



**Series:** 200

**Policy Name:** **Florida Managed Medical Assistance Program: Child Welfare Specialty Plan**

**Policy Number:** 212

**Origination Date:** 8/1/2014 **Revision Date:** 3/1/2023

**Regulation:** F.S. 39  
FAC 65C-30  
F.S. 409  
CBCIH Policy 102  
Florida Medicaid Handbook

## **Policy**

It is the policy of Communities Connected for Kids (CCKids) to assure that the physical and behavioral health needs of children under supervision are met. CCKids has entered into an agreement with Community Based Care Integrated Health (CBCIH) which guides our coordination of the delivery of Medicaid services to those youth enrolled in the Sunshine State Child Welfare Specialty Plan (CWSP).

## **Procedures**

### **Staff**

1. CCKids will employ qualified individuals to serve Behavioral Health Specialists (BHS) and Nurse Care Coordinators (NCC).
2. CCKids staff will meet with the CBCIH Regional Care Coordinator quarterly.

CCKids contracts with a Case Management Organization (CMO) for child welfare related services in Martin, Okeechobee and Indian River counties. Each CMO employs Dependency Case Managers (DCM) who provide overall case management for the children and families that they serve. CCKids employs DCMs who provide overall case management for the children and families in Saint Lucie County. Candidates for employment may not be hired until background screening clearance letters from the FDLE, FBI, and local criminal records have been received. This will be reviewed during orientation with CBCIH and monitoring process. CBCIH will maintain copies of the results on file to be submitted to Sunshine upon request.

### **Additional CCKids Policies**

1. Please refer to the following policies:
  - a. Eligibility Verification, Policy # 1016
  - b. Therapeutic level of Care Recommendations and Placement Changes, Policy 404
  - c. Initial Medical Screening & Consent for Treatment, Policy # 201
  - d. Consent for Psychotropic Medication, Policy # 202



- e. Referrals for Comprehensive Behavioral Health Assessment, Policy #206
  - f. Referrals for Behavioral Health Services, Policy # 207
  - g. Child Specific Staffing, Policy # 208
2. Other related procedures specific to the oversight and deliverance of services for the children enrolled in the CWSP will be outlined in the sections to follow.

### **Health Risk Assessment and Primary Care Physician Selection**

The purpose of completing a Health Risk Assessment (HRA) and selecting a Primary Care Physician (PCP) is to acquire basic health care information on children placed in out-of-home care or under protective supervision (in-home judicial or non-judicial) and ensure the children enrolled on the CWSP will be served by a provider within the Sunshine Network. The information gathered allows timely response to and referral for identified physical health and behavioral health care needs. Health Risk Assessments provide the initial information to the child's health care plan for coordination of care.

1. A Health Risk Assessment will be completed within the Integrate CBCIH system for all enrolled children by the DCM, or designee, in collaboration with the Nurse Care Coordinator, and/or Behavioral Health Specialist as applicable.
  - a. HRA entry for children adjudicated as dependent will occur within 30 days of enrollment in the CWSP. If a child is dis-enrolled from the CWSP for any reason, and the gap in enrollment exceeds ninety (90) days, a new HRA must be completed and submitted within 30 days of the subsequent enrollment date.
  - b. For children who may have enrolled in the CWSP prior to adjudication of dependency and their investigation case was closed thus never transferring to dependency case management will not have an HRA completed by the DCM.
  - c. For children enrolled in the CWSP post-adoption or in a permanent guardianship, their parents will be mailed a copy of the HRA to complete and return to CCKids designee for entry into the Integrate system.
  - d. For young adults enrolled in the CWSP, they will be given a copy of HRA to fill out and return for entry into the Integrate system. The CCKids Road to Success (RTS) Specialist and NCC are available to assist young adults upon their request.
2. CCKids and CMO staff will adhere to HIPAA policies when completing and sharing HRAs.
3. A Primary Care Physician (PCP) should be selected at the time of HRA completion. If a PCP is not in the network at the time of HRA completion, the worker can submit the HRA to CBCIH without selecting a PCP, but must then use the Integrate® PCP application to select a PCP prior to the monthly file exchange with Sunshine. PCP changes can be made with Choice Counseling as needed.
  - a. For young adults eligible for the CWSP, CCKids Eligibility Department will receive choice letters for IL young adults and will notify the RTS Specialist when a letter is received. The RTS Specialist will communicate the choice to the IL young adult so that the young adult may make a plan selection.



