

# Henderson County Department of Social Services



Henderson County Board of Social Services  
1200 Spartanburg Highway Hendersonville, NC 28792  
April 20<sup>th</sup>, 2021 @ 12:00 PM

## Agenda

- Call to Order.....Dr. Jennifer Hensley, Board Chair
- Public Input..... Dr. Jennifer Hensley, Board Chair
- Adjustments to the Agenda..... Dr. Jennifer Hensley, Board Chair
- Approval of the March 16<sup>th</sup>, 2021 Minutes\* .....Dr. Jennifer Hensley, Board Chair
- Board Education – Medicaid Transformation Update..Jillian Humphries, IM Program Administrator
- Reports (Questions Only)
  - Director’s Rpt./Statistical Rpt./EOM/3<sup>rd</sup> Qtr. Personnel Rpt.....Jerrie McFalls, Director
  - Program Administrators Report..... Jillian Humphries, Joe Maxey, Lorie Horne
- Old Business
  - COVID-19 Agency Impact Update.....Jerrie McFalls, Director
- New Business
- Adjournment (Next meeting: May 18<sup>th</sup>, 2021 at 12:00 PM) .....Dr. Jennifer Hensley, Board Chair

\* Designates Board Action Necessary

### Henderson County Board of Social Services Mission Statement

*To provide services that will improve the safety, health, well-being, independence, and quality of life for the residents of Henderson County.*

# Henderson County Board of Social Services

## April 20<sup>th</sup>, 2021 Regular Meeting Minutes

### A. Call to Order

The Henderson County Board of Social Services meeting was called to order by Board Chair Dr. Jennifer Hensley at 12:02 pm.

Board Members Present	Dr. Jennifer Hensley, Chair Melinda Lowrance, Vice-Chair Judy Smith, Member Margaret Stone, Member Josh Simpson, Member
Staff Leadership Present	Jerrie McFalls, Secretary to the Board/Director Lorie Horne, Social Work Program Administrator Joseph Maxey Jr., Administrative Officer Jillian Humphries, Economic Services Program Administrator Karen Vale, Clerk to the Board
Guest	None

### B. Public Input

None

### C. Adjustments to the Agenda

None

### D. Approval of Minutes

Dr. Hensley asked if there were any changes to the minutes from the March 16<sup>th</sup>, 2021 meeting, there were none. Mrs. Stone made a motion to approve the minutes, Mr. Simpson seconded the motion. All Board members agreed, and the motion passed.

Director McFalls distributed lapel pins to Board members in recognition of Child Abuse Prevention Month.

### E. Board Education

#### **Medicaid Transformation Update**

Income Maintenance Program Administrator Jillian Humphries shared information on the renewed Medicaid Transformation plan from the North Carolina Department of Health and Human Services (NC DHHS). The NC General Assembly enacted Session Law 2015-245 which directed DHHS to transition Medicaid and NC Health Choice from fee-for-service to Managed Care. DHHS originally began this transition in 2019; but when the NC General Assembly was unable to pass funding for the program during their budget process, the process stopped. IM PA Humphries distributed several handouts with the current information (**Attachments I – III**). New to this Medicaid Transformation roll-out is the inclusion of the Eastern Band of Cherokee Indians (EBCI) Tribal Option. This option will only be available to federally recognized tribal members or others eligible for services through Indian Health Services (IHS) who live in Cherokee, Graham, Haywood, Jackson, or Swain County. Eligible members in the following counties may opt in: Buncombe, Clay, Henderson, Macon, Madison, and Transylvania. Open enrollment began on March 15, 2021 and will end on May 14, 2021; coverage will begin on July 1, 2021. Currently only 5% of the eligible participants are enrolled. NC DHHS will begin auto-enrollment on May 15, 2021 and participants will have until September 30, 2021 to make changes to their plan. Vice-Chair

Lowrance asked if Pisgah Legal Services were involved in the sign-ups this time. Ms. Humphries responded that they are not and only the local broker can assist people with signups. Chair Hensley asked who was responsible for hiring the local brokers, Ms. Humphries responded that NC DHHS contracted with Maximus to hire local brokers. Director McFalls added that we do not know yet which providers are enrolled, and the fee schedule has not been published. Ms. Humphries added that we have not heard any complaints about the sign-up process or issues with the broker. The IMC 2/Interpreter working in the E-Pass area has been assisting clients with completion of the packet and then ensuring it is mailed to the correct address. Henderson County has 13,956 citizens moving into managed care and only 608 have currently signed up, approximately 4.63%. Medicaid transportation will also be impacted through this program. Henderson County will still have many clients to oversee for Medicaid transportation, the bigger impact on our clients will not be felt until July 1, 2022. Chair Hensley asked who was paying for the additional perks as part of each insurance providers plan, Ms. Humphries responded that the insurance companies are responsible for their additional perks.

## F. Reports

### **Director's Monthly Report (Attachment IV)**

Director McFalls highlighted the upcoming training offered by the UNC School of Government for Social Service Board members. The training will take place via Zoom on August 5<sup>th</sup> & 6<sup>th</sup>. Karen will register any board member that would like to attend.

Administrative Officer Joe Maxey reviewed changes made to the FY 21-22 DSS Budget that was approved by the Board in March. After the budget was submitted to the County Budget Office, several changes were suggested (**Attachment VI**). DSS Administration is comfortable with the changes suggested.

Chair Hensley asked for further information on the increase to account number 526201, Technology (Capital and Non-Capital). The approved budget had \$572,005 and the recommended amount from the County Budget Office is \$609,405. Mr. Maxey explained that County IT has provided updated costs to the original number and added 11 laptops for DSS staff. DSS Administration met with County IT Director Mark Seelenbacher on April 19<sup>th</sup> to discuss a list of items. Director McFalls shared that the meeting went well, and that Mark has committed two additional IT staff to be trained as back-ups to cover DSS systems when Daryl Williams is unavailable.

### **April Employees of the Month (Attachment V)**

No Discussion

### **March 2020-March 2021 Statistical Report (Attachment VII)**

Chair Hensley asked if the increase in Child Support Collections could be attributed to the offset from stimulus payments, Director McFalls responded that stimulus payments as well as federal tax refunds can be offset to cover past due accounts in Child Support.

Director McFalls added that the increase in CPS Investigations Initiated can be attributed to the return of in-person learning at Henderson County schools, and increased participation in after school programs.

The investigations are returning to pre-pandemic numbers. The increase in APS Open Cases cannot be explained as easily. Most of the reports received are due to self-neglect.

