

Meeting Minutes
Hybrid Meeting | June 10, 2026, 9:00 AM – 3:00 PM

ATTENDEES

Council Members

Name	In-Person	Virtual	Name	In-Person	Virtual
Michelle Laws (Chair)	x		Heather Johnson		
Ashley Snyder-Miller (Vice-Chair)	x		Jeannie Irby		
Ada Elizabeth Gil-Jimenez		x	Jessica Aguilar		x
Amie Brendle		x	Johnnie Thomas		
Angela-Christine Rainear		x	Lilly Parker	x	
Annette Smith	x		Lorraine Washington	x	
Bob Crayton		x	Lynn Martin	x	
Crystal Foster		x	Nathan Cartwright		
Domenica “Mamie” Hutnik	x		Patty Schaeffer	x	
Flo Stein	x				

Staff/Guests

Name	Staff	Guest	Name	Staff	Guest
Ann Marie Webb	x		Kelly Crosbie		
Badia Henderson	x		Lisa Jackson	x	
Crystal Dorsey	x				
Erica Asbury	x				
Jennifer Meade	x				

Agenda Topic:	Welcome/Roll Call/ Approval of Agenda and Minutes
Presenter:	Dr. Michelle Laws, Chair
- The meeting was called to order at 9:04 AM, and the presence of a quorum was confirmed. - A motion was made to approve the May minutes. - The motion was seconded and approved. - A motion was made to approve changes to the May agenda. - The motion was seconded and approved. - Dr. Laws, SCFAC Chair, reviewed housekeeping rules. - Reminded members to inform her at the start of each meeting if they will need to leave early, as this may affect quorum and the ability to vote on agenda items. - Emphasized the importance of staying on topic during discussion and maintaining respect for all members.	
Agenda Topic:	Vaya Health and Partners Health Management Merger
Presenter:	Libby McCraw, Partners Health Management Chief Operating Officer (COO) Tracy Hayes, Vaya Health Area Director and Chief Executive Officer
- The formal merger announcement was made on May 22, 2026. - Leadership from both organizations had been planning the merger for months and have legal authority under NC G.S. §122C-115.5(c). - NCDHHS Secretary Devdutta Sangvai approved the merger on 5/22/26. - The goal is to strengthen and preserve the public system through consolidation.	

Reasons for Merging:

- Consolidation pressures to reduce the number of NC Medicaid plans.
 - Declining enrollment due to program shifts (Children and Families Specialty Plan, HR1/work requirements, loss of Medicaid Direct).
 - Fiscal pressures and budget overruns.
 - Re-procurement risk and competition from commercial plans.
 - The new legal name will be Vaya Partners Health.
 - Brand name will be Vaya Partners with the tagline “Improving Lives. Strengthening Communities.”
 - A statewide map was created to clarify the catchment areas of Vaya Partners Health, Alliance Health, and Trillium Health Resources for members of the General Assembly.
- Background:
 - Vaya has previously undergone mergers, including absorbing Western Highlands and later receiving counties after the dissolution of Cardinal Innovations.
- Board representation will be evenly split between Vaya and Partners.
 - Leadership teams will determine staffing roles to best utilize existing talent.

Merger Goals:

- Strengthening provider network and quality.
- Reduce provider administrative burden across 47 counties.
- Improve member access and continuity of care.
- Integrate each entity’s strengths and branding.
- Ensure long-term financial sustainability.
- The merged entity will use Vaya’s claims system and provider contracts.
 - All providers in good standing will remain contracted.
 - Administrative headquarters will be in Gastonia; other office locations will remain.
 - Remote and field-based work will continue.

Governing Board Structure:

- Governing Board structure will include 13 representatives from each catchment area.
 - 2 CFAC members from each legacy board (4 total)
 - 8 additional appointments from each legacy board
 - 3 County Commissioner Advisory Boards (CCABs)/Regional Board appointees
- Non-voting representatives (1 each) from the Cherokee Indian Hospital Authority and the Provider Advisory Council.
- Vaya and Partners Board Chairs will serve as Co-Chairs until a vote by the consolidated Board in Jan. 2027.
- Regional Boards (including DSS and County Commissioners) fully support moving forward with the merger.
- CFAC will continue recommending appointments for CFAC vacancies.

Key Future Dates & Upcoming Meetings:

- Transition period:
 - May 21–Sept. 30, 2026; merger effective Oct. 1, 2026.
- In-person meetings of the Vaya/Partners CFAC Steering Executive Committees are scheduled for July 2026.
- A virtual/hybrid CFAC Meet and Greet is planned.
- An email solicitation will be sent to recruit CFAC participants for the Bylaws Workgroup.
- Joint meetings will be held to realign stakeholder committees, including LTSS/MAC, Innovations, and the Human Rights Committee.
- Vaya and Partners Boards will identify legacy members prior to Oct. 1, 2026.

- A combined regional board meeting will be held before Oct. 1, 2026, to vote on County Commissioner Advisory Board (CCAB) appointments.

