March 2017 Celebrates National Social Work Month:
The official theme for Social Work Month in March 2017 is "Social Workers Stand Up!"

Celebrated each March, National Professional Social Work Month is an opportunity to recognized the important contributions of social workers across the country. Our nation’s more than 600,000 social workers have amazing tenacity and talent. They confront some of the most challenging issues facing individuals, families, communities and society and forge solutions that help people reach their full potential and make our nation a better place to live. For more information, visit socialworkmonth.org.

“The NC Division of Social Services recognizes Social Workers along with the many staff of the 100 County Departments of Social Services as “unsung heroes” who on a day in and day out basis address the needs of our most vulnerable citizens.

These are the staff members who turn the lights on in the morning and off at night, who eat lunch at their desks, who never miss a day’s work, who remain compassionate and courteous in their daily interactions and who never fail to provide encouragement and hope for a better life for the individuals and families they serve.

On behalf of the Division of Social Services and the NC Department of Health and Human Services, I very much appreciate all of your hard work and your professional dedication. It is my clear impression that you stand up every day and make a positive difference to the citizens of North Carolina.”


Wayne E. Black,
Senior Director for Social Services & County Operations

March - April 2017
Upcoming Events

Statewide DSS Director and Fiscal Officer Webinar/Conference Call
9am to 11:15am on March 22, 2017 (4th Wednesday).
Please follow the link below to register for the meeting. https://attendee.gotowebinar.com/register/869674373176935521

After registering, you will receive a confirmation email containing information about joining the webinar. The recording of DSS Director/Fiscal Officer Webinar meetings are available at: https://www2.ncdhhs.gov/dss/county/dssdirectormeetings.htm

March 16-17, 2017: NCACDSS Western Regional Director’s Meeting
Buncombe County HHS
200 College St. Asheville, NC

Protecting Our Native Children: “It takes a Village: Healing our Children, Healing our Communities” 8:30 am – 3:00 pm @ Western Carolina University, Cullowhee, NC (Health and Human Science Bldg. (76) - Room Number 204). Registration Free - REGISTRATION REQUIRED DUE TO LIMITED SEATING
Register by Phone: (919) 807-4448 Lori McClain
Register Online: www.united-tribes.org

April 4-6, 2017: New DSS Director Orientation

April 19-21, 2017: North Carolina Employment and Training Association (NCETA) Spring Conference
Hilton Riverside in Wilmington NC

Conference Information and Program
Conference Registration

April 26-28, 2017: NCACDSS Annual Meeting
DHHS Press Release (3/7/17)

DHHS Secretary Asks Clinicians To Help Fight Opioid Abuse

RALEIGH, N.C. – DHHS Secretary Mandy Cohen, MD, is calling on thousands of clinicians across North Carolina to join the fight against opioid addiction in North Carolina, a crisis that has seen more than 13,000 North Carolinians die unnecessarily from unintentional overdoses since 1999.

“We need the help of all prescribers to turn the tide of this opioid crisis,” Cohen said. “At DHHS and across Governor Cooper’s administration, we are working in a coordinated fashion to ramp up prevention, treatment and recovery efforts.”

In her letter, sent today, she notes that several factors have contributed to the opioid epidemic facing North Carolina and the rest of our country. The roots of this national and state crisis trace back nearly two decades when physicians and other clinicians were encouraged to treat pain more aggressively, and patients were counseled that all pain could be readily and quickly controlled without long-term negative impacts. We now know much more about the highly addictive properties of opioids and the complex social and economic factors that have created the perfect storm resulting in this crisis.

Cohen believes North Carolina is uniquely positioned to help end this epidemic. Her letter identifies ways clinicians can take an active role in curbing abuse, including:

- Screening patients for risk or presence of opioid use disorder, and connecting them with evidence-based treatment
- Using secure prescribing software to communicate prescription orders, particularly for drugs that are prone to abuse and diversion
- Registering with the N.C. Controlled Substance Reporting System to review patient prescription histories and incorporate them into clinical best practices around prescribing
- Visiting CDC’s Guideline for Prescribing Opioids for Chronic Pain, which has been adopted by the NC Medical Board. Free training is underway.

Cooper’s proposed budget calls for directing more than $14 million to address the opioid crisis. His budget proposal would also invest in the N.C. Controlled Substances Reporting System.

The Centers for Disease Control and Prevention estimates the cost of overdose deaths in North Carolina totaled $1.8 billion in 2015. Overdose death rates are higher among men, whites, and those between the ages of 25-54. Opioid deaths involving prescription pain medications such as oxycodone, hydrocodone and fentanyl are leading causes of all overdose deaths. DHHS has posted to its website a fact sheet detailing these and other helpful statistics.
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**Fiscal Reminders**

**Local Business Liaisons (LBLs) – Observations / Technical Assistance**

Reclass: Letters to Controllers’ office to request reclassification of expenses from “all county” back to an appropriate fund source can be submitted at any time. Counties do not have to wait till year-end.