**3<sup>rd</sup> Quarter Personnel Report (Attachment VIII)**

Chair Hensley asked if HC DSS was encountering any issues in trying to hire for vacant positions. Director McFalls responded that applications for social work positions are down, but qualified applications for IMC 2's have been on the rise. HC continues to have a lower hourly rate for social workers compared to Buncombe County and Transylvania County. Applicants have commented about the great benefit package we offer.

Director McFalls shared with the Board that she has been invited to participate with other community leaders and staff from Blue Ridge Community College on utilizing a grant BRCC received to attract adult learners. Throughout the pandemic, many manufacturing corporations replaced entry level workers with robotic programs and will not be hiring workers back as the pandemic ends. BRCC has scholarships available for adults to learn another trade that will prepare them for the changing workforce.

**April Program Administrator's Report (Attachment IX)**

No Discussion

G. Old Business

**COVID-19 Agency Impact**

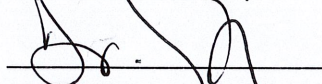
Director McFalls states that HC DSS has two staff continuing to work at home. One will return to the building on 5/17 and the second on 6/1. We have seen a significant drop in COVID exposure cases with staff, as of today we have zero staff in a COVID protocol.

H. New Business

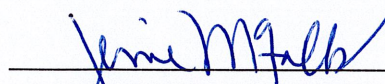
None

I. Adjournment

Chair Hensley asked if there was any more topics for discussion, Clerk Karen Vale asked that the Board review the HC DSS Rules of Procedure for the next meeting. The rules were approved in July 2013 and it was a good time to review and update if necessary. Director McFalls added that members should look at the rules for remote attendance based on the pandemic for any changes. Mrs. Vale also reminded the board that Mrs. Smith's term will expire on 6/30/21 and that her position as the 5<sup>th</sup> member is appointed by the remaining four board members. Mrs. Vale provided an application to Mrs. Smith for completion if she is willing to serve another term. Vice-Chair Lowrance made a motion to adjourn the meeting, Mr. Simpson seconded the motion. All were in favor and the motion passed. The meeting was adjourned at 12:57 pm.

 \_\_\_\_\_ 5/18/21

Dr. Jennifer Hensley, Chair Date

 \_\_\_\_\_ 5/18/21

Jerrie McFalls, Secretary to the Board Date

Attachments:

- I. Fact Sheet Introduction to Medicaid Transformation: Part 1 – Overview
- II. Fact Sheet Introduction to Medicaid Transformation: Part 2 – Enrollment & Timelines
- III. Health Plan Choice Guide – SAMPLE
- IV. Director’s Report – April 2021
- V. Employees of the Month – April 2021
- VI. Changes to FY 21-22 Budget
- VII. Statistical Report – March 2020 to March 2021
- VIII. Personnel Report – 3<sup>rd</sup> Quarter January 2021 to March 2021
- IX. Program Administrators Report – April 2021
- X. Year to Date Financials – 9 Month Report

# Fact Sheet

## Introduction to Medicaid Transformation: Part 1 – Overview

### County Playbook: NC Medicaid Managed Care

#### What is Medicaid Transformation?

Medicaid Transformation is changing the way most people receive Medicaid services. In 2015, the NC General Assembly enacted Session Law 2015-245, which directed the Department of Health and Human Services (DHHS) to transition Medicaid and NC Health Choice from fee-for-service to Managed Care.

Under the fee-for-service model, DHHS reimbursed physicians and health care providers based on services provided or procedures ordered. This model will now be known as **NC Medicaid Direct**. Some people will stay in NC Medicaid Direct.

Under Managed Care, the State is contracting with insurance companies, called Prepaid Health Plans or PHPs. These PHPs will be paid a capitated rate, which is a pre-determined set rate per person to provide health care services. This model is known as **NC Medicaid Managed Care**. Approximately 1.6 million of the current 2.3 million Medicaid beneficiaries will transition to NC Medicaid Managed Care.

In addition, DHHS is contracting with the Cherokee Indian Hospital Authority (CIHA) to support the Eastern Band of Cherokee Indians (EBCI) in addressing the health needs of American Indian/Alaskan Native Medicaid beneficiaries. This new delivery system, the **EBCI Tribal Option**, will manage the health care for North Carolina's approximate 4,000 Tribal Medicaid beneficiaries primarily in Cherokee, Graham, Haywood, Jackson, and Swain counties.

#### CHANGES FOR MEDICAID BENEFICIARIES

NC Medicaid Managed Care will bring changes for most Medicaid beneficiaries.

- Medicaid services will be administered and reimbursed by health plans.
- Beneficiaries will be able to choose a health plan and primary care provider (PCP). A new support system will be available to help beneficiaries make a choice.

- Medicaid services will not change, but health plans (including the EBCI Tribal Option) may offer enhanced services to plan members.
- Medicaid eligibility rules and processes **will not** change because of Medicaid Transformation.

Local Departments of Social Services (DSS) will have materials to share with beneficiaries about the changes. Current beneficiaries will receive information by mail that outlines actions to be taken, when to take those actions, and who they can contact for assistance.



## KEY TERMS YOU SHOULD KNOW

**ELIGIBILITY** refers to whether a person qualifies for Medicaid or NC Health Choice.

**ENROLLMENT** is the process of joining a health plan that is responsible for that person's Medicaid health coverage.

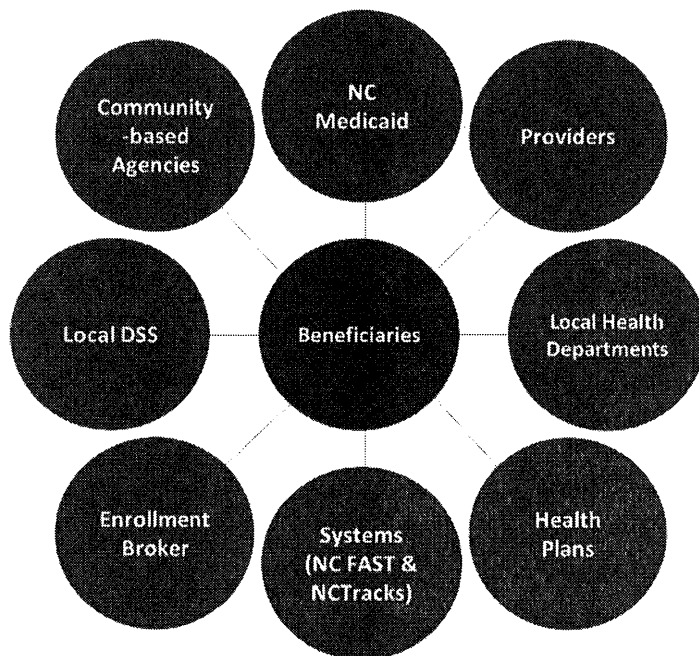
**BENEFICIARY** refers to a person who is eligible for Medicaid or NC Health Choice. Once a beneficiary enrolls in a health plan, he or she becomes a **MEMBER** of that health plan.

