



PENNSYLVANIA
PARTNERSHIPS
FOR CHILDREN
A VOICE FOR KIDS SINCE 1992



2021-2022 POLICY ROADMAP



CHILD WELFARE

Ensure each child in Pennsylvania has the opportunity to grow up in a home where they are safe and protected from abuse and neglect. For those children who are victims of trauma, the system should ensure that services are provided to heal and preserve the family and if out-of-home care is necessary, that placement is in a family-based setting, preferably kin. Community-based interventions should be sought to prevent the need for unnecessary out-of-home removal, expedite reunification, and ensure permanency for every child and youth.

DATA POINTS

General protective services reports continue to outpace reports of child abuse by nearly

FOUR TIMES.

24,665

children were served in the foster care system in 2019, with over

7,000

 experiencing a first-time entry.

Only

38.7%

of children in the foster care system are placed with family or kin.

Black children and children of multiple races are represented in foster care more than

TWO TIMES

their rate in the general population.

POLICY PRIORITIES:

1. Strengthen the response to child abuse by building a strong and robust community prevention model.

- Evaluate the impacts on child protection and safety as a result of decreased reporting due to the pandemic.
- Analyze the outcomes of the 2015-2016 child protective services law, including child protective and general protective services designations and how counties allocate resources.
- Monitor the state's implementation of the Family First Prevention Services Act (FFPSA) as a strategy in improving the prevention continuum and decreasing use of out-of-home care.
- Promote a differential response system that better serves families in poverty rather than over surveillance of them.

2. Improve policies that increase the identification and utilization of kin resources.

- Identify national best practices and strategies that increase usage of family-based prevention to support and uplift biological parents and keep families intact, including those services that are identified through FFPSA.
- Enhance foster family recruitment, licensing, training and retention policies to eliminate practices that discriminate against and arbitrarily disqualify kin from being approved as resources, including identifying supportive services for kin families.

- c. Strengthen and require ongoing permanency services for all children and youth in foster care until legal permanency is achieved, regardless of their court-ordered permanency goal.
- d. Uplift the lived experiences of biological parents, kin, and children/youth who have been impacted by the child welfare system as a catalyst to identifying strategies that best support those being served.

3. Reduce the use of group care unless it is necessary to meet the time-limited treatment needs of youth.

- a. Expand data collection and analysis to better understand the characteristics of youth being placed in congregate care settings, including dependent and delinquent youth.
- b. Advocate for the increased use of evidence-based or research-informed discharge services to better support re-entry into the community and decrease the need for additional future out-of-home placements.
- c. Determine the impacts of the pandemic on increased youth discharges from group homes to community settings and identify tangible solutions to ensure that congregate care placements do not increase post-COVID-19.
- d. Analyze the educational programs provided to youth in congregate care to identify ways to ensure that they are receiving high-quality services.

4. Improve outcomes for transition age youth in foster care or exiting to adulthood.

- a. Identify strategies for building connections with supportive adults, inclusion of voice in policy planning, promoting access to high-quality services, and elevating needs for effectively transitioning to adulthood.
- b. Enhance the delivery of permanency services to older youth to ensure the promotion of increased availability of family settings, connections to siblings, and the identification and outreach to kin.
- c. Continue to evaluate the impacts of FFPSA on older youth to ensure the state's service array focuses on placement prevention, achievement of permanency, and increased access to after-care supports.
- d. Identify ways to utilize National Youth in Transition Database information to better illuminate the needs of older youth transitioning to adulthood.

5. Monitor policy reform to ensure the child welfare system is adequately supported from both financial and staffing perspectives at the federal, state and county levels.

- a. Review, and when appropriate, provide feedback on the annual Needs Based Plan and Budget.
- b. Identify strategies to maintain a qualified, competent child welfare workforce.
- c. Continue to partner with the Office of Children, Youth and Families on the federal and local needs for system improvement.