Reports: Continue to monitor your allocation spending and balances on the XS411 and your MOE spending on the WC373 YTD report. Also, monitor all revenues to verify receipts and projections for current year are in line with budget. If underspending review coding and adjust if appropriate.

Reversals: If you have reversals to do go ahead and get them completed. You do not want to wait to month 12 to do reversals this can/will affect your numbers and possible in a negative way. You don’t want to think you have met MOE and the reversals change that outcome.

CoReLS: Please try to make sure you are uploading as soon as you can. Several counties are still having multiple issues with uploading and it not the same counties each month. We seem to be pushing the deadline every month because of technical issues.

Child Support: Continue to reconcile Child Support Incentives payments and reinvestment expenses reported on the DSS 1571. Are you following your plan?

DCD Letter: Watch for the Dear County Director Letter coming for Automation/CPS IV-E to help assist counties in meeting MOE. Note: If using automation, you must submit a copy of the invoices to your LBL.

NEMT: Please make sure you are involved in the NEMT/NC TRACKS training events. Please if you are having issues in your county let Carolyn McClanahan know.

**Upcoming Meetings:**

- Western Regional Meeting: Buncombe County HS- Administrative Bldg. March 16 & 17, 2017
  
  Please register at [http://ncacdss.org/meetings/](http://ncacdss.org/meetings/)

- Central Regional Meeting: Location TBD on May 18 & 19, 2017

- Eastern Regional Meeting: Clam Digger Inn in Atlantic Beach on May 25 & 26, 2017
NOTE: Tina Bumgarner will be giving a presentation on Foster Care and 5094’s on the 24th. There will be no registration for the 24th.

DSS Fiscal Monitors – Observations / Technical Assistance

- It is imperative that all receipts reconcile to deposits, revenues posted to the general ledger and to the amount reported on the 1571.
- ADP Equipment includes copiers and multi-function copier/printer/scanner/fax machines which are connected to your agency’s network. These items are required to be on an approved ADP Plan to claim the costs – whether purchased or leased. Please consult with your LBL if you have questions or need clarification on what is to be included on your ADP Plan.
- Carefully review the ADP plan approval received from Hank or Andy. Just because you see the first page “approval” it doesn’t mean that everything that was submitted was approved. You must only claim reimbursement for what is actually approved for FFP.
- Counties are reminded if a Penetration Rate is not entered in TEC, any time coded to the applicable code will be dropped in the SIS import process. To avoid this error, reconcile the Percentage of Time Report to the minutes reported in TEC. Always review and verify that all penetration rates are entered into NC-CoReLS correctly.
- Agencies are reminded that day-sheets are required for NEMT (Medicaid Transportation) and all IMC Programs. Please refer to the SIS Manual, Instructions for Worker Daily Report of Services (DSS-4263), By Whom Prepared located at: Services Information System (SIS) Manual.
- The SIS Manual and SIS-CARS Open Window Crosswalk should be referenced when determining whether a cost is reported on the Part II or Part IV
- Agencies must have a way to properly account for time spent by employees performing non-DSS activities. Remember you are dealing with the reduction of FTEs, salary, and fringe, as well as other activities, such as mileage paid for traveling to and from non-DSS agencies or to training for non-DSS related activities.

Operational Support Team (OST)

DAAS Updates

DMA Updates

NC Medicaid by the numbers – 2017
Rose Hoban, NC Health News; March 13, 2017

Children’s Health
(Insider for March 15, 2017)

Overall health conditions for North Carolina children continue to be a mixed bag, according to an annual report timed for release Tuesday by the nonprofit groups N.C. Child and N.C. Institute of Medicine. The 21st annual report measures 22 socioeconomic subsets within the four main categories of access to care, healthy
births, safe homes and neighborhoods, and health risk factors. As has been typical, the majority of the subsets were given a "C" grade.

The state topped out with an "A" grade for the number of children covered -- at least for now -- by health insurance at 95.6 percent. The rate was at 91.9 percent in 2009. By comparison, the number of uninsured parents was at 15.3 percent in 2016. The uninsured rate has dropped by half since 2009, in large part to 1.2 million children being covered by the state version of the federal Children's Health Insurance Program (CHIP), 55,000 children covered in households gaining insurance on the federal exchange marketplace, and through Medicaid.

Meanwhile, the lowest grade was an "F" for economic security as it relates to children living in poverty. Nearly 53 percent of North Carolina's children under age 5 live in poor or near-poor homes, which can lead to poorer health outcomes, lower educational attainment and reduced economic opportunities, the groups said. Of the state's 2.3 million children -- defined as under age 18 -- nearly one in seven live in high-poverty neighborhoods, up 56 percent from 2010. (Richard Craver, WINSTON-SALEM JOURNAL, 3/14/17).

Public Records Compliance
State Archives has put together some best practices for electronic communications including guidelines on their use in state government and how to retain them as public records: http://www.archives.ncdcr.gov/Portals/3/PDF/guidelines/Text_Messaging_Document_revised_FINAL_20170208.pdf