



This Bill Analysis reflects the contents of the bill as it was presented in committee.

SENATE BILL 212: NC FAST/Early Child/Transformation/ACH Assess.

2019-2020 General Assembly

Committee:	House Health. If favorable, re-refer to Rules, Calendar, and Operations of the House	Date:	June 26, 2019
Introduced by:	Sens. Krawiec, Hise	Prepared by:	Theresa Matula
Analysis of:	PCS to Third Edition S212-CSSH-20		Jessica Boney Committee Staff

OVERVIEW: *The Proposed Committee Substitute (PCS) for Senate Bill 212 would require the Division of Social Services, Department of Health and Human Services, to postpone deployment of the case-management functionality for the child welfare system and aging and adult services' programs in NC FAST (Families Accessing Services through Technology), and would make other changes pertaining to NC FAST; would amend qualifications for child care center staff and require the Division of Child Development and Early Education to establish expected competencies, to develop a process to meet these competencies, to develop an incentive program, and to study a pilot program; would potentially delay Medicaid and NC Health Choice transformation until March 1, 2020; would alter the requirements of the initial resident assessment conducted by adult care homes and allow the use of the Medicaid personal care services (PCS) assessment to satisfy the required resident assessment of physical functioning for activities of daily living (ADLs); and would amend assisted living administrator qualifications.*

BILL ANALYSIS: The PCS for SB 212 would make the changes outlined below.

PART 1: POSTPONE DEPLOYMENT OF NC FAST CASE-MANAGEMENT FUNCTIONALITY FOR CHILD WELFARE SYSTEM/AGING & ADULT SERVICES' PROGRAMS - would require the Division of Social Services (DSS), Department of Health and Human Services, to postpone deployment of the case-management functionality for the child welfare system and aging and adult services' programs in NC FAST (Families Accessing Services through Technology).

The DSS would also be prohibited from deploying the child welfare case management component of NC FAST statewide prior to October 1, 2019, and must continue to develop and improve case-management functionality for the child welfare component only in those counties that participated in the initial pilot program prior to January 1, 2019. Counties, other than those in the pilot program prior to January 1, 2019, may elect to utilize the Intake and Assessment functionality of the NC FAST system.

PART II: EARLY CHILDHOOD WORKFORCE – contains the following broad elements: would amend qualifications for staff, would direct the establishment of expected competencies, would require collaboration to meet competencies, would require development of an incentive program, would require a study of a pilot program and submission of a report, and would require an early childhood workforce report. Specifics are provided below.

Amend Qualifications for Staff. Requires lead teachers in a child care facility to earn a N.C. Early Childhood Credential before being hired and obtain a N.C. Infant-Toddler Certificate or Preschool Certificate, or its equivalent, within 18 months after being hired. Requires an operator of a licensed family

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child care home to have a N.C. Early Childhood Credential before receiving a license and earn a N.C. Infant-Toddler or Preschool Certificate, or its equivalent, within 18 months of getting a license.

Establish Expected Competencies. Directs the Division of Child Development and Early Education (DCDEE) to define the knowledge requirements for early childhood educators by establishing expected, graduated competencies for lead teachers.

Collaborate to Meet Competencies. Requires collaboration between the DCDEE and the N.C. Community College System Office to develop, or revise, a standardized process for early childhood educators to demonstrate ability to meet competencies.

Develop Incentive Program. Directs the DCDEE to develop and implement a program on or after July 1, 2020, to incentivize higher teacher education and compensation levels. The program shall provide subsidy payment enhancements to child care programs that met certain requirements. The DCDEE is required to submit a progress report on the program to the Joint Legislative Oversight Committee on Health and Human Services (JLOCHHS) by March 1, 2020.

Conduct Study on Pilot Program and Submit Report. Directs the DCDEE to conduct a feasibility and cost study for development of a pilot program modeled after the North Carolina prekindergarten program for classrooms for children birth through 3 years and to submit a report on the study to the 2020 Regular Session of the 2019 General Assembly by April 1, 2020.

Requires Early Childhood Workforce Report. Directs the DCDEE to report on the status of the early childhood workforce, including educational status and compensation of all lead teachers and teaching staff enrolled in licensed care programs. The report must be submitted to JLOCHHS by January 1, 2021, and every 3 years thereafter.

PART III: POTENTIAL DELAY OF MEDICAID & NC HEALTH CHOICE TRANSFORMATION - would delay until March 1, 2020, the implementation of the Medicaid and NC Health Choice transformation required by S.L. 2015-245, as amended and by the 1115 demonstration waiver if House Bill 966, 2019 Regular Session, [2019 Appropriations Act] does not become law by July 15, 2019.

PART IV: AUTHORIZE ADULT CARE HOMES TO USE SERVICE PLANS COMPLETED FOR MEDICAID PERSONAL CARE SERVICES ASSESSMENT FOR ACTIVITIES OF DAILY LIVING PORTION OF SERVICE PLANS OR CARE PLANS AND AMEND ASSISTED LIVING ADMINISTRATOR QUALIFICATIONS – would require that the initial resident assessment conducted by adult care homes be on an assessment instrument approved in accordance with rules adopted by the Medical Care Commission; would require the assessment used to develop service plans and care plans be conducted within 30 days of admission; and would allow adult care homes to use the Medicaid Personal Care Services (PCS) assessment in place of conducting a separate assessment of a resident's physical functioning for activities of daily living (ADLs) no later than 35 days after admission. (Adult care homes would still be required to conduct an assessment of a resident's physical functioning for ADLs within 30 days of admission if a Medicaid PCS assessment has not been developed within 35 days of admission.)

It would also require the Department of Health and Human Services to certify that an assisted living administrator applicant does not have a substantiated finding of neglect, abuse, misappropriation of property, diversion of drugs, or fraud listed on the Health Care Personnel Registry; and would allow an applicant with a high school diploma and two years of coursework at an accredited college or university, *or*, 60 months of supervisory experience, qualify for certification under the assisted living administrator certification.

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Qualification under a combination of education and experience as approved by the Department remains unchanged.

EFFECTIVE DATE: This bill would become effective when it becomes law.