

LB 1173 Statutory Workgroup Meeting MINUTES October 19, 2023

The Nebraska LB 1173 Workgroup as established by the Nebraska Legislature met October 19th at DHHS offices, 5220 South 16th Street, Lincoln, Nebraska, and via Zoom for the purpose of conducting business consistent with the statutory language of LB 1173, having given notice through release to news media and official public notices published in the Lincoln Journal Star.

The meeting was called to order at 2:04 PM CST. John Stephen from The Stephen Group, the consultant hired pursuant to LB 1173 to assist the Workgroup in meeting its deliverables, called the meeting to order and advised that the meeting was held as a public meeting and was being recorded.

LB 1173 Voting Workgroup members present: DHHS Division Director of Children and Family Services (Interim) and DHHS CEO Tony Green; DHHS Division Director of Behavioral Health (Interim) and DHHS Division Director of Developmental Disabilities Tony Green; DHHS Director of Medicaid and Long-Term Care Kevin Bagley (virtual); DHHS Director of Public Health designee Sara Morgan; Santee Sioux Nation representative Danielle Lepointe (virtual); Commissioner of Education designee LaDonna Jones Dunlap (virtual); State Court Administrator and representative of the State Judicial Branch Corey Steel (virtual); Ponca Tribe of Nebraska representative Stephanie Pospisil.

LB 1173 Workgroup Members Omaha Tribe of Nebraska, Santee Sioux Nation, and Winnebago Tribe of Nebraska representatives were absent.

LB 1173 Ex-Officio (Non-Voting) Members present: Bryson Bartels, Office of Sen. Hansen (virtual); Jenny Skala, NCFF (virtual); Jeff Stafford, United Health Care (virtual); Monika Gross, FCRO; Ryan Stanton, Compass; Maureen Larsen, Governor's Office; Amanda Adams, NE Children's Commission; Jennifer Carter, Office of the Inspector General; Deb Minardi, Probation; Janece Ferris, Release Inc.; Ivy Svoboda, NE Alliance of Child Advocacy Centers; JaQuala Yarbro (virtual)

Internal DHHS staff present were Cedric Perkins (virtual); Greg Brockmeier; Andrew Keck; Amanda Docter (virtual); Michelle Nunemaker; Laura Opfer; Kasey Boes; Camas Holder (virtual); Dr. Alger Studstill; Carisa Masek (virtual); Rajeanna Harris (virtual); Thomas Janousek (virtual); Jeff Powell (virtual) Mike St. Cin. (virtual); Stacy Scholten (virtual).

Others present were: David Hansell; Casey Family Programs (virtual); Mike Betzold, Better Living Counseling Services (virtual); Chris Bowling, Flatwater Free Press; Lisa Battenhorst, Boys Town (virtual); Nebraska Urban Indian Health Coalition (virtual); Kristen Coleman (virtual); Noah Karmann, Office of the Inspector General (virtual); Felicia Kellum, Annie E. Casey Foundation (virtual); Patty Beasley, ODHE (virtual); Jill Holt, NICWA (virtual); Kitty Washburn, NICWA (virtual); Christine Henningsen (virtual); Lane Carr, NDE (virtual); Zainab Rida, NDE (virtual); Mikayla Findlay, NE Legislative Fiscal Office (virtual); Brian Rader, Christian Heritage (virtual); Ericka Lewon, UniteUs (virtual); Misty Flowers, NICWA (virtual); John Stephen, The Stephen Group; Richard Kellogg, The Stephen Group; Austin Kupke, The Stephen Group



(virtual); Brooke Holton, The Stephen Group (virtual), John Cooper, The Stephen Group (virtual), David DeStefano, The Stephen Group (virtual).

The agenda proceeded as follows.

 John Stephen, The Stephen Group gave overview of format of the meeting and plans for the meeting. Voting members ask to hold comments to end and email provided to submit commits. Session is working session for legislatively mandated work group members. Public Comment asked to be held until the end. Email <u>info@stephengroupinc.com</u> provided via chat and in presentation for additional comments.

• Approval of the Agenda/Minutes (Action Item)

 A motion was made by Stephanie Pospisil to accept the agenda and minutes, which was seconded by Sara Morgan and approved by vote, with all voting aye and none voting nay.

• Review of Status Report/Discussion

 Note offered on September Status Report: report indicates "most" primary prevention funding comes from public health; change to reflect substantial funding coming from public health. Clarifying point accepted.

Review Draft Practice Model

- John Stephen, The Stephen Group presented an overview of the LB 1173 Practice Model and opened the discussion to feedback on the model
- Overall:
 - In definition of Child Welfare Practice, want clarification of what it means to "improve outcomes" and what outcomes they are looking for; need a clearer statement/defined of what outcomes Work Group is looking to improve; improving whatever brought family into the system: housing, neglect, truancy—safety, well-being and permanency to be added as improvement outcomes sought.