LEGISLATIVE OR REGULATORY ACTION NEEDED TO ADVANCE POLICY PRIORITIES:

- Revision of the Title 55, Chapter 3130 regulations which govern the administration of children and youth services. Modifications are needed to better support child welfare agencies in efforts of staff retention in areas such as staffing ratios and caseloads.
- Revision of the Title 55, Chapter 3700 regulations which govern the approval of licensure for kinship and foster parents. Regulatory updates should aim to decrease bias in decision-making and eliminate discriminatory practices that deny kin from being licensed caregivers.
- Modifications to both the Family Finding and Kinship Care bulletins, which are county guidance documents developed by OCYF. These bulletins provide guidance to counties on the implementation of family finding, family stabilization efforts, and increasing child placement with kin.
- Updates to the Kinship Care Act and Family Finding Act. Additional data collection and accountability measures for counties are statutorily needed to increase greater family finding efforts and child placement with kin.

ACTIONS WE'RE WATCHING:

- Pennsylvania will be implementing their Title IV-E prevention services plan as identified through the Family First Prevention Services Act effective July 1, 2021.



EARLY CHILDHOOD EDUCATION

Ensure each child in Pennsylvania has the opportunity for affordable and accessible high-quality early childhood education, including infant and toddler child care, as well as pre-kindergarten education. The rapid brain growth during the first few years of life underscores the need to build an early, solid foundation for future success in school, relationships and life. A coordinated care system is also a vital component of the economy, allowing parents to work while knowing their children are receiving high-quality care.

DATA POINTS

71% of Pennsylvania children

under the age of six had all adults in their household in the workforce.

Nearly **102,000** eligible children

do not have access to high-quality pre-k.

More than **45,000** infants and toddlers and nearly

58,000 preschool children

benefit from early intervention services.

From March 2020 through Labor Day 2020, the minimum financial impact of the COVID-19 pandemic to child care programs was

\$325 MILLION statewide.

POLICY PRIORITIES:

1. Increase the number of children enrolled in publicly funded, high-quality pre-k.

- Increase investments for publicly funded, high-quality pre-k so at least 60% of eligible 3- and 4-year-olds can voluntarily participate.
- Ensure an adequate supply of high-quality pre-k providers are eligible for participation in publicly funded programs and preserve the mixed pre-k service delivery system.
- Ensure the availability of a high-quality workforce by reinforcing the need for a pre-k through 4th grade teaching certification.

2. Increase the number of Child Care Works eligible children, specifically infants and toddlers, in high-quality child care programs.

- Provide financial support and technical assistance to Keystone STAR 1 and 2 providers to move up the STAR ladder, creating a more financially stable and larger pool of high-quality providers for eligible children in the subsidized child care program.
- Develop a concept of simplifying subsidy payment rates and establishing a base rate which includes the quality level of child care programs.
- Increase base rates for child care providers, coupled with increasing contracted slots to provide more stable payment for high-quality infant and toddler care and allow more infants and toddlers to be served in high-quality.

- d. Support the early childhood care and education infrastructure to ensure the system remains whole in the wake of the COVID-19 public health emergency, including further coordination of services available through the Early Learning Resource Centers (ELRCs).

3. Investigate policies that support children with developmental delays and disabilities through early intervention programs, while also providing ongoing supports to parents and providers.