4. Staff designated to complete HRA forms will receive training. All DCMs will be educated on the process during Pre-Service Training by CCKids staff.

### **Sunshine Health Case Management Referral and Coordination**

Community Based Care Integrated Health (CBCIH) and CCKids communicate with Sunshine Health to ensure consistent, effective and appropriate communication regarding plan enrollees who may be candidates to receive Sunshine Health Case Management services. Sunshine Case Management (SCM) programs are designed to optimize the physical, social, and mental functioning of enrollees by: increasing community tenure, reducing readmissions, enhancing support systems and improving treatment efficacy through advocacy, communication and resource management. SCM program information can be located via Sunshine Health's website, [www.sunshinehealth.com](http://www.sunshinehealth.com).

Health Care Case Management programs operated by Sunshine Health include intensive contact and coordination of resources involving the enrollees, caregivers, providers, individuals and organizations that provide medical health support and services to the designated enrollees.

- A. CBC Lead Agency Nurse Care Coordinators are responsible for the identification, coordination and referral of plan enrollees who require additional assistance with their physical health needs, including those enrollees who are identified as being medically complex and/or medically fragile.
  - At the time of the initial assessment;
  - During a concurrent review;
  - As part of a discharge and aftercare plan;
  - During MDT meetings and/or during Integrated Care Team staffing
1. External Referral Process:
  - a. The Nurse Care Coordinator shall refer eligible enrollees within two (2) business days of identification of potential eligibility for SCM services.
  - b. Upon identification of an enrollee who may meet SCM criteria, CBCIH and/or the CBC Lead Agency will utilize the referral/notification process, as provided by Sunshine Health, taking actions that may include, but are not limited to:
    - 1) Completion of the Case Management Referral Form via Integrate®
    - 2) Contacting Child Welfare Member Services (1-855-463-4100)
    - 3) Completing an electronic referral, upon availability
    - 4) Coordinating contacts with the Dependency Case Manager, Parent/Guardian and/or Caregiver
    - 5) Ensuring that necessary documentation is completed and provided, including the Freedom of Choice Form for enrollees who have been determined by the Agency for Health Care Administration (AHCA) to be medically fragile
- B. Sunshine Health Case Managers may also identify possible members for the program through the review and evaluation of clinical information in accordance with the established Sunshine Case Management (SCM) criteria.
  - Through the clinical front-end system;
  - As part of an assessment by employees within another specialty program; or
  - Through the review of customer or claims and authorization reports.



- C. The Sunshine Case Manager will determine if the enrollee meets criteria for the SCM program and will, if the enrollee meets SCM criteria, forward the referral to the SCM supervisor for staffing and notifying the referring CBC. If the decision is made to offer SCM, the Sunshine Health Case Manager will attempt to make direct contact with the enrollee, parent/guardian and/or caregiver, with the assistance of the CBC Lead Agency's Nurse Care Coordinator upon request.
1. SSHP will collaborate with the CBCIH on outreach and case management activities to minimize confusion to the parent/guardian, caregivers or enrollee.
  2. Weekly case staffing meetings occur between Sunshine Health and CBCIH to discuss identified complex cases.
  3. If indicated, Sunshine Case Managers may involve licensed physicians who have expertise that may be of assistance when managing medically complex cases.
  4. CBCIH, the CBC Lead Agencies and Sunshine Health participate in case management integrated care team and multidisciplinary care team meetings, if indicated and upon request, regarding the needs of enrollees.
  5. CBCIH, the CBC Lead Agency and Sunshine Health staff who are managing the enrollee should be prepared to provide a summary of the enrollee's needs and recommendations for discussion during these meetings.
- D. CBCIH and/or the CBC Lead Agencies may also identify enrolled children who are medically fragile and/or eligible for the Children's Medical Services (CMS) program. This identification may be based upon a CMS special condition, previous enrollment in CMS services or the CMS MMA Plan and/or a determination of eligibility that is made by the CMS office, pending subsequent enrollment in the CMS MMA Plan. In the event that a child is determined to meet eligibility requirements for CMS, the child will be identified for SCM services in the interim, and the CBC staff will assist with arranging for the caregivers to participate in the care plan meetings, coordinate with the local CMS office regarding the application and enrollment process, and notify Sunshine Health when the child has been, or will be, enrolled in the CMS program.