• Practice Goals:

- For Model Goal of "increased representation": what does it mean by increased representation? Will add clarification that workforce should represent the community.
- Reduce maltreatment goal: also need to focus on parents, caretakers, and their repeat maltreatment—that is what brought people into the system. System is set up to make sure KIDS don't have maltreatment again, but also that families don't MALTREAT again. Will add language.
- Need to add prevention fit into Model Goals.

• Practice Strategic Priorities:

- Case management/system accountability needs to be added somewhere: goals or strategic priorities.
- Strategic Priorities: last one should be at the top/lived experience at top.
- Questions on where addressing disproportionality fit into the Model; these strategies are contained in Supporting Report in more depth.
- Oversight and accountability a priority because current measures are not working.



• Practice Model:

- Add something on direct and intentional diversification of workforce with people who have been in the system. If you have background with CFS or criminal background that can prevent you from joining the workforce
- Need to define a practice model—would be great to know how these things fit together—maybe have a one-pager that lays it all out, something that indicates how different system partners fit in/take ownership ("where do I fit in?"). Want to see who is taking lead on what strategies—would also help the public.
- Need to highlight intentional look at surveillance in order to better direct resources. Targeted resources—use data to do delivery.
- Put role of education and primary role it plays in prevention.
- Improvement of equity in prevention/evidence-based programs detain in Supporting Report.

• Model Engagement Strategies:

- List out actual three-branch entities by title
- Discussion of whether need to rethink who is in the three-branch meeting, community representation, whether to look at how different commissions, committees, work groups, etc. are working on same or similar issues. Agencies should have conduits for this input from community and bring that.

Review Draft Finance Model

- Input that "hidden costs" from infrastructure talked about in Finance Model that organizations have to provide that often are not included in a funding braid. Very gratifying to see in such detail to see this laid out. Example from Florida was really good.
 - Many evidence-based services that Medicaid covers still costs money to begin implementing. There are several counties in Nebraska where there are behavioral health gaps. Need to invest in these practices so that families can have access. This is called out in the Finance Model—Nebraska will need financial investment at front end as these are not covered by FFPSA
- Would be beneficial to add how AFDC is calculated. Direct cash assistance cited need to include how to calculate in statute
 - Title IV-E funding for juvenile probation services raises concern for some: have been conversations county to county; concern that outcome tracking not accurate in dense counties. Afraid of putting more money into juvenile justice system, where there is overrepresentation of black children in juvenile justice system. Finance Model is about claiming for cross-involved youth to draw down federal funds to better support kids in system and move money to front end of system.
- With reducing expenses through improving permanency/exits from system, interest shared in how increasing exits from child welfare system affect disproportionality to see whether the reduction in out-of-home placements includes a proportionate number of BIPOC children in relation to their overall population. NICWC hears



about ICWA cases frequently where children should have been returned long before, creating huge unnecessary expenses.

- Interest with Finance Model in missed opportunities to work with Department of Behavioral Health with FFPSA, working with kids before even come to attention of CFS. Really want to look at how to bring money to Department of Behavioral Health so they don't have to bring over to CFS. Information on this contained in Supporting Report and Legislature can decide how to implement along with stakeholders.
- Under Priority Area 3: Provider Rate Section, like Indiana and Ohio examples.
 Would like more reference to other states in contracting area and technology areas.
 Want to see examples of states that do this well as models for legislation.
- Comment that Nebraska not doing a good enough job of approaching foster care on changes. Providers are working with children and families and need to hire significantly and being able to address that in rates is important. Want to be held accountable, but with contracts being delayed in the past, though addressed this year, haven't always had chance to have input. Need to have regular process for input on outputs. Want to ensure providers part of discussion either on provider rate side or performance based contracting side.
- Comment on whether report or models will provide information to the Legislature about timeliness to permanency by outcome, race/ethnicity, jurisdiction, etc. and where to focus efforts on disproportionality—this is discussed in Supporting Report.

General Discussion

- Will this be broadcast on TV or news for elderly population in addition to online?
 Group will think about how to publicly put this out.
- Practice models will be revised and put back on website, to quickly get feedback and get final report for November 7th Work Group meeting.
- Have 600-700 names of people who attended forums, etc. who we want to send model to as well.
- On or before Dec 1st is final deadline to submit report, but need time for final input and adjustments develop all deliverables.
- Discussion of what attachments/appendices to include and most efficient way to deliver all information to Legislature.
- A lot of the comments heard today will be in implementation—how you do 1173 transformation. Legislature will take recommendations and models and decide how to begin to plan transformation, implement.
 - LB 1173 is Starting point—recommendations living breathing document. Will continue to change as system partners implement
- Adjourn (Action Item)
 - A motion was made to adjourn the October 19 LB 1173 Workgroup meeting, which was seconded and approved by vote, with all voting aye and none voting nay.



- The Workgroup adjourned the meeting at 4:01 PM CST.
- The next workgroup meeting will be held Nov 7th at 5220 South 16th Street, Lincoln Nebraska from 2 to 4 PM CST.

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