Nebraska Children's Commission Foster Care Reimbursement Rate Committee Fifteenth Meeting October 11, 2016 2:00 p.m. – 4:00 p.m. Airport Country Inn & Suites 1301 West Bond Circle, Lincoln, NE 68521

I. Call to Order

The Foster Care Reimbursement Rate Committee (FCRRC) Chair, Peg Harriott, called the meeting to order at 2:00 p.m.

II. Roll Call		
Committee Members present (12):		
Jodie Austin	Peg Harriott	Dave Newell
Jude Dean	Bobby Loud	Lana Temple-Plotz
Corrie Edwards	Jackie Meyer	Julia Tse
Leigh Esau	Felicia Nelsen	Michaela Young
Committee Members absent (5):		
Phillip Burrell	Dr. Anne Hobbs	Sherry Moore
Susan Henrie	Vanessa Humaran	
Ex Officio Members present (2):		
Stacy Scholten	Nanette Simmons	
Ex Officio Members absent (6):		
Michele Anderson	Jerrilyn Crankshaw	Sherrie Spilde
Jeanne Brandner	Karen Knapp	Doug Weinberg
A quorum was established.		
Guests in Attendance (3):		
Bethany Connor Allen		
John Danforth		Administrative Office of Probation
Amanda Felton		Nebraska Children's Commission
a Notice of Publication		

a. Notice of Publication

Recorder for the meeting, Amanda Felton, indicated that the notice of publication for this meeting was posted on the Nebraska Public Meetings Calendar and Nebraska Children's Commission website on September 8, 2016 in accordance with the Nebraska Open Meetings Act. The publication will be kept as a permanent attachment with the meeting minutes.

b. Announcement of the placement of Open Meetings Act information

A copy of the Open Meetings Act was available for public inspection and was located at the sign-in table at the front of the meeting room.

III. Approval of Agenda

A motion was made by Dave Newell to approve the agenda as presented. The motion was seconded by Jodie Austin. No further discussion ensued. Roll Call vote as follows:

FOR (12):

Jodie Austin Jude Dean Corrie Edwards Leigh Esau

AGAINST (0):

ABSTAINED (0):

ABSENT (5):

Phillip Burrell Susan Henrie Peg Harriott Bobby Loud Jackie Meyer Felicia Nelsen Dave Newell Lana Temple-Plotz Julia Tse Michaela Young

Dr. Anne Hobbs Vanessa Humaran Sherry Moore

MOTION CARRIED

IV. Approval of Minutes of the Previous Meeting

Chair Harriot drew attention to the minutes from the previous meeting. Lana Temple-Plotz noted that the word "charges" in the third paragraph of the fourth page should read "charged." Jodie Austin moved to approve the July 26, 2016 FCRRC meeting minutes with the changes mentioned above. Julia Tse seconded the motion. There was no discussion. Roll Call vote as follows:

FOR (11):		
Jodie Austin	Peg Harriott	Lana Temple-Plotz
Jude Dean	Bobby Loud	Julia Tse
Corrie Edwards	Jackie Meyer	Michaela Young
Leigh Esau	Felicia Nelsen	
AGAINST (0):		
ABSTAINED (1):		
Dave Newell		
ABSENT (5):		
Phillip Burrell	Dr. Anne Hobbs	Sherry Moore
Susan Henrie	Vanessa Humaran	

MOTION CARRIED

V. Chairperson Report

Chair Harriot informed the FCRRC that Gene Klein would no longer serve as Co-Chair of the Committee as he was not reappointed to the Nebraska Children's Commission. A new member of the Children's Commission would be appointed as Co-Chair for the group. She also thanked everyone for attending the day's meeting to discuss the important topics even though it was unlikely that the group would take action at the meeting.

VI. Public Comment

Chair Harriott invited any members of the public forward. No public comment was offered.

VII. Group Updates

a. Department of Health and Human Services (DHHS)

Nanette Simmons and Stacey Scholten, Administrators with the DHHS, Division of Children and Family Services (CFS), provided an update. As of September 1st, paper copies of the updated Nebraska Caregiver Responsibility (NCR) tool were being used. Staff was made aware of the changes in advance. Any resulting changes due to the updated NCR would not begin to show trend data until at least December. The inclusion of the NCR in the NFOCUS system would be implemented in December when their next update was scheduled to happen.

b. Nebraska Families Collaborative (NFC)

Dave Newell, President and CEO of Nebraska Families Collaborative, echoed the information provided under the DHHS portion of the update. As the rollout continued, more information would be available for the group to review.

VIII. Treatment Foster Care Workgroup Update

Jodie Austin, Chair of the Treatment Foster Care (TFC) Workgroup and President of KVC Nebraska, began her update by discussing the basic elements. Ms. Austin noted the efforts the group had gone to in order to ensure that both child welfare and juvenile justice populations were encompassed in the discussion of TFC. No specific model was prescribed, which would reduce the likelihood of TFC placement becoming cost prohibitive. The group did not limit the placement type to require a stay-at-home parent.

An element of much discussion was the recommendation to have a licensed clinician in the home. In the past, a clinician would oversee the treatment plan, but the current recommendation stressed the need for the clinician to physically be in the home. Lengthy debate occurred on the necessity and role of the in-home clinician. Some members argued that without treatment in the home, TFC would be no different from other models. Allowing the clinician in the home would provide an opportunity for them to oversee both the family and child behavior in a familiar setting. There was no firm consensus from the group on specifics regarding the in-home clinician, and it was decided for the group to return to this issue at a later date.

