SECTION 12.(a)** G.S. 115C-378(a) reads as rewritten:

"(a) Every parent, guardian or custodian in this State having charge or control of a child between the ages of seven and 16 years shall cause the child to attend school continuously for a period equal to the time which the public school to which the child is assigned shall be in session.

(a1) Every parent, guardian, or custodian in this State having charge or control of a child under age seven who is enrolled in a public school in grades kindergarten through two shall also cause the child to attend school continuously for a period equal to the time which the public school to which the child is assigned shall be in session unless the child has withdrawn from school. No later than August 15 of each year, the Department of Public Instruction shall notify all school social workers employed in a public school of the attendance requirement provided in this subsection."

- 1           **SECTION 12.(b)** This section is effective when it becomes law.  
2 **PART IX. EFFECTIVE DATE**  
3           **SECTION 13.** This act is effective when it becomes law.

GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2019

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BILL DRAFT 2019-NBza-69 [v.12]

(THIS IS A DRAFT AND IS NOT READY FOR INTRODUCTION)

7/1/2020 3:28:05 PM

Short Title: Social Services Reform/CWBTC.

(Public)

Sponsors:

Referred to:

A BILL TO BE ENTITLED

AN ACT TO IMPLEMENT VARIOUS PROVISIONS RELATED TO SOCIAL SERVICES REFORM AND MAKE APPROPRIATIONS TO TRANSITION TO REGIONAL SUPERVISION, AS RECOMMENDED BY THE NORTH CAROLINA CHILD WELL-BEING TRANSFORMATION COUNCIL.

The General Assembly of North Carolina enacts:

**SECTION 1.(a)** In accordance with the plan submitted by the Social Services Regional Supervision and Collaboration Working Group (SSWG) in its report on March 31, 2019, to the Joint Legislative Oversight Committee on Health and Human Services as required by S.L. 2017-41 (Rylan's Law), the Department of Health and Human Services (Department) shall establish seven regions for regional supervision of child welfare and social services and begin providing oversight and support within those regions through State regional staff and the central office team by March 1, 2021. To that end, the Department shall move forward, pursuant to existing authority, with repurposing and redeploying (i) positions identified in the report to support regionalization and (ii) all managerial staff needed to support regionalization in the central office. The Department shall pursue procurement of physical offices within each of the seven regions beginning in March 2022 and shall prioritize staffing to improve the child welfare system. The Department shall move towards full implementation of a regional model, with offices, by March 1, 2023.

**SECTION 1.(b)** There is appropriated from the General Fund to the Department of Health and Human Services, Division of Social Services, the sum of nine hundred fourteen thousand seven hundred ninety dollars (\$914,790) recurring funds for the 2020-2021 fiscal year to support 11 new staff positions to improve regional supervision and support of child welfare services pursuant to the plan as described under subsection (a) of this section.

**SECTION 1.(c)** If House Bill 966, 2019 Regular Session, becomes law, then any provision of that act, or the Committee Report described in that act, appropriating or allocating funds to the Department of Health and Human Services to support 11 new staff positions to improve regional supervision and support of child welfare services pursuant to subsection (a) of this section is repealed.

**SECTION 1.(d)** This section becomes effective July 1, 2020.

**SECTION 2.(a)** G.S. 108A-9 reads as rewritten:

**"§ 108A-9. Duties and responsibilities.**

The county board of social services shall have the following duties and responsibilities:

...





(4a) To attend education and training sessions provided for new board members during the first year they serve on the board.

...."

**SECTION 2.(b)** The Department of Health and Human Services, Division of Social Services, shall collaborate with key stakeholders, including the North Carolina Association of County Boards of Social Services, Association of North Carolina County Social Services Directors, North Carolina Association of County Commissioners, and the University of North Carolina School of Government, to create formal education and training sessions for new county boards of social services members in accordance with G.S. 108A-9(4a), as provided in subsection (a) of this section. The education and training sessions shall include a segment on the potential liabilities of the county board of social services. The education and training sessions shall be available statewide by September 1, 2020.

**SECTION 2.(c)** Section 2(b) of this act is effective when it becomes law. Section 2(a) of this act becomes effective April 1, 2021, and by April 1, 2023, all current county board of social services members must have participated in the education and training sessions provided in G.S. 108A-9(4a).

**SECTION 3.** If House Bill 935, 2019 Regular Session, becomes law, then Sections 1 and 4 of that act, are repealed.

**SECTION 4.** Except where otherwise provided, this act is effective when it becomes law.

GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2019

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BILL DRAFT 2019-MRz-141A [v.6]

(THIS IS A DRAFT AND IS NOT READY FOR INTRODUCTION)  
06/12/2020 10:14:55 AM

Short Title: Child Well-Being Trans. Council/Medicaid Recs. (Public)

Sponsors:

Referred to:

1 A BILL TO BE ENTITLED  
2 AN ACT TO ENSURE INCREASED AWARENESS OF SCHOOL-BASED HEALTH  
3 SERVICES THAT ARE REIMBURSABLE UNDER NORTH CAROLINA'S MEDICAID  
4 STATE PLAN AND TO REQUIRE THE PROGRAM EVALUATION DIVISION TO  
5 EVALUATE THE SUCCESS OF THE INTEGRATED CARE FOR KIDS MEDICAID  
6 PILOT PROGRAM, AS RECOMMENDED BY THE NORTH CAROLINA CHILD  
7 WELL-BEING TRANSFORMATION COUNCIL.

8 The General Assembly of North Carolina enacts:

9  
10 **PART I. SCHOOL-BASED SERVICES REIMBURSABLE UNDER NORTH**  
11 **CAROLINA'S MEDICAID STATE PLAN**

12  
13 **SECTION 1.** The Department of Health and Human Services, Division of Health  
14 Benefits (DHB), shall develop and implement a plan to work with the Department of Public  
15 Instruction, local education administrative units, and local management entities/managed care  
16 organizations (LME/MCOs) to ensure increased awareness of school-based health services,  
17 beyond Individualized Education Program (IEP) services, that are reimbursable under North  
18 Carolina's Medicaid State Plan. The plan shall include an assessment of the feasibility of  
19 enhanced rates and other mechanisms that encourage private agencies to provide school-based  
20 health services to students who are receiving or who are eligible to receive Medicaid and NC  
21 Health Choice benefits. DHB shall submit this plan and any recommended legislative changes to  
22 implement the plan to the Joint Legislative Oversight Committee on Medicaid and NC Health  
23 Choice, the Chairs of the Senate Appropriations Committee on Health and Human Services, and  
24 the Chairs of the House of Representatives Appropriations Committee on Health and Human  
25 Services no later than August 1, 2021.

26  
27 **PART II. INTEGRATED CARE FOR KIDS MEDICAID PILOT PROGRAM**

28 **SECTION 2.** The Joint Legislative Program Evaluation Oversight Committee shall  
29 revise the 2023-2024 work plan for the Program Evaluation Division to include an evaluation of  
30 the success of the Integrated Care for Kids (InCK) Medicaid pilot program. This evaluation shall  
31 include, at a minimum, the following components:

- 32 (1) The empirical benefits achieved thus far in implementation of the InCK  
33 Medicaid pilot program, including any benefits related to the use of telehealth.
- 34 (2) The feasibility of expanding the InCK Medicaid pilot program.



1                   (3)    The anticipated cost savings and requirements for expanding the pilot  
2                                    program.  
3            The Program Evaluation Division shall submit its evaluation to the Joint Legislative Program  
4    Evaluation Oversight Committee no later than March 1, 2025.  
5                    **SECTION 3.** This act is effective when it becomes law.