Behavioral Health Case Management programs operated by Sunshine Health include more frequent contact with, and more intensive coordination of, resources among, the enrollees, caregivers, providers, and individuals and organizations that provide behavioral health support and services to the designated enrollees. If the decision is made by Sunshine Health to offer Sunshine Health Care Management services, the assigned Sunshine Care Manager will contact the Behavioral Health Specialist (as applicable) to inform him/her that services will be offered to a Child Welfare Specialty Plan enrollee. The Sunshine Health Care Manager shall notify the Behavioral Health Specialist upon both the opening and closing of a case, in addition to maintaining ongoing communication on active cases.

- A. The Behavioral Health Specialists, or designees, are responsible for the identification, coordination and referral of plan enrollees who require additional assistance with their behavioral health needs, including those enrollees who are identified requiring higher levels of care.
1. The Behavioral Health Specialist shall refer eligible enrollees within two (2) business days of identification of potential eligibility for case management services.
  2. Upon identification of an enrollee who may meet case management criteria, CBCIH and/or the CCKids will utilize the referral/notification process, as provided by Sunshine Health, taking actions that may include, but are not limited to:
    - Completion of the Case Management Referral Form via Integrate®



- Contacting Child Welfare Member Services (1-855-463-4100)
  - Coordinating contacts with the Dependency Case Manager, Parent/Guardian and/or Caregiver
  - Ensuring that necessary documentation is completed and provided
- B. Sunshine Health Care Managers may also identify possible members for the program through the review and evaluation of clinical information according to the established Sunshine Health Case Management criteria
- C. Identification of enrollees who may be candidates for Sunshine Health Case Management may occur:
- At the time of the initial assessment;
  - During a concurrent review;
  - As part of a discharge and aftercare plan;
  - During CSS meetings
  - Through the clinical front-end system;
  - As part of an assessment by employees within another specialty program; or
  - Through the review of customer or claims and authorization reports.
- D. The Sunshine Health Care Manager will determine if the enrollee meets criteria for the case management program. If the enrollee is eligible, the referral will be communicated to the appropriate parties.
1. Sunshine Health will collaborate with CBCIH regarding outreach and case management activities in order to minimize confusion to the parent/guardian, caregiver(s) or enrollee.
  2. If indicated, Sunshine Health Care Managers may involve physicians who have expertise that may be of assistance when managing behaviorally complex cases.
  3. CBCIH, the CBC Lead Agencies and Sunshine Health may participate in case management integrated care team and multidisciplinary care team meetings, if indicated and upon request, regarding the needs of enrollees.
  4. CBCIH, CCKids and Sunshine Health staff who are managing the enrollee should be prepared to provide a summary of the enrollee's needs and recommendations for discussion during these meetings.

