

# DRAFT Jan. Advocacy Meeting 2021 – N.C. General Assembly

## Social Services Consortium Priorities

### 1. Provide adequate funding at the local departments of social services for adult protective services and guardianship. Ensure greater protection of this population by evaluating current state laws while also improving behavioral health services for vulnerable, older and disabled adults.

- North Carolina's elderly and disabled adult populations deserve a system where they are guaranteed the basic necessities of life and where they can be safe, especially during the current Coronavirus (COVID-19) pandemic.
  - Support state funding and specialized training for the Adult Protective Services, Guardianship and Adult Home Specialist workforce providing services to vulnerable adults living in private settings, nursing home care and assisted living facilities.
- In SFY 2020 \$31.4 million was expended for Adult Protective Services. Federal Social Services block grant funded 18.5% and Counties funded the remaining 81.5%. No state funds were invested into adult protective services. (Aligned with NC Coalition on Aging)
- In SFY 2018, \$26.3M was expended on Public Guardianship and of that amount 0.3% was state funds, 56.6% county and 43.1% federal. Caseloads statewide have increased 50%. (requested updated from NC DAAS)
- Support NCACDSS "Road Map for Program Improvement" for addressing the needs of aging and disabled adults.

### 2. Amend applicable General Statutes regarding Medicaid Eligibility Determination and apply a cap for claims against county departments of social services. Ensure a state level appeals process prior to an assessment for reimbursement.

- Apply a federal accuracy rate threshold as a baseline for counties.
- Implement an appeal process for counties prior to implementing claims for reimbursements and allow for waivers if a county can demonstrate financial hardship.
- Place cap on per member, per month chargeback amount at 5% or \$5,000 per ineligible case whichever is less.

### 3. Preserve Federal and State Block Grants for county administered programs (TANF, SSBG, CSBG, CCDBG, HCCBG), oppose unfunded mandates, and prevent unnecessary workload increases to counties (including shifting state responsibilities to counties).

- Federal DHHS Block Grants should be used to support the programs and services for which the grants were originally established. The existing state funds appropriated for the related programs should not be reduced and replaced with any additional block grants the State receives.

### 4. As NC implements Medicaid Transformation and Tailored Plans ensure greater protection and services for foster children and vulnerable adults with high intensity behavioral health needs.

- Adequate, timely and appropriate clinical services that prevent foster children and vulnerable adults boarding in inappropriate care settings such as hotels, county office buildings and hospital emergency rooms while awaiting mental health residential services.
- Expand the definition of disinterested public guardians to include experts specifically trained to best provide services for vulnerable adults with complex and chronic mental health needs.