

# 2021 GENERAL ASSEMBLY BILL & BUDGET OUTCOMES



## EARLY CARE AND EDUCATION:

### Improved Prenatal Health Care Benefits, Particularly for Women of Color

- **12 months of postpartum health coverage** for economically disadvantaged mothers enrolled in Medicaid/FAMIS. This change will help ensure pregnant women can obtain health and mental health services longer than 60 days postpartum. This strategy was recommended to improve birth outcomes and reduce maternal death, particularly among Black moms. **Coming: Fall 2021**
- **Prenatal health care coverage for economically disadvantaged mothers who are undocumented immigrants.** Currently Medicaid will only cover delivery services for undocumented mothers and not preventative prenatal care. **Coming: Summer/Fall 2021**
- **A Medicaid-funded doula benefit** for eligible moms to obtain doula care during pregnancy, delivery and post-partum follow-up. Doula care is a recommended strategy to improve birth outcomes and reduce maternal death among Black mothers. **Coming: July 1, 2021**
- The General Assembly directed the state Medicaid agency to continue planning for a **Medicaid-funded home visiting benefit.** **Coming: In the future**

### Increased Eligibility for Cash Assistance and Affording Child Care

- **HB2206 increases income eligibility for child care assistance to \$89,000 for a family of four and allows families to be eligible when looking for work.** Currently, the enhanced eligibility will be in effect through July 31, 2021. The bill also eliminates the child support enforcement requirement permanently. The value of assistance depends on locality, age of child and type of provider but it is a significant cash value. For example, a family in Henrico County with an infant would receive about \$1,000 per month for full-time care. Interested families must apply through their local DSS or the CommonHelp portal and must enroll at an approved subsidy vendor or encourage their child care provider to become approved. **Coming: ASAP, when signed by Governor Northam**

- **Broad-based categorical eligibility for SNAP/TANF increases income limits and eliminates the “asset test”** (when families have more than \$2,500 in savings). The General Assembly also approved a 10% increase in TANF eligibility and cash assistance. **Coming: July 1, 2021**

## **Stabilizing the Child Care Sector & Supporting the Early Childhood Workforce**

The child care sector has been disrupted by COVID-19 with many providers struggling to keep their doors open. As of March 1st, one quarter of child care providers remain closed. SB1316 from Senator Jennifer McClellan directs the state to create a pilot program using state/federal child care funds to pay for child care through grants and contracts, or enrollment, and to evaluate measures that afford the true costs of higher quality including higher wages and wraparound services.

The final budget includes **\$5 million in early educator incentive grants** to help increase wages by providing a \$1,500 incentive for early educators in publicly funded programs.

## **Enhancing the Virginia Preschool Initiative (VPI)**

The 2020 Special Session and 2021 GA Session approved \$48 million in enhancements to the Virginia Preschool Initiative beginning July 2021 including:

- Increasing the per pupil rate to \$7,655
- Allowing for larger class sizes
- Incentivizing mixed-delivery partnerships with private child care
- Flexibility to move preschool funding between school divisions
- A pilot to enroll income eligible three-year-olds

## **Addressing Young Children’s Mental Health Needs**

The General Assembly directed the Department of Education to have the “green light” to move forward with implementing plans for Early Childhood Mental Health Consultation to meet the social-emotional needs of young children and to report back to the General Assembly about any additional funding needs or legislative changes.

## CHILD WELFARE:

### Scaling Up Evidence & Community-Based Practices to Achieve Better Outcomes for Children and Families

- **Funding statewide Family First Prevention Services Act (FFPSA) prevention services program. \$14.2 million in funds** to scale up evidence based services for children and families to prevent entry into foster care.
- **Funding Local Department of Social Service Positions for Implementing the Family First Prevention Services Act includes \$16 million over two years.** Appropriate federal funds for local staff and operations – Increases the appropriation for federal pass through funding for local departments of social services.