### **Durable Medical Equipment Moves in LOC Changes:**

CCKids is committed to facilitation the transfer of durable medical equipment (DME) when children need to change placements across the State. DME is generally defined as non-expendable articles, primarily used for medical purposes, in cases of illness or injury. These items typically include, but are not limited to: hospital beds, respirators/ventilators, wheelchairs, walkers, blood sugar monitors, nebulizers and apnea monitors. Additional items, including medications, inhalers, and medical supplies, may also require coordination by the Dependency Case Manager and Nurse Care Coordinator.

1. Coordination of DME for placement changes:
  - A. Children Residing in Out of Home Care



- a. CCKids is responsible for the identification of placements for children residing in out of home care. While every effort is made to locate placement within the CCKids' geographical coverage area, in some cases children are placed out of area in accordance with child welfare procedures.
  - b. Once an appropriate placement/level of care has been identified, and prior to the physical movement of the child, the Dependency Case Manager completes an inventory of the child's belongings, including any Durable Medical Equipment, to ensure that the items move with the child to avoid cessation of care and to minimize the need for replacements. The Dependency Case Manager will confirm that the equipment leaves the original placement and arrives at the new location.
  - c. The Nurse Care Coordinator will track known DME and will follow up with the Dependency Case Manager to ensure that the equipment is functional and that the receiving placement has obtained necessary training on equipment operation. Training regarding equipment operation is provided by the Home Health Services Vendor and/or Home Health subcontractor to ensure that the child's parent, guardian or caregiver is able to operate the equipment appropriately.
  - d. The Dependency Case Manager shall notify the CCKids' Nurse Care Coordinator in the event that the DME cannot follow the child to the new placement/residence, or if the DME is not functioning upon arrival to the new placement/residence.
2. General Coordination of DME for Plan Enrollees:
1. The CCKids' Nurse Care Coordinator may be consulted to assist with coordination needs related to DME. If necessary, the Nurse Care Coordinator may contact Sunshine Health and/or Sunshine's Home Health Services Vendor to ensure that necessary DME has been requested, authorized and obtained.
  2. Upon authorization of DME, Sunshine Health may contact the child's parent/guardian, caregiver, Dependency Case Manager and/or the CCKids Nurse Care Coordinator to arrange for delivery.
  3. The Nurse Care Coordinator will follow up with the child's parent/guardian, caregiver, and/or Dependency Case Manager to ensure that the equipment is functional and that the receiving residence has necessary training on equipment operation. Training regarding equipment operation is provided by the Home Health Services Vendor and/or Home Health subcontractor to ensure that the child's parent, guardian or caregiver is able to operate the equipment appropriately.
  4. The CBCIH Regional Coordinator is also available to assist the Nurse Care Coordinator with issues related to DME upon request.

### **Court Ordered Medicaid Services**

Statutes have been enacted to impose a duty upon agencies responsible for child welfare services to provide for children placed in their legal care for supervision and specifically for those placed in out of home care. CCKids is responsible for the well-being needs of these children served. When the court intervenes on behalf of the child enrolled in the Sunshine State Health Plan regarding physical and emotional well-being, CCKids will provide notification to the Plan.





1. DCM will provide copies of applicable court orders to the Behavioral Health Specialist or Nurse Care Coordinator within one (1) business day of the order. If the actual order is not available, information will be provided verbally.
2. The court order will be forwarded within two (2) business days to the CBCIH Integration Manager and Sunshine Health Case Manager assigned to CCKids by the BHC or NCC.
3. The CBCIH Integration Manager will be advised of the following:
  - a. Reason for court order.
  - b. Action, if any taken by CCKids, CMO or Children's Legal Services to address court's concerns.
  - c. Next court date and the expectations as to timeframes for implementation and compliance with the court order.
  - d. How information provided by Sunshine Health Plan will be used as it relates to recommendations of the court ordered services.
  - e. CBCIH will make determinations as to whether the clinical recommendations and court ordered services comply with state law, policy, and procedures and that the services are evidence based and meet medical necessity.