Other Discussion:

- Physical office locations remain important for effective community-based services.
 - Partners and Vaya staff will meet in person on merger topics.
 - CFAC Meet & Greet will be hybrid.
- Question about Partners representing the 5th regional CFAC.
 - Response: CFACs are self-governing and determine where and how they will meet.
- Question on lived experience and self-direction advocacy,
 - Response: Anyone may apply for CFAC membership at any time.
- Employer of Record (EOR) subcommittees from both entities will meet.
- Member engagement meetings will provide a forum for questions.
- Increasing youth involvement remains a priority.
- Staff currently assigned to offices will continue working from those locations.
- Peer Support Training is not currently offered by Vaya but remains open for future consideration.
- LME/MCOs are government entities (public authorities) and are not subject to Open Meetings and Public Records laws.
- Leadership is reviewing funding, state allocations, and grants, including HUD opportunities.
- DHHS conducted a full review of the merger plan and approved it prior to presentation to either governing board.
- Lessons learned from Cardinal Innovations:
 - CEO salary ranges are set by Office of State Human Resources (OSHR)
 - Leadership salaries fall within approved ranges
 - McCraw will serve as COO in the new entity
 - Incentive bonuses will continue to be available to staff

Impact on Standard Plans:

- Vaya Partners will use Carolina Complete Health (following WellCare's merger with Carolina Complete Health).
- Nurse line services will remain available.
- Partners' use of Carolina Complete Health for Utilization Management will end after Sept. 30, 2026.
- Leadership will ensure staff decisions reflect best fit; some staff may retire, and past consolidations show staff can transition successfully.
- Continued investment in Quality Improvement remains essential, including non-measurable factors that support improvements in members' lives.
- Diversity, Equity, and Inclusion (DEI) remain a critical priority.
 - Leadership will reflect community diversity.

Agenda Topic:	Division of Mental Health, Developmental Disabilities, and Substance Use Services (DMH/DD/SUS) Update
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Presenter:	Kelly Crosbie, Assistant Secretary
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Due to Assistant Secretary Kelly Crosbie's absence, the scheduled DMH/DD/SUS presentation was not provided.

Agenda Topic:	Recognition of Departing Members/Agenda Revision
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Presenter:	Dr. Michelle Laws, Chair
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Recognition of Members:

- Recognition was given to SCFAC members concluding their service.
 - Ada Elizabeth Gil-Jimenez - stepping down
 - Heather Johnson - completing second term
 - Jessica Aguilar - completing second term
 - Lorraine Washington - completing second term

- Mamie Hutnik - completing first term
- Michelle Laws - stepping down as SCFAC Chair
- Dr. Michelle Laws, SCFAC Chair, announced her decision to step down.
 - Emphasized the importance of continuing focus on the committee's mission.
 - Encouraged members of the public interested in serving to contact the Advocacy and Empowerment Team.

Agenda Revision:

- A motion was made to revise the agenda by moving "SCFAC Work" from 2:00 PM to 11:00 AM.
- The motion was seconded and approved.

Agenda Topic:	SCFAC Work
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Presenter:	Dr. Michelle Laws, Chair
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- Nominating Committee nominations for Chair and Vice-Chair were declined by several members before additional nominees were identified.
 - Chair Nominees: Angela-Christine Rainear, Bob Crayton, and Lilly Parker
 - Vice-Chair Nominees: Ashley Snyder-Miller and Patty Schaffer
 - A motion was made to close nominations.
 - The motion was seconded and approved.
- Voting was conducted by written ballot for in-person attendees and by text for remote participants.
- New members were reminded of SCFAC duties and reappointment requirements.
- Election Results:
 - Chair: Lilly Parker
 - Vice-Chair: Ashley Snyder-Miller
- During discussion, Dr. Michelle Laws, SCFAC Chair, reiterated the importance of members with ending first terms.
 - Notifying their appointing authority if they wish to be reappointed.
 - Appointing bodies will issue a confirmation letter to the Department.
- A procedural question was raised regarding eligibility for a second term Vice-Chair nomination.
 - Brief disruption in the discussion.
 - Order was subsequently restored, and a short recess was taken while awaiting the next presenter.

Agenda Topic:	Division of Health Benefits (DHB) Update
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Presenter:	Chris Gordon, Chief Financial Officer
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NC Medicaid Update:

- Medicaid Budget Reduction Options:
 - Reduce rates
 - Reduce membership
 - Change or reduce program benefits
- Note: Provider rate reductions implemented earlier in the SFY were reversed in January 2026.

FY2026 Medicaid Budget Status:

- Medicaid is fully funded through FY2026 (end of June).
- A \$319 million appropriation passed on April 28, 2026.
- The Governor signed the appropriation on April 30, 2026.

FY2027 Medicaid Budget Planning:

- Work is underway on the FY2027 budget.
- Currently, \$0.18 of every \$1 in NC General Fund revenue supports Medicaid.
- The General Assembly must address a \$1.048 billion General Fund need for next year.
- NC collects approximately \$35 billion annually in state tax revenue.