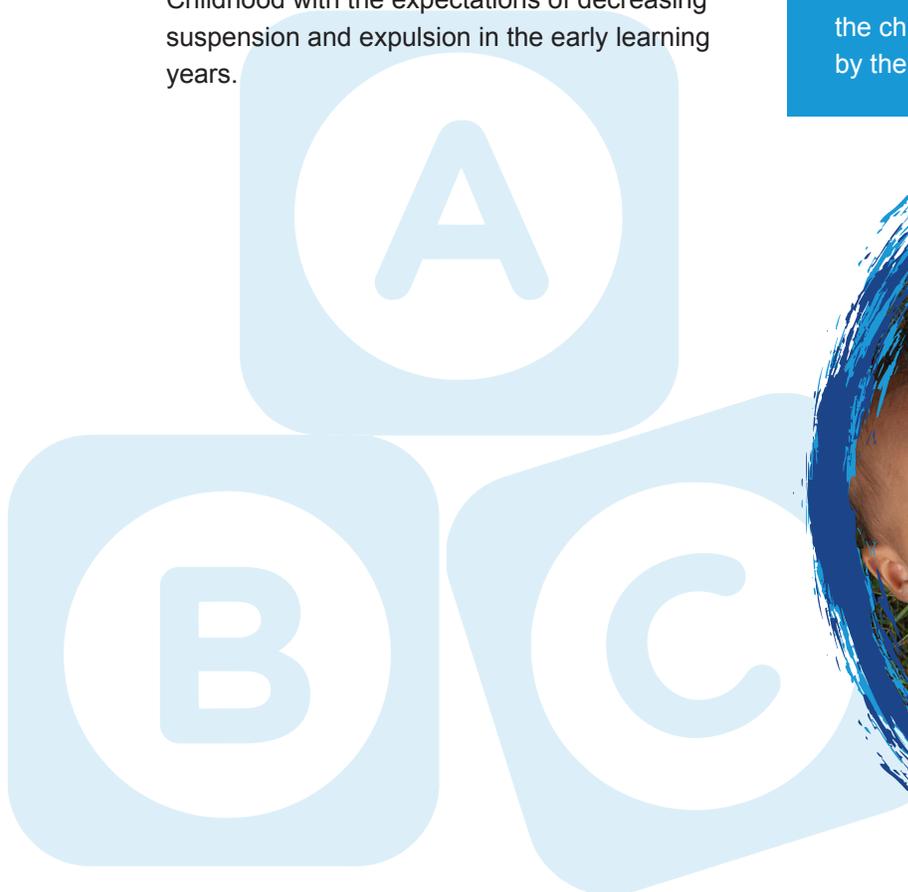
- a. Research a policy framework that focuses on providing necessary services to all young children eligible for early intervention services. Preserve eligibility and high-quality implementation standards for children in programs.
- b. Maximize all state and federal funding.
- c. Ensure equitable access to early intervention services for all children.
- d. Continue to monitor Pennsylvania's progress at conducting developmental screens at recommended intervals and conducting follow-up assessment and care coordination for children identified as having possible delays.
- e. Ensure the continued alignment of academic and social-emotional learning goals found in the Pennsylvania's Learning Standards for Early Childhood with the expectations of decreasing suspension and expulsion in the early learning years.

LEGISLATIVE OR REGULATORY ACTION NEEDED TO ADVANCE POLICY PRIORITIES:

- Annual federal appropriations including the Child Care Development Block Grant (CCDBG), Temporary Assistance for Needy Families (TANF), Social Services Block Grant (SSBG), Head Start and Preschool Development Grants. State appropriations including Child Care Services and Child Care Assistance lines.
- Advancements of federal policies and legislation expanding and improving Pennsylvania's early learning systems, including additional federal stimulus support and liability coverage for child care providers during the public health emergency.
- Promotion of high-quality incentives for providers within the administration.
- Proposed changes to the Federal Fiscal Year 2022-24 Child Care Development Fund Plan Preprint for States and Territories.

ACTIONS WE'RE WATCHING:

- Release of the formal evaluation report of Pennsylvania's Pre-K Counts and Head Start Supplemental Assistance Program from the University of North Carolina.
- Continued efforts at federal and state levels to support the child care infrastructure, which was greatly impacted by the COVID-19 pandemic.