### **Complaints, Grievances, Disputes, Appeals**

The Complaints, Grievances, Disputes, or Appeals process:

- Provides an opportunity for a Medicaid enrollee to express a Grievance or complaint related to the manner in which care or services were provided;
- Manages all Grievances, Complaints or Appeals in a timely and professional manner;
- Meets the requirements set forth in the contract between CBCIH and Sunshine Health;
- Consistently collects comments for CBCIH management review; and
- Complies with the Federal regulations designed to protect Medicaid enrollees.

The Sunshine Health QI Department will provide regular reports to CBCIH through the Operating Committee on types of Complaints, Grievance, Disputes or Appeals, decisions made regarding these events and the results of any appeals both internal to Sunshine Health and external through State Fair Hearing process.

1. The CCKids Behavioral Health Specialist or Nurse Care Coordinator will provide additional information related to a filed complaint, grievance, appeal or provider dispute when requested by Sunshine staff.
  - a. Requested information will be provided to Sunshine within two (2) business days.
  - b. In the case of an expedited appeal, the requested information will be provided within 24 hours.
2. CCKids will take no further action for any disputes forwarded to Sunshine Health.



3. See also CCKids Consumer Handbook: Client Rights.

### **Fraud, Waste and Abuse Compliance Plan; Anti-Fraud Plan**

CCKids will notify Sunshine Health of potential fraud, abuse, and/or waste.

1. Sunshine Health has a Compliance Plan for the prevention, detection, monitoring, and reporting of fraud, waste, abuse and overpayment.
2. Initial identification of suspicious activity may occur through, although not limited to, any of the following activities:
  - a. Internal claim audits;
  - b. Treatment record reviews;
  - c. Recognition of altered bills;
  - d. Member and/or customer complaints;
  - e. Suspicion raised by CBC, CBCIH, or Sunshine State personnel; or
  - f. An external source.
4. CCKids Staff are required to immediately report identified suspected cases of fraud, waste, or abuse. All referrals are to be directed to CBCIH and Sunshine Health,
  - Sunshine Health's Compliance Hotline: 1-800-345-1642
  - Compliance Unit Email: [Compliance@sunshinehealth.com](mailto:Compliance@sunshinehealth.com)
  - 
  - Compliance Officer Telephone Number: 1-866-796-0530
  - Sunshine Health's Anonymous and Confidential Hotline: 1-866-685-8664
  - [https://apps.ahca.myflorida.com/InspectorGeneral/fraud\\_compliantform.aspx](https://apps.ahca.myflorida.com/InspectorGeneral/fraud_compliantform.aspx)
5. See also CCKids Employee Handbook addresses the agency's *Employee Responsibility for Detecting & Preventing of Fraud, Waste and Abuse* and *Whistle Blower Protection* policy.
6. CCKids will ensure that its staff and CMO staff are trained to understand how to recognize fraud and abuse and how to report it to appropriate parties. CCKids staff will acquire this through supervision and CMO staff will receive this information during Pre-Service Training provided by CCKids.

### **Quality of Care Incident Reporting & Notifications**

Quality of Care of Service means issues or services that compromise patient safety or have an adverse effect on an enrollee.

Procedure:

1. The CCKids Behavior Health Supervisor, Behavioral Health Specialists, Nurse Care Coordinators, and Care Coordination Support Specialist are responsible for the ongoing education of DCMs on Quality of Care.





2. Quality of Care concerns may be identified during provider contract monitoring, child specific staffings, multidisciplinary team meetings, CBHA review, discussions with DCMs, foster parents, or GALs, as well as other sources.
3. Upon notification of a Quality of Care of services issue, the Behavioral Health Coordinator or Nurse Care Coordinator will provide timely notification to the CBCIH Integration Manager.
  - a. CCKids will report all potential quality of care incidents to CBCIH immediately, but no later than within 8 hours of becoming aware of the incident.
  - b. Potential Quality of Care Incidents (PQI), which includes Adverse incidents, Critical incidents and Media events are reported to the health plan.
  - c. CCKids will submit incident reports to CBCIH via the designated mailbox or directly to CBCIH Integration Manager.
4. CCKids staff and the CBCIH Integration Manager will provide coordination and assistance as needed to support Sunshine Health in monitoring patient safety and quality of care.
5. Sunshine Health's Quality Improvement Department is responsible to investigate the potential Quality of Care service issue and take applicable action.
6. CCKids will ensure that its staff and CMO staff are trained to understand Quality of Care issues and how to report concerns to appropriate parties. CCKids staff will acquire this through supervision and CMO staff will receive this information during Pre-Service Training provided by CCKids.