- In 2022 (COVID-19), Medicaid's share was \$0.11 per \$1.
- Discussion noted sustainability concerns as NC's population reaches 12 million.
- The next long session begins January 2027.

Federal Funding and Upcoming Changes:

- Two-thirds of Medicaid funding comes from federal government.
- Federal rules are changing as overall Medicaid spending increases.
- NC currently provides \$7.2 billion in payments to improve member quality of life.
- Beginning July 2028, these payments will decrease under new federal limits.
- All states will face challenges as provider taxes and state-directed payments are restructured under federal spending caps.

Eligibility Recertification Concerns:

- Question was raised about recertifying eligibility every six months, including for individuals with lifelong disabilities.
 - Clarification is needed regarding consequences for missing the first recertification.
- CFO Gordon recommended directing this question to Sarah Gregosky, COO for DHB, and suggested inviting her to present to SCFAC.
 - Involvement in HR1 implementation and work requirements.

Agenda Topic: Public Comment (summarized)

Presenter: Dr. Michelle Laws, Chair

Wes Rider:

- Expressed concern that a volunteer-developed policy on recruiting and retaining consumers and family members for DMHDDSUS workgroups has not been implemented.
 - Reference link: <https://www.ncdhhs.gov/documents/files/policy-do112/open>
- Emphasized the importance of strong local-level engagement and ensuring person-centered organizations value service-recipient input.
- Highlighted that individuals receiving services and family members bring essential but distinct perspectives, and that their absence represents a social injustice.
- Stated that service-recipient input should be actively sought, valued, and incorporated into leadership, planning, and oversight.
- Chair Laws noted current SCFAC vacancies and encouraged outreach to individuals interested in serving.

Janet McDaniel:

- Requested review of Senate Bill 873, which proposes a 3-tiered Innovations Waiver with capped service levels.
- Noted that many receiving 1915(i) services already exceed the lowest cap and expressed concern that additional caps are unnecessary.
- Stated that proposed tiers do not account for inflation or rising costs.
- Urged SCFAC to advise DHHS and policymakers that capping services based on funding rather than individual needs would be harmful.
- Chair Laws noted she had invited i2i Conference presenters to give an SCFAC presentation on the bill at a future meeting.
- Chair Laws thanked all speakers and closed the Public Comment section.

Agenda Topic: SCFAC Quarterly Report/Annual Recommendations

Presenter: SCFAC Members and DMH/DD/SUS Staff

Annual Report Recommendations:

- A motion was made to move the Annual Report Recommendations to the July meeting
 - Motion was seconded and approved.

- Delay was needed due to recent changes and issues that could not be incorporated before the June review.

Gaps and Needs:

- Lorraine Washington shared a letter from a North Central CFAC member describing two serious incidents involving individuals in Independent Living settings, highlighting the need for:
 - Stronger oversight and monitoring
 - Routine wellness checks for high-risk individuals
 - Improved incident reporting and communication protocols
 - Statewide accountability for I/DD facilities
- Point of Order:
 - Dr. Laws clarified that the letter was intended for Public Comment but could not be accessed at that time, so it was shared during this agenda item.
- Discussion noted that ARC previously operated these homes; questions were raised about current management (potentially private equity).
- SCFAC may consider requesting a current assessment of these facilities.

Quarterly Report:

- Kayreen Gucciardo provided an update on SCFAC Recommendation 6 - Veterans & Military Families.
 - A multi-part Veterans Support Specialist (VSS) training series is being developed, with three free one-hour virtual courses for:
 - Individuals supporting veterans
 - Clinicians and providers
 - Community and faith leaders/the general public
 - Courses are expected to go live by the end of July.
 - The Division is committed to expanding training access, standardizing certification, and integrating VSS roles statewide.
 - Crisis-line materials (flyers, wallet cards) continue to be distributed; national suicide rates have risen, but NC veteran suicide rates have declined.
- Ginger Yarbrough reported on SCFAC 2023–24 Recommendations 9(a–c) regarding standardizing Interpersonal Violence (IPV) training for individuals with IDD, families, and professionals.
 - Core Competencies are embedded in NC General Statute 122C.
 - Training is not required but will be available.
 - Some providers may already have training contracts.
 - A Request for Proposal (RFP) for Core Competency Course development (including IPV content) is planned:
 - Anticipated Post Date: August 1, 2026
 - Optimistic Launch Date: March 2027

Adjournment:

Chair Laws officially adjourned the meeting at 1:16 PM.

Action Items	Responsible	Deadline
Annual Report Recommendations topic to be added to the July SCFAC Meeting Agenda	Advocacy & Empowerment Support Staff	Prior to July Meeting
Invite DHB's Sarah Gregosky to present on HR1 implementation work at a future SCFAC meeting	SCFAC Chair or Vice-Chair	Unspecified
Possible Senate Bill 873-Tiered Innovations Waiver Cap presentation at future SCFAC meeting	SCFAC Chair or Vice-Chair	Unspecified