HOME VISITING

Ensure each child in Pennsylvania has the opportunity to grow up in a safe and healthy home environment. When families are successful, our communities are successful. Evidence-based home visiting provides services that increase parenting skills, bolster nutrition and help ensure a healthy pregnancy for first-time moms, aid young children with literacy and meeting developmental milestones, and much more. These voluntary sessions play an important role, especially for those new to parenthood. With far too few Pennsylvania families receiving evidence-based home visiting services, we are working to expand its reach through increased funding for the programs and through multiple avenues of referrals, including the recently launched Department of Human Services' Medicaid home visiting initiative.

DATA POINTS

Only **5%** (or approximately 17,000)

Pennsylvania low-income families who could benefit the most receive evidence-based home visiting services.

There are **6** evidence-based home visiting models that operate in Pennsylvania and receive state funds:

- Early Head Start
- Family Check-Up
- Healthy Families America
- Nurse-Family Partnership
- Parents as Teachers
- SafeCare Augmented®

At least **ONE** evidence-based home visiting model operates in each of Pennsylvania's 67 counties.

By shifting to virtual home visits through telephone or video technology, home visitors are working through the

COVID-19 pandemic to continue supporting families with young children.

POLICY PRIORITIES:

- 1. Increase the number of children and families receiving evidence-based home visiting services to strengthen families and meet the comprehensive needs of infants and young children most in need of services.**
 - a. Expand evidence-based home visiting financing and strategies using data analysis and research findings for the highest-risk families with young children, including low-income families and those most impacted by the COVID-19 pandemic.
 - b. Explore additional federal and state financing options for evidence-based home visiting services, including issuing findings in a cornerstone report to be published in early 2021.
 - c. Monitor the Department of Human Services (DHS) Office of Medical Assistance Programs' (OMAP) home visiting initiative along with the planned expansion in January 2021 and explore tracking of referrals to evidence-based home visiting.
 - d. Monitor the release of the Office of Child Development and Early Learning (OCDEL) Request for Applications (RFA) in early 2021 with new contracts expected to start in July 2021.
 - e. Monitor state appropriations requested by OCDEL to backfill loss of federal MIECHV funds (as done during past two budgets) and funding requested by OMAP to support the expansion of their Medicaid home visiting initiative in 2021.

- f. Analyze the newly released OCDEL Needs Assessment report and its expected impact on funding distribution on a county/community level basis.
- g. Monitor the selection by DHS for implementing the statewide resource and referral tool and explore tracking of referrals to evidence-based home visiting.
- h. Monitor guidance from OCDEL and/or the Home Visiting Evidence of Effectiveness (HOMVEE) clearinghouse related to the continuation or flexibility of home visiting services via tele-visits following the public health emergency (currently January 2021 but another extension is expected).

LEGISLATIVE OR REGULATORY ACTION NEEDED TO ADVANCE POLICY PRIORITIES:

- State appropriations to continue funding the two home visiting line items: Community Based Family Centers line and Nurse-Family Partnership line.
- Federal stimulus funding – one-time emergency funding of \$100 million in MIECHV to support states' home visiting programs to aid costs of transitioning to virtual visits.
- Federal reauthorization and funding of MIECHV.

ACTIONS WE'RE WATCHING:

- Expansion of home visiting contracts between the Department of Human Services and Medicaid managed care organizations from two visits to a time period of 18 months beginning January 2021.
- OCDEL Request for Applications (RFA) expected to be issued in early 2021 with contracts effective July 2021.
- Childhood Begins at Home cornerstone report exploring diversification of funding options to support home visiting in the long-term.
- DHS selection of bidders for the Resource and Referral Tool Request for Expression of Interest (RFEI) which is likely to increase referrals to evidence-based home visiting.
- Reauthorization of the Maternal, Infant and Early Childhood Home Visiting (MIECHV) program in FFY 2022, along with potential increase in federal MIECHV funding.