### Supporting Kinship Caregivers & Families

- **Supporting “Kin First”, HB1962, Delegate Gooditis.** Requires local departments of social services and licensed child-placing agencies to involve in the development of a child’s foster care plan the child’s relatives and fictive kin who are interested in the child’s welfare. The bill requires that a child 12 years of age or older be involved in the development of his foster care plan; under current law, a child’s involvement is mandatory upon reaching 14 years of age. The bill contains other amendments to provisions governing foster care and termination of parental rights that encourage the placement of children with relatives and fictive kin.
- **State-Funded Kinship Guardianship Assistance program, SB1328, Senator Mason.** Creates the State-Funded Kinship Guardianship Assistance program (the program) to facilitate child placements with relatives, including fictive kin, and ensure permanency for children. The bill sets forth eligibility criteria for the program, payment allowances to kinship guardians, and requirements for kinship guardianship assistance agreements.
- **Implementing emergency approval process for kinship caregivers, allotted \$75,000 in the budget.** Funds an emergency approval process for kinship caregivers. Children in the foster care system often move from placement to placement and this process will help place children with eligible kin.
- **Diversion Program for Kinship Families.** Adds language directing the Department of Social Services to create a diversion program supporting relative and fictive kin families who receive custody of a child from the court and report the steps to implement such program to the Commission on Youth by November 30, 2021.

## Other Supported Bill Outcomes

- **Court Appointed Special Advocates Sharing Information and Participating in Meetings, HB1866, Delegate Delaney.** Permits court-appointed special advocates to participate in and share information with family partnership meetings and in meetings of family assessment and planning teams, multidisciplinary child sexual abuse response teams, individualized education program teams, and multidisciplinary teams related to child abuse.
- **CSA Implementation and Monitoring, HB2212, Delegate Plum.** Requires the director of the Office of Children's Services to provide for the effective implementation of the Children's Services Act
- **Casework Salary Increases, Restores \$2.2 million each year** from the general fund and \$2.2 million each year from nongeneral funds for local social services departments' (LDSS) to increase minimum salary levels for LDSS family services by 20 percent, and to increase minimum salary levels for benefit program services, self sufficiency services and administrative positions by 15 percent that are currently below the new minimum threshold. These actions should assist in reducing the high turnover and vacancy rates in these LDSS positions.
- **Extended payments for those aging out of Fostering Futures.** Adds language to extend payments to children aging out of the Fostering Futures program through September 2021. The recently passed federal Coronavirus Relief and Response Supplemental Appropriations Act has extended the John H. Chafee Foster Care Program for Successful Transition to Adulthood funding through September 2021.

## FAMILY ECONOMIC SECURITY:

### Invest in Paid Time Off to Promote Community Well-Being

- **Paid sick leave for home health workers, HB2137, Delegate Guzman.**  
Provides paid sick leave to Medicaid funded home health care providers. We are disappointed the bill was amended to narrow the eligible workforce from all essential workers to home health care workers.

### Foster Financial Security and Economic Resilience

- **Improve eligibility for TANF & SNAP participants, HB1820, Delegate Helmer.**  
Casts a wider net for families to obtain public benefits for nutrition and cash assistance. Almost half of the caseload for nutrition benefits are children and SNAP caseloads have increased during the pandemic. This bill will provide a higher income limit to obtain benefits and eliminates a systemic barrier to obtaining assistance, the “asset test”, that denies eligibility for households with more than \$2,250 in assets, such as bank accounts or savings. Children who receive SNAP benefits will be categorically eligible for free school meals. The bill also allows for individuals in the SNAP and TANF programs to meet work-related eligibility requirements when attending post-secondary education programs.
- **Improvements to the Full Employment Program (FEP) for TANF participants, HB2035, Delegate Tran.** Provides an incentive to employers wishing to hire parents participating in the state workforce initiative, VIEW. Employers participating in the Full Employment Program (FEP) would now receive \$1,000 per month incentive to hire a VIEW participant. Wages earned through FEP would not count against the participants VIEW/TANF cash benefits.
- **Increase Temporary Assistance for Needy Families (TANF) by 10 percent. \$8.3 million allotted in the budget.** This amendment directs the Virginia Department of Social Services to increase the Temporary Assistance to Needy Families (TANF) benefits by ten percent. The General Assembly provided a 15 percent increase beginning July 1, 2020, bringing the average monthly payment for a TANF family to \$361.
- **Implement Temporary Assistance for Needy Families (TANF) Individual Development Accounts (IDA). \$2.1 million for FY22 allotted in the budget.** This amendment implements a program so that TANF-eligible individuals may save funds in an individual development account established for the purposes of home purchase, education, starting a business, transportation, or self-sufficiency.

## Increase Access to Food Security

- **Virginia Food Access Investment Program. \$2 million for FY22 allotted in the budget.** This amendment increases the first year funding for the Virginia Food Access Investment Program from \$1.1 million to \$3.1 million to increase access to fresh and nutritious foods in rural and urban communities.
- **Produce Rx Program established; report, HB2065, Delegate McQuinn.** Requires the Department of Social Services to convene a workgroup to develop the framework for the Produce Rx program and report to the Governor and Chairmen of the House Committee on Appropriations and Senate Committee on Finance and Appropriations by October 1.

