### INTERIM JOINT COMMITTEE ON FAMILIES AND CHILDREN

# Minutes of the 2nd Meeting of the 2025 Interim

**July 30, 2025** 

### **Call to Order and Roll Call**

The second meeting of the Interim Joint Committee on Families and Children was held on July 30, 2025, at 1:00 PM in Room 149 of the Capitol Annex. Senator Danny Carroll, Chair, called the meeting to order, and the secretary called the roll.

#### Present were:

<u>Members:</u> Senator Danny Carroll, Co-Chair; Senators Matthew Deneen, Rick Girdler, Keturah Herron, Amanda Mays Bledsoe, Robby Mills, Robin L. Webb, and Gex Williams; and Representatives Tina Bojanowski, Emily Callaway, Mike Clines, Stephanie Dietz, Steven Doan, Robert Duvall, Daniel Elliott, Kim Holloway, Kimberly Poore Moser, Michael Sarge Pollock, Rachel Roarx, Sarah Stalker, and Nick Wilson.

Guests: Lesa Dennis, Commissioner, Department of Community Based Services, Cabinet for Health and Family Services (CHFS); Dr. Katie Marks, Commissioner, Department for Behavioral Health, Developmental, and Intellectual Disabilities, CHFS; Dr. Leslie Hoffman, Deputy Commissioner, Department for Medicaid Services, CHFS; Jennifer Hall, Executive Director, Key Assets of Kentucky; Michelle Sanborn, President, Children's Alliance; Phillip Elliston, Parent, Advocate; Jonathan Grate, Ombudsman, Commonwealth Office of the Ombudsman; Tricia Steward, Inspector General, Office of the Inspector General, CHFS; Melissa Moore, Director, Division of Regulated Child Care, Office of the Inspector General, CHFS; Andrea Day, Director, Division of Child Care, Department of Community Based Services, CHFS; Julie Brooks, Policy Specialist, Department for Public Health, CHFS; Elizabeth Goode, Division Director, Division of Prevention and Quality Improvement, Department for Public Health, CHFS; Andrew Water, Assistant Division Director, Division of Maternal and Child Health, Department for Public Health, CHFS; Allison Ball, State Auditor, Auditor of Public Accounts; and Heather Wagers, Deputy Ombudsman, Commonwealth Office of the Ombudsman.

LRC Staff: Logan Bush, Ben Payne, Cameron Franey, and Becky Lancaster.

Legislative Hearing on the 2025 Preventive Health and Health Services Block Grant and the Maternal and Child Health Title V Block Grant

Elizabeth Goode, Division Director, Division of Prevention and Quality Improvement, Department for Public Health, Cabinet for Health and Family Services (CHFS), discussed the 2025 Preventive Health and Health Services Block Grant funding, and the various programs and office that are awarded grants.

Andrew Water, Assistant Division Director, Division of Maternal and Child Health, Department for Public Health, CHFS, discussed the Maternal and Child Health Title V Block Grant funding to local health departments and the contributors to the needs assessment.

A motion to approve the 2025 Preventive Health and Health Services Block Grant and the Maternal and Child Health Title V Block Grant was made by Representative Pollock and seconded by Representative Moser. After a roll call vote of 19 yes votes, 0 no votes, and 0 pass votes, the 2025 Preventive Health and Health Services Block Grant and the Maternal and Child Health Title V Block Grant were approved.

### **Approval of Minutes**

A motion to approve the June 25, 2025, minutes was made by Representative Mills, seconded by Representative Pollock, and approved by a voice vote.

# **Community Health for Improved Lives and Development (CHILD) Waiver**

Lesa Dennis, Commissioner, Department of Community Based Services (DCBS), CHFS, discussed the 1915(c) CHILD waiver targeted participants, waiver qualifications, trends and challenges of the CHILD waiver population, and youth experiencing prolonged stays in psychiatric hospital settings.

Dr. Katie Marks, Commissioner, Department for Behavioral Health, Developmental, and Intellectual Disabilities (DBHDID), CHFS, discussed CHILD waiver covered services, first year service details, and key features of the waiver.

Dr. Leslie Hoffman, Deputy Commissioner, Department for Medicaid Services (DMS), CHFS, discussed the targeted approach to create and implement the 1915(c) CHILD waiver, other initiatives that are also a part of the multi-year initiative, the DMS waiver application status, and additional resources for waiver information.

In response to Chair Carroll, Ms. Dennis stated the waiver is estimated to service 100 participants and the waiver is designated for youth with high complex need levels at risk of hospitalization. Dr. Hoffman stated CHFS needed to address a high needs population as part of the larger Families First initiative, and used data from other acute waiver programs to estimate expenditures for participants.