K-12 EDUCATION

Ensure each child in Pennsylvania has the opportunity for an adequate and equitable high-quality public education. All children in Pennsylvania deserve to be provided an adequate and equitable high-quality public education, regardless of the zip code they live in. This includes equipping students with supports to meet their special education needs and focuses on building skills to successfully graduate, transition to higher education or enter the workforce career ready.

DATA POINTS

61.9% and **57.9%**
of 3rd grade students of 8th grade students
score proficient or advanced in English Language Arts as measured by the Pennsylvania System of School Assessment (PSSA).

56.0% and **32.2%**
of 3rd grade students of 8th grade students
score proficient or advanced in math as measured by the PSSA.

Pennsylvania ranks
44TH IN THE NATION
in the state's share of education funding.

The share of CTE funding is
90% LOCAL,
8% STATE and
2% FEDERAL.

POLICY PRIORITIES:

- 1. Support increased investments in basic education funding as well as evaluate and recommend strategies to address and advance adequacy and equity.**
 - Support increased investments through the enacted basic education funding formula to ensure adequate and equitable support is provided to school districts.
 - Research and evaluate legislative considerations in response to the outcome of the public education lawsuit.
 - Develop and provide a formal advocacy position to the Basic Education Funding Commission on adequacy and equity in K-12 education.
 - Revise the per-student basic and special education charter and cyber charter school funding formulas to more accurately reflect the costs assumed by charter school entities to deliver services and incorporate weighted elements that better consider student characteristics.
- 2. Ensure adequate state funding for career and technical education (CTE) so that every child who is interested can participate.**
 - Continue to drive increased investments into the state CTE subsidy and equipment grant lines, including modifying current multipliers to fix the issue with the subsidy line being capped and fully funded.

- b. Research and develop a formal recommendation on including a CTE weight in the basic education funding formula ahead of the reconstitution of the commission.
- c. Advocate for increased disaggregated publicly available CTE data that is consumable and identifies future policy solutions.
- d. Modernize CTE curriculum to ensure that programming is meeting economic needs as a result of the pandemic.

3. Continue to develop a comprehensive and transparent accountability framework for schools and their personnel.

- a. Ensure the state’s academic standards continually provide a quality benchmark for defining student proficiency across all grade levels, support an assessment system that measures student growth, identifies adequacy gaps, and recognizes curriculum and instruction needs, preserve high school graduation requirements that ensure students are postsecondary and workforce ready regardless of where they graduate from in the commonwealth and ensure curriculum is aligned with the state’s proficiency benchmarks.
- b. Identify national metrics on 3rd grade reading and 8th grade math to identify policy solutions to improve the state’s outcomes in these measures.
- c. Continue to monitor the Future Ready Index and school profiles to ensure that school districts are improving performance and making progress in key areas, including an emphasis on student growth measures.
- d. Continue to oppose efforts to implement vouchers or education savings accounts, as these proposals are likely to further weaken the performance of already struggling schools.
- e. Research and explore the charter school system including governance and performance and accountability, both academic and fiscal.

4. Ensure that students have the adequate supports to meet their special needs.

- a. Ease the burden on local school districts covering special education costs by increasing the state share of special education funding back to approximately one-third of costs.

LEGISLATIVE OR REGULATORY ACTION NEEDED TO ADVANCE POLICY PRIORITIES:

- If the upcoming public education funding lawsuit determines that the current funding structure is unconstitutional, a legislative response will be required.
- Potential legislative action to address the currently capped Career and Technical Education Subsidy formula as well as around data reporting.
- PSSA and Keystone exams were not conducted in the 2019-2020 school year due to the COVID-19 pandemic, and it is anticipated that the Pennsylvania Department of Education will apply for another federal waiver for the 2020-2021 school year.
- Federal budget appropriations including Title I and IDEA, as well as the potential for additional federal stimulus dollars. State budget appropriations in basic education funding, career and technical education funding and special education funding.