## HEALTHCARE ACCESS:

### Expanding Coverage to Immigrant Populations

- **Clarify that Medicaid “Emergency Services” specifically cover COVID-19 screening, testing, and all related treatment, HB2124, Delegate Lopez.** Directs the Department of Medical Assistance Services to cover COVID-19 services, such as treatments and vaccinations, to be emergency services, for immigrants that meet the requirement for Medicaid. Federal HRSA funds would be use in lieu of Medicaid. This bill would kick in if those funds were no longer allotted.
- **Health Care Coverage Options for Undocumented Children.** Convenes a workgroup to research and recommend strategies for the financing of health care coverage for undocumented immigrant children.
- **Coverage of Prenatal Services, costs savings from Medicaid match.** Allows the payment for prenatal care coverage for income-eligible immigrant mothers through Medicaid. Currently undocumented immigrant moms only receive health coverage for birth and delivery. Prenatal coverage would begin with a state plan amendment is approved. **Coming: Summer/Fall 2021.**

### Investing in Healthy Birth Outcomes

- **Directs the state Health Commissioner to establish a Task Force on Maternal Health Data and Quality Measures, HB2111, Delegate Herring.** The purpose of the Task Force is to examine maternal health data collection processes and establish policies to improve maternal care, quality, and outcomes. The Task Force would report its findings and conclusions to the Governor and General Assembly by December 1 of each year and will conclude its work by December 1, 2023.
- **Analysis of Medicaid/FAMIS coverage and outcomes, \$500,000 allotted in budget for FY22.** Funds are provided to the Department of Medical Assistance Services (DMAS) to contract for an analysis of payment, authorization, and provider requirements contributing to the outcomes of Medicaid and FAMIS-covered pregnancies and births.
- **Increase access to doula care for pregnant women, \$2.4 million allotted in budget for FY22.** Provides increased access to doula care for pregnant women. Doulas have been shown to have a demonstrated impact to reduce racial disparities in maternal health.

- **Medicaid doula provider training and resources, \$135,320 allotted for FY22.** Funds the second year and one position for the Department of Medical Assistance Services to develop and implement a provider training program for Doula service providers to learn how to explain patient access and bill for Medicaid benefits.
- **Plan for Fetal and Infant Mortality Review Team, \$51,146 allotted for FY22.** Directs the Office of the Chief Medical Examiner to convene a work group to develop a plan for the establishment of a Fetal and Infant Mortality Review Team by December 1, 2021.
- **Task Force for Maternal Health Data and Quality Measures, \$151,180 for FY22.** Requires the State Health Commissioner to establish a Task Force on Maternal Health Data and Quality Measures for the purpose of evaluating maternal health data collection to guide policies to improve maternal care, quality, and outcomes for pregnant women.
- **Funding to increase access to substance abuse treatment, \$38,564 allotted for FY22.** Funding allows members enrolled in FAMIS MOMS to access to treatment in an Institution for Mental Diseases under the Addiction and Recovery Treatment Services (ART) waiver.

## **MENTAL HEALTH:**

### **Improving School Based Mental Health Supports**

**Implement the “free care rule” to access Medicaid-funding to pay for school-based health and mental health services SB1307 | Senator Siobhan**

**Dunnivant.** This bill directs the Department of Medicaid Assistance Services (DMAS) to create a process to allow local school divisions to pull down Medicaid reimbursement for health and mental health services, even when a student does not have an Individualized Education Plan (IEP). This option, known as the “free care rule”, would bring more financial resources into local school divisions to support health and mental health services.

Access to services is a critical barrier to children receiving support, therefore, bringing more funding for services into schools helps to meet children where they are. Funds can be used flexibly for school support staff, contracts with private providers, and other expanded partnerships. This option has also been identified as a key step to expand school-based health centers. Local school divisions should look for more instruction from DMAS about billing procedures later this year.

### **Increasing Student Support Staff**

Two budget measures were approved this year to bring additional support staff into schools. The Governor’s proposed budget included an additional \$27 million to bring the school counselor to student ratio to 1:325. The House and Senate amended the budget to include an additional \$49 million to hire 3 specialized support positions for every 1,000 students. Specialized student support positions include social workers, nurses, psychologists and applied behavior specialists. In the 20-21 school year at least 44 school divisions would need to hire additional personnel.