Within NC Medicaid Managed Care, there are **STANDARD PLANS** (members will benefit from integrated physical and behavioral health services) and **TAILORED PLANS** (specialized plans that offer integrated services for members with significant behavioral health needs and intellectual/developmental disabilities). Tailored Plans are expected to launch July 1, 2022.

**EBCI TRIBAL OPTION** is the health plan that will be available to federally recognized tribal members and others eligible services through Indian Health Service (IHS).

NC Medicaid determines the populations in Managed Care who will enroll in a health plan.

## KEY PARTNERS AND THEIR ROLES



**Beneficiaries** are at the center of the transition to Managed Care. Partners need to work together to support beneficiaries during and after the transition to Managed Care.

MUST ENROLL	CANNOT ENROLL	MAY ENROLL
Required to enroll in a health plan.	Stays in NC Medicaid Direct.	May enroll in a health plan or stay in NC Medicaid Direct.
Most Family & Children's Medicaid, NC Health Choice, Pregnant Women, Non-Medicare Aged, Blind, Disabled.  (MANDATORY)	Family Planning Program, Medically Needy, Health insurance premium payment (HIPP), Program of all-inclusive care for the elderly (PACE), Refugee Medicaid  (EXCLUDED*)	Federally recognized tribal members, beneficiaries who would be eligible for behavioral health tailored plans (until they become available)**  (EXEMPT)

\*Some beneficiaries are temporarily excluded and become mandatory later. This includes dually-eligible Medicaid/Medicare, Foster Care/Adoption, Community Alternatives Program for Children (CAP-C), and Community Alternatives Program for Disabled Adults (CAP-DA).

\*\*Target launch date for Tailored Plans is July 1, 2022.

- **NC Medicaid:** Provides NC Medicaid Direct supervision and oversight of health plans and other partners
- **Local DSS:** Determine Medicaid eligibility, update beneficiary information, and Medicaid eligibility case management
- **NC FAST & NCTracks:** Transmit beneficiary information; NC FAST remains the system of record for beneficiary information
- **Enrollment Broker:** Acts as an unbiased, third-party entity to provide enrollment assistance and help in choosing a health plan and PCP; provides outreach and education to beneficiaries
- **Health Plans:** Provide health care and ensure related services are available to their members; inclusive of Prepaid Health Plans (PHPs) and the EBCI Tribal Option
- **Providers:** Contract with health plans; must be enrolled as a Medicaid and/or NC Health Choice provider
- **Local Health Departments:** Provide services under NC Medicaid Direct and may contract with health plans for some services
- **Community-based Agencies:** Disseminate information to help educate the public on changes to Medicaid and provide feedback to DHHS from clients they serve
- **NC Medicaid Ombudsman:** Resolves beneficiary issues and directs beneficiaries to the right resource.

## WHAT DOES MEDICAID TRANSFORMATION MEAN FOR YOU?

The local DSS will be impacted by Medicaid Transformation. As with beneficiaries, many things will stay the same, but some things will change. This playbook is one tool to help you understand what is changing. NC Medicaid will continue to provide training for each local DSS to help you stay informed and learn how to help beneficiaries.

**DSS Directors** should be aware of timelines associated with Medicaid Transformation and ensure that related information and communications (like these Fact Sheets) are shared with county partners and staff. All staff who interact with beneficiaries should be aware of Medicaid Transformation and the changes it brings. Directors can contribute to the success of this initiative by ensuring staff participate in upcoming Medicaid Transformation training, interact and collaborate with County Liaison Specialists from the Enrollment Broker and DSS Liaisons with the health plans, and champion this change. Be on the lookout for “**BUDGET CONSIDERATIONS**” in other Fact Sheets to help facilitate conversations about budgeting.

**DSS Program Managers and Supervisors** have a similar role. We encourage you to provide staff with opportunities to participate in training, discuss upcoming changes with your teams, and work to understand the role

of the Enrollment Broker and health plans. Share information and materials with your staff as it becomes available and participate in Medicaid Transformation training.

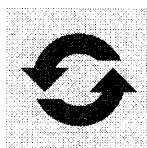
**DSS Direct Line Staff** should actively participate in training and be prepared to answer beneficiary questions related to Medicaid Transformation. You will not know all the answers – the best customer service you can provide is to direct beneficiaries and members to the right place. A goal of NC Medicaid is to support you with the information you need.

Please make a point to update contact information at **every interaction** with beneficiaries! NC FAST will remain the system of record for beneficiary information. Keeping addresses up-to-date is very important.

Please see below for a summary of how the role of the local DSS will change.

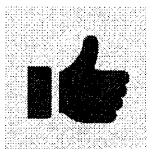
More information on key dates and milestones within Medicaid Transformation are provided in the **Introduction to Medicaid Transformation: Part 2 – Enrollment & Timelines Fact Sheet**.

### County DSS will CONTINUE:



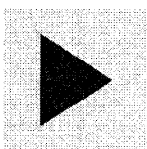
- Processing Medicaid applications, changes, and redeterminations.
- Generating replacement Medicaid cards for NC Medicaid Direct and EBCI Tribal Option members.
- Providing Non-Emergency Medical Transportation (NEMT) services for NC Medicaid Direct and EBCI Tribal Option members.
- Updating Primary Care Provider (PCP) for NC Medicaid Direct and EBCI Tribal Option members.

### County DSS will NOT be responsible for:



- Choice counseling to help beneficiaries choose a health plan.
- Enrolling beneficiaries in health plans.
- Providing NEMT services for Prepaid Health Plan (PHP) members.
- Updating health plan or PCP for PHP members.
- Generating replacement health plan ID cards for PHP members.

### County DSS will START:



- Referring beneficiaries to the Enrollment Broker for health plan choice counseling and enrollment assistance.
- Referring beneficiaries to their health plan for PCP updates, NEMT, and other requests related to their health plan.



## PRIORITIES FOR DAY 1 OF MANAGED CARE

In the transition to an innovative Managed Care program, NCDHHS' priority for day 1 is that individuals get the care they need, and providers get paid.

- A member's prescription will be filled by the pharmacist.
- Members know their chosen or assigned health plan.
- Members have timely access to information and are directed to the right resource.
- Health plans have sufficient networks to ensure member choice.
- A provider enrolled in Medicaid prior to the launch of NC Medicaid Managed Care will still be enrolled.
- Calls made to call centers are answered promptly.

Fact Sheets will be updated periodically with new information. Created 12/7/2020.  
For more information, please visit <https://www.medicaid.ncdhhs.gov/transformation>.