In response to Representative Stalker, Dr. Hoffman stated CHFS based the number of slots for participants on the budget for state fiscal year 2026. Ms. Dennis stated foster care placements are one potential identifier for the considered population. Dr. Marks stated there is a functional needs assessment of the participant not based on being in foster care.

In response to Representative Roarx, Dr. Hoffman stated CHFS is targeting a specific population, and the 1915(c) CHILD waiver is based on the level of need and not a specific disability or diagnosis.

Allison Ball, State Auditor, Auditor of Public Accounts, discussed the long wait lists for home and community-based services waiver programs, restrictions on the 1915(c) CHILD waiver, and waiver language regarding care providers.

Heather Wagers, Deputy Ombudsman, Commonwealth Office of the Ombudsman, discussed her personal experience as a parent of a child with autism, and the lack of assistance and eligibility for services due to targeted criteria in the 1915(c) CHILD waiver.

Jonathan Grate, Ombudsman, Commonwealth Office of the Ombudsman, discussed the intended purpose of the appropriated funds in the state budget for the waiver.

Michelle Sanborn, President, Children's Alliance, discussed the promising elements in the 1915(c) CHILD waiver proposal, the decline in in-home behavioral health services, and questions and concerns about the waiver.

Jennifer Hall, Executive Director, Key Assets of Kentucky, discussed the provider perspective, concerns, and challenges with the waiver specifications for the needs of youth diagnosed with autism spectrum disorder, intellectual or developmental disabilities, or a serious emotional disturbance.

Phillip Elliston, parent, advocate, discussed his experience as a father with a child diagnosed with a rare genetic syndrome, his feedback to CHFS regarding challenges with care, and his disappointment that the 1915(c) CHILD waiver does not relate to issues that he and other others gave feedback about to CHFS.

In response to Representative Bojanowski, Dr. Hoffman stated CHFS anticipates that the implementation of the 1915(c) CHILD waiver will be January 2026.

In response to Chair Carroll, Dr. Hoffman stated psychiatric care will be a cost-saving component for CHFS. Ms. Dennis stated CHFS' goal for the waiver is to prevent a child from entering into state custody, and that a child does not have to be in state custody to be eligible for the waiver.

In response to Senator Mills, Dr. Marks stated CHFS would welcome the opportunity to work with legislators to create language for a bill to focus on a targeted population.

In response to Senator Webb, Dr. Marks stated there is a possible proposal for a Department for Juvenile Justice specific facility that is a no-reject care center and has a higher intensity patient level of care that DBHDID would operate for youth that are not finding placement. Ms. Dennis stated the goal of the waiver is to keep a child with his or her family and does allow for residential services.

### **Division of Regulated Child Care**

Melissa Moore, Director, Division of Regulated Child Care (DRCC), Office of the Inspector General, CHFS, discussed the civil penalties for a Type A and Type B violation, criteria for determining monetary penalties, collected civil penalties and statistics, targeted technical support (TTS) pilot project, grounds for a directed plan of correction, denial of license or certification, causes for an emergency suspension, issues leading to a revocation, appeal options, and adverse action data.

Andrea Day, Director, Division of Child Care, DCBS, CHFS, discussed the federally required number and types of substantiated child abuse or neglect cases in Child Care Development Fund eligible child care provider settings.

In response to Senator Webb, Ms. Moore stated cases originate from self-reports, parents, employees of child care centers, or from DCBS. Ms. Day stated child care program reports of abuse are investigated by DCBS and the DRCC.

In response to Representative Callaway, Ms. Moore stated fees are determined by status of previous penalties and other factors about the incident, fees have a set base amount but could have reductions as determined by a civil coordinator.

In response to Chair Carroll, Ms. Moore stated the TTS was created due to the increase in violent behavior of children and child care centers needing assistance. Tricia Steward, Inspector General, Office of the Inspector General, CHFS, stated she meets with the regional program managers weekly to discuss concerns and to review adverse actions to create more consistency. Ms. Moore stated the DRCC is the oversight agency ensuring centers are in compliance with regulatory requirements. Ms. Moore stated the DRCC

works in partnership with agencies and organizations to educate staff on adverse situations with clients, and evaluates incidents to see if additional assistance or training is needed.

In response to Representative Doan, Ms. Moore stated that when a martial arts center or other facility is offering child care, the DRCC investigates to see if the center is meeting criteria based in statute as a child care facility.

# **Adjournment**

There being no further business, the meeting was adjourned at 2:55 PM.