### **Supporting Young Children’s Social-Emotional Needs in Preschool & Child Care**

The General Assembly directed the Department of Education to have the “green light” to move forward with implementing plans for Early Childhood Mental Health Consultation to meet the social-emotional needs of young children and to report back to the General Assembly about any additional funding needs or legislative changes.

## **Building a System of Crisis Response and Support**

### **Implementing the MARCUS Alert System**

Marcus-Davis Peters, a young, Black, biology teacher was shot by Richmond police in 2018 in the midst of a mental health crisis. Advocacy efforts led by his family led to the passing of The Marcus-Davis Peters Act. The Marcus-David Peters Act provides behavioral health responses to behavioral health emergencies to reduce negative outcomes involving use of force in law enforcement when an individual experiences a behavioral health crisis related to mental health, substance use, or developmental disability. The mental health awareness response and community understanding services (MARCUS) alert system directs DBHDS to develop a plan throughout the Commonwealth in collaboration with DCJS, law enforcement, and other stakeholders.

\$771,612 additional funds for FY 21-22 were provided for the administrative cost required to implement the Marcus Alert legislation. The funds will be used to maintain the crisis hotline, evaluate the current capacity of the crisis systems in localities, and lastly, to provide contractual funds for a public advertising campaign.

### **Creating a Crisis Call Center & Hotline | SB1302 | Senator Jeremy McPike**

A key factor in creating the MARCUS Alert system to deescalate law enforcement responses to situations involving a mental health crisis is also to create systems that enable easy and effective notification and response to mental health crisis. A missing element of that system has been a hotline or crisis call center for professionals to use when encountering a child, youth or adult in mental health crisis.

Senator Jeremy McPike's SB1302 builds on the MARCUS Alert legislation passed during the 2020 Special Session to create a more uniform crisis response system by creating a call center. The call center would link to the national suicide hotline. The bill adds a surcharge to cell phone bills of a few cents to help fund the call center.

## **Foster a More Diverse & Inclusive Mental Health Workforce**

### **Increased Behavioral Health Loan Repayment Program (VDH)**

The final budget includes an additional \$1.9 million for the Behavioral Health Loan Repayment Program that were unallocated in the 2020 budget. This loan repayment program can incentivize professionals to work in the mental health field, an incentive necessary to ensure the workforce is diverse and reflective of the population served and to address the service shortages across the state. Children and adults need to have diverse and representative professionals to address trauma, including racial and historical trauma.

## CTIV: RACIAL TRUTH & RECONCILIATION VIRGINIA:

### Early Identification and Intervention

- **Provide general fund support to the Virginia Helping Everyone Access Services (HEALS) program, \$517,553 allotted in FY22.** Provides general fund support to the Virginia Helping Everyone Access Services (HEALS) program, which concentrates its efforts on early identification and intervention to lessen the impact of trauma in children, including COVID-19 related challenges.
- **Directs the state Health Commissioner to establish a Task Force on Maternal Health Data and Quality Measures, HB2111, Delegate Herring.** The purpose of the Task Force is to examine maternal health data collection processes and establish policies to improve maternal care, quality, and outcomes. The Task Force would report its findings and conclusions to the Governor and General Assembly by December 1 of each year and will conclude its work by December 1, 2023.
- **Increase access to doula care for pregnant women, \$2.4 million for FY22.** Provides increased access to doula care for pregnant women. Doulas have been shown to have a demonstrated impact to reduce racial disparities in maternal health.
- **Funding to increase access to substance abuse treatment, \$38,564 for FY22.** Funding allows members enrolled in FAMIS MOMS to access to treatment in an Institution for Mental Diseases under the Addiction and Recovery Treatment Services (ARTs) waiver.

### Systemic and Institutional Intervention

- **Declaring racism a public health crisis, HJ537, Delegate Aird.** A resolution to declare racism as a public health crisis in Virginia. It includes numerous steps that Virginia can take to address systemic racism and its impact on public health, including the examination of racial inequity in Virginia law, implicit bias training for public employees and officials, a glossary of terms specific to racism and health equity and engagement with communities most impacted.
- **Restores funding for ACEs Interface Training, \$143,260 for FY22.** Restores general funds the second year to expand the Adverse Childhood Experiences (ACE) initiative. It supports a full-time Central Office position to provide oversight over 100 ACE Interface Master Trainers across the state.

- **Convene a workgroup for Medicaid home visiting, language only.** The Department of Medical Assistance Services (DMAS) will convene a workgroup and make recommendations on a Medicaid home-visiting benefit to support members' health, access to care and health equity by December 1, 2021.