# Fact Sheet

## Introduction to Medicaid Transformation: Part 2 – Enrollment & Timelines

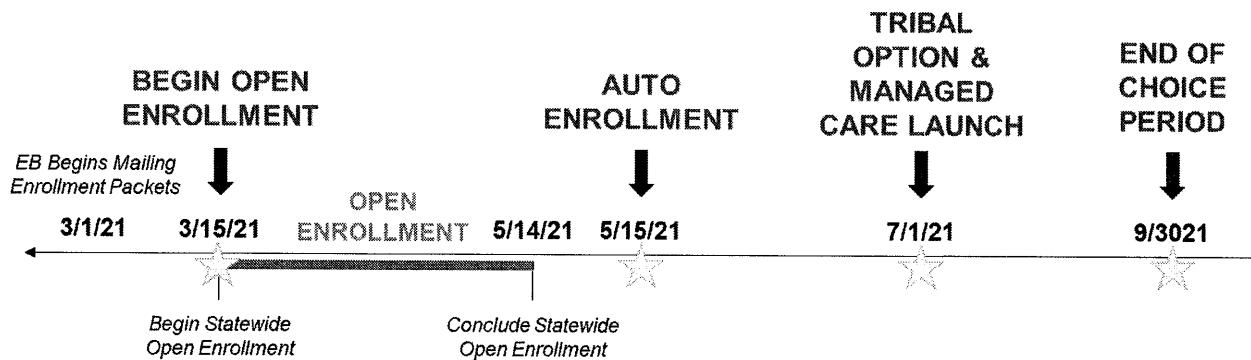
### County Playbook: NC Medicaid Managed Care

#### NC Medicaid Managed Care is Rolling Out Statewide

The Department of Health and Human Services (DHHS) will transition most beneficiaries to NC Medicaid Managed Care statewide on July 1, 2021. Some people will stay in NC Medicaid Direct. This Fact Sheet provides details on how and when these transitions will occur. Open enrollment for beneficiaries will begin March 15, 2021 and end May 14, 2021.

The statewide launch of NC Medicaid Managed Care and the EBCI Tribal Option will be **July 1, 2021**.

#### NC MEDICAID MANAGED CARE TRANSITION TIMELINE



- Local DSS will continue to determine Medicaid Eligibility and direct beneficiaries to the proper support system.
- Enrollment Broker will provide beneficiary support through choice counseling.
- Health plans will provide beneficiary support through member services lines and IVR.



MILESTONE	IMPORTANCE	TIMELINE	WHO CAN HELP?
<b>Enrollment Packets mailed from Enrollment Broker</b>	Current beneficiaries will receive details by mail on who in their household must enroll or may choose to enroll in a health plan, what plans they have to choose from, and how they can enroll. Beneficiaries may select a primary care provider (PCP) and enroll in a health plan.	Beginning 3/1/2021	Beneficiaries should contact the Enrollment Broker for assistance.
<b>Open Enrollment</b>	Beneficiaries may select a PCP and enroll in a health plan. Postcard reminders will be sent to beneficiaries during open enrollment.	3/15/2021 – 5/14/2021	Beneficiaries should contact the Enrollment Broker for assistance.
<b>Auto-Enrollment</b>	Beneficiaries who have not selected a health plan will be enrolled in one systematically. A PCP will be assigned as well.	5/15/2021	Beneficiaries should contact the Enrollment Broker for assistance.
<b>Day 1 – Health Plan Effective Date</b>	Beneficiaries in NC Medicaid Managed Care will now receive Medicaid services from their health plan.	7/1/2021	Beneficiaries should contact their health plan and/or the Enrollment Broker for assistance.

*\*Dates are approximate and subject to change*

## HOW ENROLLMENT OCCURS

Once open enrollment begins on March 15, 2021, beneficiaries can enroll in health plans in various ways. They can:

- Select a Primary Care Provider (PCP) and health plan through the Enrollment Broker.
  - By calling 1-833-870-5500 (toll free)
  - Online at [ncmedicaidplans.gov](http://ncmedicaidplans.gov)
  - By completing and returning a paper enrollment form by fax or mail
  - Using the NC Medicaid Managed Care mobile app
- Be auto-enrolled in a health plan and PCP if they do not choose one by the deadline.

Auto-enrollment is based on:

- 1) Where the beneficiary lives
- 2) Whether he or she is a member of a special population
- 3) Historical provider-beneficiary relationship and preference
- 4) Health plan assignments of other family members
- 5) Previous health plan enrollment within the past 12 months
- 6) Equitable health plan distribution

Beneficiaries may also indicate PCP and health plan preference in NC FAST (via ePASS application or caseworker entry).

## CHOICES FOR ENROLLMENT

Beneficiaries will have 6 health plans to choose from when they enroll, based on the region in which they live:

- WellCare
- UnitedHealthcare Community Plan
- Healthy Blue
- AmeriHealth Caritas
- Carolina Complete Health\*
- EBCI Tribal Option\*\*

The Enrollment Broker can assist beneficiaries in choosing a health plan and a PCP.

\*Carolina Complete Health is only available to beneficiaries in these counties: Alamance, Alexander, Anson, Bladen, Brunswick, Cabarrus, Caswell, Catawba, Chatham, Cleveland, Columbus, Cumberland, Durham, Franklin, Gaston, Granville, Harnett, Hoke, Iredell, Johnston, Lee, Lincoln, Mecklenburg, Montgomery, Moore, Nash, New Hanover, Orange, Pender, Person, Richmond, Robeson, Rowan, Sampson, Scotland, Stanly, Union, Vance, Wake, Warren, and Wilson.

\*\*The EBCI Tribal Option is only available to federally recognized tribal members or others eligible for services through Indian Health Service (IHS) who live in Cherokee, Graham, Haywood, Jackson, or Swain County. Eligible members in the following counties may opt in: Buncombe, Clay, Henderson, Macon, Madison, and Transylvania.

## WHEN ENROLLMENT OCCURS

**During the open enrollment period** as noted above. (Note: Beneficiaries may change health plans at any time during open enrollment).

**After NC Medicaid Managed Care launch**, beneficiary enrollment occurs or may change:

- New Applicants –
  - Enrollment is effective the month the application is dispositioned. (This may mean a portion of their eligibility period will be NC Medicaid Direct).
- Beneficiaries with a Change of Circumstance Impacting Enrollment -
  - Enrollment change is effective the month following the change.
- At Redetermination:
  - Beneficiaries may choose to remain with current health plan or make a change.

Mandatory beneficiaries (required to enroll in a health plan) have a 90-day choice period in which they can change health plans for any reason. The 90 days starts as of the effective date of enrollment.