ACTIONS WE’RE WATCHING:

- Anticipated decision on public education funding lawsuit (William Penn School District et al vs. Pennsylvania Department of Education et al).
- Basic Education Funding Commission is set to be reconstituted in 2022, with a report due in 2023.
- Special Education Funding Commission report again delayed to May 2021.





MATERNAL & CHILD HEALTH

Ensure each pregnant woman and child in Pennsylvania has the opportunity for affordable, quality health care access. No pregnant woman or child in Pennsylvania should be without health insurance and the access to quality health care that is necessary for healthy birth outcomes, improved physical and mental health of a new mother and for a child's healthy development into adolescence and through adulthood. Our maternal and child health care policy agenda provides a comprehensive look at where we can close the gaps for those left without health insurance by expanding eligibility, where we can strengthen both types of benefits as well as access to physical, mental and dental services, and access to nutritious food.

DATA POINTS

Pennsylvania has the **8TH** highest number of uninsured children in the country with 128,000 children (or 4.6%) without health insurance.

Childhood vaccination rates dropped nearly **50%** or greater for kids ages 1 through 18 during the COVID-19 pandemic, while pediatric visits remain substantially below baseline by **25%.**

3 IN 5 pregnancy-related deaths in the United States were preventable.

80% of children under age 6 are not being tested for lead poisoning in Pennsylvania despite the increased risk due to our commonwealth's aging housing and infrastructure.

In 2016, only **59%** of eligible one-year-old children were enrolled in WIC, and that number decreased to 38% for three-year-old children.

POLICY PRIORITIES:

1. Extend access to prenatal and postpartum services within Medicaid for mothers to ensure expecting mothers, infants, and toddlers start and stay healthy.

- Advocate to extend postpartum coverage of mothers enrolled in Medicaid from the current 60-day period to 12 months, keeping in line with the 12-month coverage of her baby.
- Seek federal approval to expand CHIP eligibility to include pregnant women not eligible for Medicaid due to immigration status to ensure that all women living in Pennsylvania have access to prenatal appointments and other services for healthy deliveries.
- Promote behavioral health prenatal and postpartum screenings that include evidence-based depression screenings and increase coordination to ensure follow-up services occur for proper treatment.
- Advocate for doula service reimbursement in Medicaid to improve birth outcomes.

2. Build on the success of Medicaid and CHIP to ensure every Pennsylvania child is insured.

- Expand CHIP to include every child living in Pennsylvania regardless of immigration status by passing Dream Care legislation.

- b. Improve enrollment and renewal options to minimize any unnecessary delays or gaps in coverage by expanding and/or strengthening policies such as presumptive eligibility, 12-month continuous eligibility and automated (ex-parte) renewals.
- c. Monitor the new state-based exchange Pennie™ to ensure a “no wrong entry” to Medicaid and CHIP.
- d. Monitor utilization of well-child visits and screenings at recommended intervals according to the AAP’s Bright Futures periodicity schedule.
- e. Monitor immunization rates to ensure that children are staying up to date on routine vaccinations to prevent childhood diseases.

3. Promote the positive health outcomes for children as a direct result of Medicaid, CHIP and/or the Affordable Care Act.

- a. Ensure adequate federal and state funds to maintain Medicaid and CHIP eligibility standards without compromising one program in exchange for another. Ensure messaging of CHIP builds on the shoulders of the success of the Medicaid program.
- b. Promote Medicaid and CHIP as lifelines for children and their families during the COVID-19 pandemic, as demonstrated by the significant increased enrollments since the beginning of the public health emergency.
- c. Defend against attempts at the federal level to repeal or undermine the ACA, as well as efforts to cap Medicaid spending through block grants or per capita caps.

4. Assure that children enrolled in Medicaid and CHIP have adequate benefit packages to meet their needs, and that they are appropriately participating in well-child visits as well as receiving immunizations and screenings necessary for their healthy development.

