



NC Child and Family Specialty (CFS) Plan

Rebecca Smith, Social Work Director
Health & Human Services

Board of Commissioners Briefing
April 4, 2023



Outline

- CFS Plan Purpose & Overview
- Proposed Single Statewide Provision
- Vaya Health Improvements & Request
- Discussion



Purpose & Overview

The What

- Pending state legislative approval (NC Senate Bill 156 / BB 340) mandates NCDHS to issue an RFP for a Single Statewide Provider of the CFSP
- Plan provider to develop and maintain a closed network of providers only for the provision of the following services:
 - Intensive in-home services
 - Multisystemic therapy
 - Residential treatment services
 - Services provided in private residential treatment facilities
- Special population eligibility includes:
 - Children and youth in foster care
 - Children receiving adoption assistance
 - Former foster care youth under age 26
 - Minor children of individuals eligible for CFSP enrollment
 - Parents, guardians, custodians and minor siblings of children/youth in foster care
 - Families receiving CPS In-Home Services, specifically:
 - Adults included in the NC In-Home Family Services Agreement as caregivers
 - Minor children included on the NC In-Home Family Services Agreement



Purpose & Overview

Benefits

- Prevention focused
- Adults can receive treatment as well as children
- Parents whose children enter foster care can keep Medicaid eligibility and receive needed services to assist in reunification
- Children and DSS Directors (for foster children) can opt out of the plan if they prefer the Tailored Plan or Standard Plan
- Care managers will be available 24/7 to assist with child emergencies
- Care managers will assist with the transition out of foster care for youth
- Medication management is a core service



Single Statewide Provision Call to Advocacy

- Overall plan is critically needed to support population
- Systemic changes are needed to address current challenges
- Provision for single statewide provider is concerning
- Loss of local collaboration & real-time response
- Regional provider allows for accelerated advancement of plan benefits



Single Statewide Provision

Current LME Relationship – Vaya Health

- Timely trauma informed comprehensive assessments
- Evidence based enhanced services
- Peer support linkage
- Embedded care coordinators who carry caseloads of children in DSS custody with high level mental health needs (2)
- Monthly meetings to discuss continuum of care and resource opportunities with increased capacity built for 30 day assessment centers
- Commitment to continuous dialogue & co-creation of enhanced services and programming
- Joint meetings with Mission ED and Copestone regarding children “ready for discharge” with no placement options
- Access to Family Centered Treatment through partnerships



Vaya Health Improvement & Request

- LME/CEO Led Improvements
 - Care manager co-location in more than half of county DSS offices to facilitate operations
 - Co-location is in process for 24 additional counties
 - Implemented statewide, standardized policies and administrative processes
 - Enhanced network adequacy statewide with open enrollment and standardized in- and out-of-network reimbursement rates
 - Coordinated Response Protocol Development as part of NC Child and Family Improvement Initiative
- Legislative letters of support for regional administration
 - County Management
 - County Commissions



Discussion