Exempt beneficiaries (may enroll in a health plan) can change health plans at any time.

## BUDGET CONSIDERATIONS

Milestones in Medicaid Transformation described above may result in additional foot traffic and phone calls to the agency. More information will be provided.

Fact Sheets will be updated periodically with new information. Created 12/7/2020.  
For more information, please visit <https://www.medicaid.ncdhhs.gov/transformation>.

**Health Plan Choice Guide**

All health plans are required to have the same type of Medicaid services you get now. These include:

- Doctor visits
- Hospital visits
- Behavioral health care
- Eye care
- Medical supplies
- Lab tests and X-rays
- Therapies
- Prescriptions
- Hospice
- Care management

To see the full list of NC Medicaid covered services provided by the health plans, go to [ncmedicaidplans.gov](http://ncmedicaidplans.gov). Health plans also have added services. To view added services, see the other side.



NC DEPARTMENT OF  
**HEALTH AND HUMAN SERVICES**  
Division of Health Benefits

<p><b>EBCI TRIBAL OPTION</b></p>	<p><b>1-800-260-9992</b> TTY: 711 EBCITribalOption.com</p> <p>8 a.m. to 4:30 p.m., Monday through Friday</p>	<p><b>Only available in the counties listed below</b></p>
<p><b>WellCare</b> Beyond Healthcare. A Better You.</p>	<p><b>1-866-799-5318</b> TTY: 711 www.wellcare.com/hc</p> <p>7 a.m. to 6 p.m., Monday through Saturday</p>	<p><b>Statewide (all 100 counties)</b></p>
<p><b>UnitedHealthcare</b> Community Plan</p>	<p><b>1-800-349-1855</b> TTY: 711 uhcommunityplan.com/hc</p> <p>7 a.m. to 6 p.m., Monday through Saturday</p>	<p><b>Statewide (all 100 counties)</b></p>
<p><b>HealthyBlue</b></p>	<p><b>1-844-594-5070</b> TTY: 711 healthybluenc.com</p> <p>7 a.m. to 6 p.m., Monday through Saturday</p>	<p><b>Statewide (all 100 counties)</b></p>
<p><b>AmeriHealth Caritas</b> North Carolina</p>	<p><b>1-855-375-8811</b> TTY: 1-866-209-6421 amerihealthcaritasnc.com</p> <p>24 hours a day, 7 days a week</p>	<p><b>Statewide (all 100 counties)</b></p>
<p><b>carolina complete health</b></p>	<p><b>1-833-552-3876</b> TTY: 711 carolinacompletehealth.com</p> <p>7 a.m. to 6 p.m., Monday through Saturday</p>	<p><b>Only available in the counties listed below</b></p>

**EBCI Tribal Option is only available** in Cherokee, Graham, Haywood, Jackson and Swain counties. Eligible members in the following counties may opt in: Buncombe, Clay, Henderson, Macon, Madison, and Transylvania

**Carolina Complete Health is only available in these counties:** Alamance, Alexander, Anson, Bladen, Brunswick, Cabarrus, Caswell, Catawba, Chatham, Cleveland, Columbus, Cumberland, Durham, Franklin, Gaston, Granville, Harnett, Hoke, Iredell, Johnston, Lee, Lincoln, Mecklenburg, Montgomery, Moore, Nash, New Hanover, Orange, Pender, Person, Richmond, Robeson, Rowan, Sampson, Scotland, Stanly, Union, Vance, Wake, Warren, Wilson

**Questions?** Go to [ncmedicaidplans.gov](http://ncmedicaidplans.gov). Or call us at **1-833-870-5500** (TTY: 1-833-870-5588). The call is free. We can speak with you in other languages. You can get this information in other languages or formats, such as large print or audio.

# Monthly Director's Report to Board of Social Services



April 2021

Submitted by:  
Jerrie McFalls, Director

- The School of Government (SOG) UNC-Chapel Hill is offering training for Social Services Board Members. The training, entitled Essentials for Social Services Governing Boards Webinar is scheduled for August 5 - 6 2021 online via ZOOM. The training will take place over two mornings. It will be held on Thursday, August 5th from 9:30 am -12pm and Friday, August 6th from 9:30 am -12 pm. Each registrant will receive a recording of the class.

Topics to be covered include:

- How do social services agencies and governing boards fit into the human services framework in North Carolina?
- What are the legal powers and duties of the social services governing board?
- When can board members be held liable for their work with the board?
- How can your board best support your agency and community?
- Who are some of your board's key partners across the state, including professional associations and state agencies?

Please notify Karen Vale if you wish to attend and she will handle the registration and assist with the course materials.

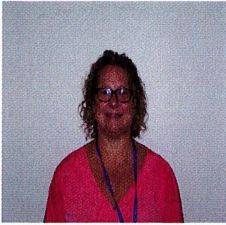
- Implementation of the Family First Prevention Services Act (FFPSA): This Federal law will impact the provision of foster care services. The law encourages the provision of preventive services to keep families together, placement of children in a family like setting whenever possible and when not possible the placement of children in the least restrictive placement. The FFPSA:
  - \* Allows IV-E (Federal) reimbursement for approved evidence-based services to prevent entry into foster care
  - \* Limits IV-E (Federal) funding for congregate care to the first two weeks of placement
  - \* Incentivizes placement in a family-like setting
  - \* Defines a minimum standard of care for QRTPs (Qualified Residential Treatment Program) as an option for children who need congregate care

The first impacts of this act will begin October 1, 2021 and implementation will continue through 2027. NCDHHS will continue work on developing the Evidence Based Practices (EBPs), monitoring of the fidelity of the practices and development of Qualified Residential Treatment Programs (QRTP). We will focus on placing children under 12 with relatives or in foster homes and placing children with higher level needs in therapeutic care.

- **Medicaid Transformation:** Open enrollment for Medicaid Managed Care is underway. Mailings have been sent to recipients from Raleigh. Roll out is scheduled for July 1, 2021.
  
- **REDA (Recipient Eligibility Determination Audit) Update:** In January 2021 our staff along with Dr. Jennifer Hensley (DSS Board Chair), Steve Wyatt (County Manager), Amy Brantley (Assistant County Manager) and William Lapsley (Chair of the Board of County Commissioners) met virtually with NC Medicaid to review the results of our 10 month REDA audit. The audit was conducted from February through December of 2019. Our Accuracy Improvement Plan (AIP) was approved on March 16, 2021. We have had two months of successful audits.
  
- **NC Legislature:** The Legislature returned to Raleigh the week of April 12 after a spring break. One hundred fifty-eight (158) bills were filed by the Senate on May 8th and 9th. Many of those bills have the potential to impact the work done by DSS.