The Committee touched on the idea that DHHS or the referral party would be responsible for pulling down Medicaid funding after receiving documentation from the providers. The members debated on the feasibility of this process. The goal of the Workgroup was to minimize the amount of overhead to reduce costs for both the Child Placing Agency (CPA) and DHHS. It was also argued that with TFC comes an increased expectation of providers and that all CPAs should be Medicaid providers as well. The group discussed potential ways to streamline the process to maximize efficiency. In order to accomplish this, the group highlighted the necessity for communication and coordination with the Managed Care Organizations (MCOs) that will be working under Heritage Health beginning January 2017. Language would be updated to emphasize the goal of streamlining the payment process, maximizing Medicaid and Federal fund matching, minimizing overhead, and providing the best placement for the youth.

Discussion transitioned to placement details. The hope was for placement disruption to be minimized and for funding to follow the child. Members discussed the need to find and educate willing foster parents who would understand that the treatment component was temporary and that the reimbursement rate would be affected once the treatment was no longer necessary. The situation was raised where youth may still exhibit behaviors in need of treatment, but who no longer qualify under Medicaid. It was noted to add a section addressing the need for a State Plan amendment.

The members agreed that a uniform functional assessment across agencies would allow for a statewide dataset on the treatment foster care youth. It was noted a clinician would be required to complete the assessment. Once an assessment process is established, an inter-departmental decision making body could be created to review assessments or applications prior to youth being placed in TFC. The decision making body would determine the placement along with the funding sources utilizing Memorandums of Agreement between the agencies. This would allow a system of checks and balances between the providers, clinicians, and agencies. It was requested to have the last sentence of the Biological Parent Role section to include a reference to the needs of the child. A number of issues were raised that the group felt would be more appropriate as next steps once a foundation had been laid. These included:

- Certification requirements for TFC foster parents
- Address if there is a need for one parent stay home full time
- Look into adding language and requirements around trauma informed training
- Create a checklist of necessary changes to Nebraska statute and regulations in order to make TFC a possibility
- Collaborate with the Division of Medicaid and Long-Term Care in outlining the components of TFC
- Collaborate with the MCOs in the creation of TFC.
- Look into the braiding of funds given the state budget shortfall

The topic of the MCOs brought about discussion for the need for information from the organizations. It was suggested to have the Children's Commission host a panel presentation from Medicaid and the three MCOs in the hopes of gaining knowledge on the "value added" services they provide in addition to the basic service requirements. In addition, the Committee felt it would be beneficial to pull in a member representative to the Committee from the Division of Medicaid and Long-Term Care.

It was agreed to provide an update to the Children's Commission at their November 15th meeting. Since no action was being requested, it was felt that it may be a good opportunity to share the work to date for feedback and guidance. Bobby Loud moved to provide an update of the draft information with the changes noted in the day's meeting to the Nebraska Children's Commission. Felicia Nelson seconded the motion. No further discussion occurred. Roll call vote as follows:

FOR (11): Bobby Loud Jodie Austin Lana Temple-Plotz Jude Dean Jackie Meyer Julia Tse Felicia Nelsen Michaela Young Corrie Edwards Peg Harriott Dave Newell AGAINST (0): **ABSTAINED (0):** ABSENT (6): Phillip Burrell Susan Henrie Vanessa Humaran Leigh Esau Dr. Anne Hobbs Sherry Moore

MOTION CARRIED

IX. Funding for Normalcy Activities

Jude Dean, a foster parent representative, shared information on the work of the Normalcy Task Force. At the last Children's Commission meeting, it had been suggested that the Task Force connect with the FCRRC to discuss the need to address funding for Normalcy Activities.

This prompted a discussion of the current reimbursement rates. It was agreed that the rates established by the Committee had taken Normalcy activities for the youth into account. The group had much discussion on the varied experiences of foster homes and biological homes. There was concern of the effect on the reunification process. They worried that it could make for a more difficult transition when the youth was no longer provided the funds to continue in the activities within their birth home.

There was consensus that it may be more appropriate to work to spread education of funding sources available within the community. The, "Friends of Foster Care," program was mentioned as a potential resource for

these situations. It was also pointed out that community resources may have the ability to continue even after reunification.

X. Review of Assignments/Action Plan

Chair Harriott reviewed the decisions and items to address when moving forward. Below is a list of the final assignments/action plans.

- Noted alterations would be made to the Treatment Foster Care Workgroup update to be presented to the Nebraska Children's Commission at their November 15th meeting.
- The TFC Workgroup would continue their efforts and report back to the FCRRC at their next meeting.
- Outreach would be made to the Division of Medicaid and Long-Term Care for a representative to regularly attend FCRRC meetings.
- Propose that the Nebraska Children's Commission host an educational panel consisting of representatives from Medicaid and the three Managed Care Organizations.

XI. New Business

There was no New Business to present.

XII. Upcoming Meeting Planning

A meeting would be planned for late January. A survey of member availability would go out to determine the date of the next meeting.

XIII. Adjourn

Jackie Meyer motioned to adjourn. Jodie Austin seconded the motion. There was no discussion. Motion carried unanimously by voice vote. The meeting was adjourned at 3:59 p.m.

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