- a. Monitor and review compliance of managed care requirements in both the Medicaid and CHIP contracting process and through enhanced partnerships with managed care organizations (MCOs).
- b. Ensure that Medicaid and CHIP are implemented with fidelity by measuring quality and performance of mandatory benefits within the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program.
- c. Research and advocate for changes within both physical and behavioral health benefit packages as necessary, including exploring the integration of physical and behavioral health services within Medicaid and identifying policies to improve childhood mental health.

5. Assure that children enrolled in Medicaid and CHIP are receiving dental care as oral health is a key measure of overall health.

- a. Monitor utilization of kids in Medicaid and CHIP receiving regular dental care.
- b. Increase dental sealants as preventive measure for school-age children.
- c. Integrate dental care by applying fluoride varnish to strengthen tooth enamel during well-child visits.

6. Promote efforts to identify and prevent lead exposure in children to ensure their healthy development.

- a. Improve the measurement to effectively monitor that the required EPSDT lead testing is occurring for children in Medicaid and CHIP.
- b. Advocate in support of a statewide lead testing mandate for all Pennsylvania children, as the Department of Health determined that the entire commonwealth is “at risk” for exposure.
- c. Advance policies for young children with lead poisoning to ensure care coordination and appropriate referrals to early intervention.

7. Increase access to healthy nutrition for women and young children to ensure healthy development.

- a. Support the financial stability and modernization of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to increase participation among Pennsylvania mothers and children.
- b. Implement ongoing flexibility of telehealth services to minimize or eliminate barriers to enrolling and retaining WIC.
- c. Explore policy improvements for children participating in the Supplemental Nutrition Assistance Program (SNAP) or other similar nutrition programs.
- d. Explore policy improvements for children participating in TANF, whose families are living in deep poverty, to help build upon adequate food assistance.

MATERNAL & CHILD HEALTH

LEGISLATIVE OR REGULATORY ACTION NEEDED TO ADVANCE POLICY PRIORITIES:

- Monitor state legislation that will automatically connect women who screen positive for depression or anxiety with early intervention services.
- Urge progress of federal “Helping MOMS Act” that would give states an easier path towards federal approval of 12-month postpartum Medicaid coverage through bypassing the waiver process.
- Monitor state legislation that would provide specific appropriations for lead remediation.
- Support state legislation to ensure every child in Pennsylvania is tested for lead exposure at ages one and two.
- Advocate for state appropriations for a 12-month continuous eligibility policy for children ages 4 through 18 in Medicaid.
- Seek federal approval to expand CHIP eligibility to include pregnant women not eligible for Medicaid due to immigration status.
- Assist partners pushing for legislation which would expand eligibility in CHIP to all kids living in Pennsylvania regardless of immigration status.
- Advocate for federal legislation to increase the Federal Medical Assistance Percentage (FMAP) during the public health emergency and subsequent economic downturn to account for the increased enrollments with Medicaid and CHIP.

ACTIONS WE'RE WATCHING:

- The Maternal Mortality Review Commission is due to report on their first two years of case review, which will also include legislative recommendations to combat the issue.
- The state's Perinatal Quality Collaborative is set to advance its Maternal Depression (MOMD) Package.
- In the summer of 2020, the Department of Health released the WIC Request for Applications (RFA), with the selection of bidders anticipated in early 2021.
- Opportunity to adjust current lead measurement requirements to capture full two-test metric with managed care contracts in 2022.
- U.S. Supreme Court ruling on latest ACA case (California v. Texas) in spring or summer 2021.
- Planning for the end of the designated Public Health Emergency period (currently January 2021 but another extension is expected), as continued coverage and added flexibilities that are currently in place for Medicaid and CHIP during the pandemic will end, and we need to ensure a smooth process to prevent unnecessary loss of coverage.
- Monitor DHS' plan to merge CHIP enrollment into the county assistance offices (information technology ramp up through 2023).
- Monitor the procurement process for Medicaid physical health managed care organizations (PH-MCOs), which has stalled for a third time due to bid protests.



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