**Employees of the Month:** The April Employees of the Month list is attached.

## April Employees of the Month



**Katherine Ponder (Social Worker 3 –**

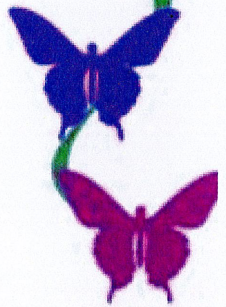
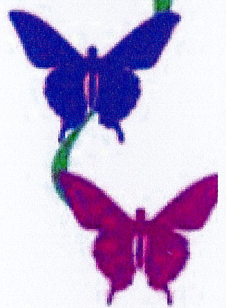
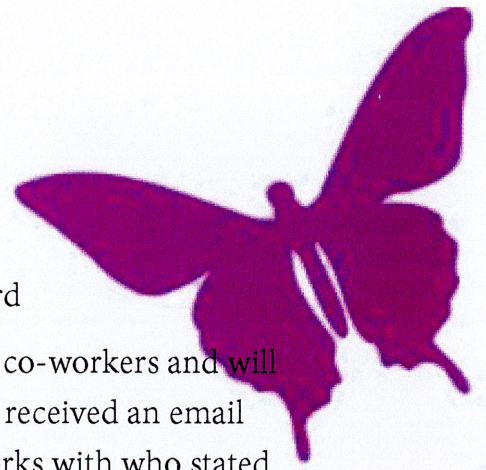
**Foster Care/Adoptions):** “Katherine is a hard worker, always available to clients as well as co-workers and will jump in when needed! The agency recently received an email from one of the foster parents Katherine works with who stated ‘I just wanted to reach out to you and let you know what a wonderful experience I’ve had with Katherine! She provides so much support to me and the child in my home! She goes above and beyond and works so hard to move our case forward. I feel so grateful to have her as our social worker!’”



**Therese McCall (IMC 3 – Long Term Care):** “Therese is a great asset to the LTC/SA Team. She can always be counted on to help a co-worker and goes above and beyond for her team. She keeps things fun and lighthearted. Thanks Therese for being such a great part of this team!”



**Cindy Benjamin (CSST – Family Resource Unit):** “Success is the Sum of small efforts repeated day in and day out’ – This quote reminded me of the hard work Cindy does every day. Cindy exudes professionalism and dedication in her daily work with children and families. She has an infinite amount of patience in working with our children, who have unfortunately experienced a great deal of trauma. Cindy has spent many hours negotiating with our young children to move forward as they fight inner battles of fear, sadness, and uncertainty. Cindy provides a safe place for these children to stomp, scream, yell, and kick while providing comfort to them and a sense of security. Cindy should be commended for these small efforts she unselfishly provides every day.”





**CHANGES TO BOARD-REVIEWED FY21-22 BUDGET**

The County Budget Office (CBO) routinely reviews submitted budgets & suggests changes based upon historical spending. Departments are asked to agree to the proposed changes or offer compelling evidence that spending will & should be different for the upcoming year.

- For Printing & Binding, Publications & Guardianship Assistance, we are able to use the County’s suggested numbers without a problem.
- For Contracted Services, the CBO moved a small contract to our Contracted Services line to be consistent with other departments.
- For Rental of Equipment, we had used the current year number & CBO revised with an updated projection (County supplies this number)
- For Technology (Cap & Non-Cap), IT made the decision to include an additional 11 laptop set-ups @ \$2200 each

Requested amounts which are not included in the County Manager's Proposed Budget will show up as 'Unfunded Requests' in the material presented to the Commissioners for their consideration. Any changes you agree to, will be updated on the form you submitted and in MUNIS (Level 1).

Acct #	Account Description	Requested Amount	Recommended Amount	Notes:	Department Decision
539000	Contracted Services	\$18,000	<b>\$18,420</b>	Added Southern Alarm contract	Accept Change
522600	Printing & Binding	\$500	\$100	No expenditures since 2017	Accept Change
523300	Publications	\$1,300	\$750		Accept Change
526201	Technology (Capital & Non-Cap)	\$572,005	<b>\$609,405</b>	IT updated costs & added 11 Laptops @ \$2200/ea	Accept Change
537105	Guardianship Assistance	\$42,000	\$35,000		Accept Change
547500	Rental of Equipment	\$82,000	\$50,000		Accept Change

HENDERSON COUNTY DEPARTMENT OF SOCIAL SERVICES  
MONTHLY COMPARATIVE STATISTICS

PROGRAM AREA - MONTHLY CASE COUNT	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	% Change From Prior 12 Mths
Food Stamp (FNS) Cases				4897	5017	5275	5351	5111	5090	5258	5391	5583	5701	
FNS Apps Taken	536	553	257	228	254	304	273	375	391	304	269	246		
Individuals Served				9956	10180	10635	10827	10275	10172	10543	10790	11189	11441	
Work First Employment Cases	10	10	6	4	4	5	6	7	7	9	7	6	4	-40.7%
Child Only Work First Cases	93	94	94	95	93	94	95	95	92	90	90	88	89	-4.0%
Crisis Heat/Cooling (CIP)	61	19	17	23	31	36	69	144	124	159	151	112	64	
Low Income Energy (LIEAP)	9	0	0	0	0	0	0	0	0	463	361	148	77	
Medical Assistance Cases <sup>2 &amp; 4</sup>														
Participants				15770	15933	16334	16486	16655	16794	17019	17171			
Applications Received	553	598	362	394	433	370	393	421	457	487	511			
Medicaid Transports	2236	1383	579	1130	1152	1161	966	1168	778	1409	1121	1030	1559	
Individuals Transported	244	78	88	135	116	143	125	145	131	84	107	159	148	
Child Support Cases	2455	2458	2449	2413	2392	2397	2380	2365	2364	2368	2353	2363	2363	-1.4%
Child Support Collections	\$377,517.60	\$312,194.50	\$387,578.46	\$397,311.73	\$372,688.49	\$391,349.72	\$333,695.71	\$335,662.71	\$337,233.05	\$338,251.17	\$303,713.44	\$312,838.13	\$395,757.75	13.1%
Child Day Care	618	618	618	463	461	470	608	418	418	464	509	509		
Child Day Care Expenditures <sup>1</sup>	\$279,391	\$449,954	\$470,338	\$295,885	\$289,095	\$268,179	\$268,179	\$199,026	\$231,033	\$216,700	\$211,818	\$212,332		
CPS Investigations Initiated	99	54	70	63	66	76	88	91	79	77	70	73	105	39.1%
CPS Investigations Continuing	118	73	80	64	78	89	107	107	95	103	113	105	124	31.4%
CPS -In-Home Case Mgt	35	40	39	41	40	41	37	33	34	31	33	31	30	-17.2%
CPS-Children In Custody (0-18)	157	163	162	168	177	171	167	170	172	173	170	172	166	-1.5%
CPS-Foster Care (age 18-21) <sup>3</sup>	10	11	10	10	10	14	15	15	16	15	14	14	15	16.9%
APS Open Cases	14	15	25	19	26	23	23	46	49	37	57	46	44	38.9%
Spec. Asst. In-Home	123	124	124	127	126	123	122	123	126	126	127	126	124	-0.6%
Guardianship Cases	25	26	26	26	25	25	25	25	24	25	25	26	25	-1.0%
In-Home Aid Services(Contract)	92	89	91	91	88	88	85	83	81	82	82	81	81	-5.9%

