



## April 24

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## DIRECTOR'S DESK



[Molly Marsh](#), NACBH Association Director

Believe it or not, it's time to start making your plans to attend the 2019 NACBH Public Policy Conference, July 18-19, in Washington, DC! In just about a week you can expect to see the official registration opening announcement, but this NACBH News is definitely packed with info to whet your appetite for the event.

By addressing the policy issues most important to you

– NACBH Members – the 2019 Public Policy Conference will truly be a can't miss gathering. As your Association Director, consider this my personal invitation to join us in

DC!

I do have to admit to selfish motivations for inviting you to participate in the conference...I honestly cannot wait for the chance to meet each of you in person. Your organizations – through innovative, credentialed programs and evidence-based treatments – have an important and lasting impact for families and communities. I will consider it an honor to meet you and continue to learn more about the change-making work you do every day. Make sure you come and introduce yourself! I look forward to as many one-on-one conversations and opportunities to connect on the future of NACBH and how your association can continue to support you!

## PUBLIC POLICY UPDATE



### **President Signs Medicaid Services Investment and Accountability Act Into Law – Including Advancing Care for Exceptional (ACE) Kids Act**

On April 18, President Trump signed a [bipartisan package of Medicaid bills](#) into law, enacting among other provisions, the ACE Kids Act. NACBH has supported ACE Kids since it was first introduced in 2014, steadily gaining support in each succeeding Congress until its passage last month.



Effective October 1, 2022, [ACE Kids](#) provides a new state Medicaid option to provide coordinated care for children with complex medical conditions through specially designed health homes. To qualify as a health home, providers and health teams must demonstrate the ability to coordinate prompt care for these children, develop comprehensive and family-centered care plans, and coordinate access to all needed care including across state lines when medically necessary. States will have the flexibility to design payment models, and will receive an additional 15% above their normal federal matching rate for the first six months that their new health homes are in operation. The law provides \$5 million for state planning grants to develop care coordination and reimbursement models, as well as methodologies for access and quality monitoring, data collection, and reporting.

We congratulate our colleagues at the Children's Hospital Association, who not only championed the bill in Congress, but demonstrated its potential cost reductions and quality improvements through a three- year, \$23 million [health care innovation award](#) from the Center for Medicare and Medicaid Innovation. We look forward to providing information to NACBH members on how to partner with children's hospitals, other pediatric providers, and state Medicaid agencies to ensure that behavioral health needs are addressed in the comprehensive care plans.

### **CMS and State Medicaid Directors on the Program for July 18-19 NACBH Public Policy Conference**

Key representatives of the Centers for Medicare and Medicaid Services and the National Association of Medicaid Directors will participate in our upcoming public policy conference. We hope you'll plan to join us in Washington, D.C., to hear about federal policy developments and state priorities for children's behavioral health services in the coming year. We'll also review relevant Medicaid legislative proposals, if any are on the table in July.

## NEWS YOU CAN USE

### **Governors Weigh in on State Health Policies, Health-Related Social and Economic Factors, and Early Childhood Development**

The National Academy for State Health Policy has posted several recent blogs rounding up governors' stated priorities in health and human services, as last year's 36 gubernatorial races resulted in 20 new governors, and seven governorships shifted from Republican to Democratic control.

Forty-five governors addressed [health care](#) in their inaugural or "state of the state" speeches this year, with behavioral health issues being the most commonly cited. Increased access was a common theme, whether through establishing new services or expanding existing services, addressing gaps in the system or instituting long-term planning. Other frequent themes were health care costs, Medicaid expansion and operations, and the health care workforce. Equally interesting were "miscellaneous" health-related issues such as gun violence, teen tobacco use, and support for children in foster care. A chart comparing how each governor addressed health topics is available [here](#).

Forty-eight governors outlined [health-related social and economic priorities](#), most commonly, education, jobs and infrastructure. Other key themes were violence prevention, child welfare, justice, equity and cannabis. Each of the "upstream health issues" governors plan to tackle covers a lot of ground – so, again, it's worth reviewing the [chart](#) of where their attention is focused.

And, finally, a [blog](#) highlighting two new governors' long view on addressing early childhood development provides emphasizes the need for collaboration across multiple agencies – and multiple generations – to effectively focus resources and initiatives.

### **Effectively Integrating the CANS Into the Wraparound Process: April 30 Webinar, 2:00 - 3:30 pm Eastern**

The Child and Adolescent Needs and Strengths (CANS) is the most widely-used assessment tool in public child-serving systems, including child welfare, mental health, juvenile justice, schools, and other service settings. According to its developer, John Lyons, Ph.D, versions of the CANS are currently used in every state, with statewide applications in 36 states.

The Wraparound process of intensive care management for children and youth with complex behavioral health needs is equally ubiquitous in its many variations and, while their target populations don't precisely overlap, some jurisdictions and providers have figured out how the CANS and Wraparound can be used together, effectively.

Chapin Hall has partnered with the National Wraparound Initiative, the National Wraparound Implementation Center, and the John Praed Foundation, to produce a [joint statement](#) providing guidance on how to effectively coordinate the CANS assessment within a well-implemented Wraparound process. NACBH members that use or are curious about the CANS, even without a formal Wraparound program, will find it useful for your own programs and care planning.

[Register Here for the Webinar](#)

UPCOMING CONFERENCE

**Save the Dates!**

**NACBH Public Policy Conference**

Washington DC, July 18 - 19, 2019

Registration Opens April 30!

Watch your inbox for your invitation to register



**NACBH Emerging Best Practices Conference**

St. Pete Beach, FL

December 4 - 5, 2019



**Best Practices Committee**

Standing Monthly Conference Call: 3rd Tuesday of each month, 1:00 – 2:00 (Eastern)

View the access information in the Member's Only section of the website or contact

[lpennington@nacbh.org](mailto:lpennington@nacbh.org) or any questions and information