1 - New category as of 7/1/2014

2- New category as of 3/1/2015

3- New category as of 1/1/17

4- Medicaid #'s revised beginning 7/2017

**HENDERSON COUNTY DEFICIT OF SOCIAL SERVICES**

Personnel Report

Third Quarter FY 2020 - 2021 (January - March 2021)

New Hires	Worker Initials	Position	Hire Date	Degree	Tenure (YRS)	Life Changing Event (Y/N)	
	TG	IMC 2 - PLA/SA	1/4/2021	Bachelors - Business Administration	0.75	N	
	MA	IMC 2 - PLA/SA	1/4/2021	None	1.98	N	
	SY	Social Worker 3 - Adult Services Unit 1	2/1/2021	Bachelors - Psychology	7.54	Y	
	LM	IMC 2 - Food & Nutrition Services	3/1/2021	None	0	N	
	MH	Social Worker 3 - Foster Care	3/15/2021	Bachelors & Masters - Social Work			
	MM	Social Worker 3 - Foster Care	3/15/2021	Bachelors - Education			
	KL	IMC 2 - PLA/SA	3/29/2021	Bachelors - Computer Science			
	DH	IMC 1 - PLA/SA	3/29/2021	None			
Quarter Total	78						
Year Total	2415						
Resignations/ Separations	Worker Initials	Position	Effective Date	Primary Reason	Tenure (YRS)	Life Changing Event (Y/N)	
	SW	IMC 1 - PLA/SA	1/4/2021	Resignation - Work from home full-time	0.75	N	
	JN	Social Worker 3 - CPS Team 4	2/12/2021	Resignation - Going to work for VAYA	1.98	N	
	EW	IMC 2 - PLA/SA	2/26/2021	Resignation - Moving to FL	7.54	Y	
	KM	IMC 2 - Food & Nutrition Services	3/9/2021	Resignation - Job not a good fit	0	N	
Quarter Total	4						
Year Total	19						
Transfers/ Promotions	Worker Initials	Prior Position	New Position	Date			
	KP	Social Worker 3 - FC CPS Team 2	Social Worker 3 - FC/Adopt CPS Team	1/4/2021			
	NM	Social Worker 3 - FC CPS Team 3	Social Worker 2 - Recruitment/Licensur	1/4/2021			
	AS	Social Worker I/A T - Floater CPS Team 4	Social Worker I/A T CPS Team 1	1/4/2021			
	AM	Processing Assistant 3 - Reception	IMC 2 - Econ Benefits Administration	3/1/2021			
	AB	Social Worker I/A T - CPS Team 1	Social Worker 3 - FC CPS Team 3	3/15/2021			
	MD	Social Worker I/A T - CPS Team 1	Social Worker I/A T-Floater CPS Team	3/15/2021			
Quarter Total	6						
Year Total	18						
	Total Staff	Separations 3rd Qtr	Turnover 3rd Qtr %	Turnover YTD	% Turnover YTD	# of Retirements	% Turnover w/o Retirements
Economic Services	68	3	4.41%	7	10.29%	0	10.29%
CPS Social Work	46	1	2.17%	6	13.04%	1	10.87%
Other Social Work	14	0	0.00%	3	21.43%	1	14.29%
Support Staff	22	0	0.00%	2	9.09%	1	4.55%
Child Support	6	0	0.00%	0	0.00%	0	0.00%
Supervisory/Admin.	31	0	0.00%	1	3.23%	0	3.23%
	187	4	2.14%	19	10.16%	3	8.56%
Administration/Reception	11	0	0.00%	1	9.09%	1	0.00%
Economic Services	83	3	3.61%	7	8.43%	0	8.43%
Social Work	93	1	1.07%	11	11.83%	2	9.68%
	187	4	2.14%	19	10.16%	3	8.56%

## Program Administrators Report for April 2021

### **Social Work**

March was Social Worker appreciation month. East Flat Rock Baptist Church provided lunch for our staff March 19, 2021.

The agency also celebrated Social Worker Appreciation March 30<sup>th</sup> with a box lunch for all the social work staff as well as individual candy bags and handwritten cards from their Program Managers.

March was another busy month for Adult services. They had 66 reports, with 39 of those reports being screened in with most of the allegations being self-neglect.

Our one licensed Adult Day Care in Henderson County had to relocate due to losing the lease on the existing location. Mountain Care is relocating to 55 N. Hillside Drive, Hendersonville. They still haven't gotten all their building inspections complete, so we currently do not have an open location. Our clients who receive funding to attend Adult Day Care are receiving outreach services until the new location is up and running.

Child support unit is currently meeting their MOU goals as well as 64.94% of their collections goal for 2021.

MAPP Class will be starting May 11<sup>th</sup> and that class will wrap up June 29<sup>th</sup>. We currently have 8 families planning to attend. We have 8 families that are currently in the process of getting licensed and we currently have 75 families licensed.

We also had a significant increase in child protective service reports in March. We had 178 reports and 100 of those were screened in.

Our supervisors have started leadership training, in March, through Blue Ridge Community College, *Leading by Example*. This 12-week class will end in May. We have four child welfare supervisors attending and one child welfare program manager. We also had several staff during the month of March, attend Blue Ridge Community College for training on *The 7 Habits of Highly Effective People*.

April is Child Abuse Prevention Month.

### **Economic Services**

#### Food & Nutrition

- Due to ongoing COVID waivers, Food & Nutrition cases with 6 months certifications will be auto certified by the State through June 2021
- The FNS maintenance team will continue to work certifications of 12 and 36 months.
  - In addition, the FNS maintenance team (given the decrease in work through June) will be the main contacts for LIEAP Pandemic payments, as well as ongoing LIEAP and CIP applications.
- Clients are continuing to get allotments up to the maximum amount for their household size. In addition, the maximum amount was temporarily increased by 15%.

## Laserfiche

- For the last year, we have been preparing for our transition from Northwoods to Laserfiche. This transition will allow our staff to be more efficient through better electronic documentation processes.
- Economic Services went live March 29<sup>th</sup>, and we are excited to see to see how this program will help overall efficiencies in our processes.

## COVID-19 Considerations

- All programs continue to have various waivers allowing easier processing of benefits. These mainly relate to telephonic interviews/signatures and client statement for verifications.
- We are still in the “soft-opening” phase for clients coming into office. We have one IMC stationed in an office off the front lobby. She is the first contact for clients with basic needs, as well as Spanish Interpreting. There are two additional offices off the front lobby for staff to meet with clients briefly, as needed. These offices have computers, printers, phone, scanner, sneezeguards, and cleaning supplies. Staff have been instructed to keep any visits under 15 minutes and conduct any additional contact via phone.

## **Administration**

Attachment regarding changes to the FY 2021-2022 DSS budget.

**Henderson County Department of Social Services  
FY20-21 9 MONTHS YTD MAR21 - (042021)**

DESCRIPTION	TARGET =										75.0%	
	ACTUAL FY 12-13	ACTUAL FY 13-14	ACTUAL FY14-15	ACTUAL FY15-16	ACTUAL FY16-17	ACTUAL FY17-18	ACTUAL 2018-19	ACTUAL 2019-20	BUDGET 2020-2021	YTD SPEND 2020-2021		% SPENT
SALARIES - WAGES, OT, TEMP	6,675,430	6,822,428	7,179,068	7,179,338	7,477,098	7,553,754	7,849,280	8,076,196	8,601,836	5,938,071	69.0%	2,663,765
DEFERRED COMP - SUPP, ITERS & 401K	519,736	551,487	591,834	563,817	636,219	654,785	708,049	833,486	1,039,219	691,665	66.6%	347,554
INSURANCE - MEDICAL & DENTAL	1,845,802	2,079,280	2,089,895	2,050,190	2,160,256	2,243,185	2,287,467	2,099,836	2,504,138	1,683,585	67.2%	820,553
UNEMPLOYMENT & WORKERS COMP	191,262	126,452	95,351	53,849	60,374	82,422	123,599	81,594	93,288	40,627	43.6%	52,661
SOCIAL SECURITY (FICA)	485,558	495,573	527,147	519,084	540,337	545,069	566,159	582,366	661,300	427,355	64.6%	233,945
STAFF TRAINING	22,972	23,460	21,363	29,320	43,424	49,668	52,019	34,285	70,000	25,675	36.7%	44,325
<b>STAFF</b>	<b>9,740,760</b>	<b>10,098,679</b>	<b>10,504,658</b>	<b>10,395,598</b>	<b>10,917,709</b>	<b>11,128,883</b>	<b>11,586,573</b>	<b>11,707,743</b>	<b>12,969,781</b>	<b>8,806,979</b>	<b>67.9%</b>	<b>4,162,802</b>
<b>TECHNOLOGY (IT) - CAPITALIZED &amp; NON-CAP</b>	<b>182,013</b>	<b>237,928</b>	<b>215,713</b>	<b>162,227</b>	<b>166,555</b>	<b>288,605</b>	<b>106,714</b>	<b>152,837</b>	<b>418,803</b>	<b>230,747</b>	<b>55.1%</b>	<b>188,056</b>
***SUPPLIES - OFFICE, CLING, FOOD, DP, FURNITURE & DUES	156,036	159,567	223,383	284,504	178,221	267,041	125,735	104,835	298,361	310,338	104.0%	-11,977
TELEPHONE - AGENCY SYSTEM & STIPEND	110,054	118,303	123,525	80,537	103,696	97,738	111,656	147,477	149,663	91,820	61.4%	57,843
POSTAGE	59,643	61,131	35,256	53,606	39,650	41,001	44,025	45,341	50,000	23,677	47.4%	26,323
MAINT & REPAIR - BUILDING, GROUNDS & EQUIPMENT	8,488	2,791	17,437	4,397	0	0	0	0	0	0		0
CONTRACTED SERVICES	448,887	551,002	772,476	573,428	599,967	644,263	538,747	489,949	695,427	313,733	45.1%	381,694
OUTSIDE SERVICES - PRINTING, MED/LEGAL/PROF/RESEARCH/JUDICIAL/ADV	39,316	38,701	54,609	58,012	74,726	82,702	71,884	121,597	151,000	99,213	65.7%	51,787
CLIENT TRAVEL - MILEAGE, FUEL & VEHICLE EXPENSE	117,636	118,153	118,911	140,182	132,864	103,720	106,488	77,621	93,750	41,905	44.7%	51,845
RENT (EQUIPMENT & PROPERTY)	83,680	80,989	85,660	74,450	43,343	43,368	39,061	32,617	82,000	20,648	25.2%	61,352
INSURANCE/BONDING	122,750	104,118	119,193	106,257	103,321	106,953	100,722	95,452	100,279	98,735	98.5%	1,544
GUARDIANSHIP ASSISTANCE	28,800	28,800	28,800	32,800	40,800	35,699	26,400	26,400	42,000	19,800	47.1%	22,200
FOSTER CARE TRAINING	5,657	4,499	5,122	8,070	5,479	4,358	6,882	6,929	12,000	1,623	13.5%	10,377
<b>ADMINISTRATIVE</b>	<b>1,180,947</b>	<b>1,268,053</b>	<b>1,584,370</b>	<b>1,416,243</b>	<b>1,322,067</b>	<b>1,426,843</b>	<b>1,171,599</b>	<b>1,148,218</b>	<b>1,674,480</b>	<b>1,021,493</b>	<b>61.0%</b>	<b>652,987</b>
<b>TOTAL STAFF &amp; ADMINISTRATIVE</b>	<b>11,103,719</b>	<b>11,604,661</b>	<b>12,304,742</b>	<b>11,974,069</b>	<b>12,406,331</b>	<b>12,844,331</b>	<b>12,864,886</b>	<b>13,008,797</b>	<b>15,063,064</b>	<b>10,059,218</b>	<b>66.8%</b>	<b>5,003,846</b>
<b>APS/CPS COVID Expenditures</b>				<b>Amount</b>								
36 Laptops & Docking Stations				526020	Non-Exp Supp							
36 Scanners				526020	Non-Exp Supp							
72 Monitors				526201	Non-Cap Tech							
36 Printers & 36 Toner Cartridges				526201	Non-Cap Tech							
												<b>\$113,760.16</b>

\*\*\* Includes \$8,358.64 for COVID-related supplies & services paid by Federal grant to the County.

Encumbered =	\$58,469
"Adjusted" YTD Spend =	\$10,117,687
Encumbered amounts are \$13,778 for Dept. Supplies & \$44,690 for Non-Capital Technology	67.2%