#### **Network Referral and Credentialing Assistance:**

CCKids strives to deliver services in response to the individual needs of children in the child welfare system as well as give enrollees choice from a network of providers. We are committed to the development of a network of providers who have experience with the child welfare population and to establish "medical homes" by adding and contracting with providers who support an approach of providing comprehensive care, including the use of individual health records or online portals; portability of records; and evidence-based care protocols. CCKids may refer providers for credentialing and network admission to Sunshine Health.

1. CCKids must approve all new provider requests to be added to the Sunshine Health network. At a minimum, the approval will be granted by the Behavioral Health Coordinator for behavioral health services or the Nurse Care Coordinator for physical health services. The CCKids Behavioral Health Supervisor and Contract Specialist may also be involved.
2. Upon completion of or receipt of a New Provider form by the prospective provider; CCKids will make an internal decision regarding adding the provider based upon service array needs within the geographic area.



3. Completed New Provider forms shall be sent to the Regional Coordinator. The Coordinator shall review the forms for completeness and submit the completed forms to the appropriate MMA Network staff.
  - a. MMA Network staff will review new provider requests at least monthly with consideration as to how this provider addresses: access, availability, quality of care concerns (by adding the provider in the area) or meets an identified specific need.
  - b. CCKids will assist In the event that additional information regarding the provider is needed.
  - c. If after review and discussion the provider does not address one of the four areas above, CCKids will be notified that the provider is *not recommend* for addition to the Network.

Claims Disputes: CCKids will refer any provider claims issues to the identified Sunshine Provider Relations Specialist assigned to the Child Welfare Specialty Plan for handling.

### **Additional Care Coordination Responsibilities**

1. CCKids is also responsible for additional health-related care coordination responsibilities, including but not limited to, the following:
  - A. Educating parents and caregivers
  - B. Assessing on an ongoing basis, as well as upon initial placement or placement changes, the enrollees' needs
  - C. Viewing medical information that is available within the Sunshine Health Provider Portal (SPP) to understand the services that are being provided and to assess for continuous coordination of care needs
  - D. Identification of needed or necessary services and compilation of documentation necessary to ensure provision, including service authorization
  - E. Ongoing collaboration with Sunshine Health and assistance with contacting the applicable caregiver and/or enrollee
  - F. Provision of additional information regarding the status of the enrollee and/or providing support regarding:
    - a. Parent/Caregiver's needs
    - b. Coordination of necessary home visits
    - c. Arrangement for needed practitioner or ancillary provider appointments
    - d. Locating network providers
    - e. Coordination of services that have been authorized Sunshine Health
    - f. Discharge planning following inpatient admissions
    - g. Referrals to community programs
    - h. Coordination of court-ordered services
    - i. Transportation
    - j. Identification of any potential medication compliance issues
    - k. Participation in on-site quarterly operational monitoring with CBCIH. The monitoring process also includes assessment of progress regarding measured services and performance goals (HEDIS).
2. Educating Parents and Caregivers:  
CCKids Behavioral Health Specialists, Nurse Care Coordinators and Dependency



Case Managers are responsible for communicating information related to health care services to parents and caregivers.

- a. CCKids will train Care Coordinators, Dependency Case Managers and any other direct care staff on the importance of sharing the following information with all caregivers (e.g., foster parents, parents, or relative/non-relative caregivers):
  - Administering prescribed medications to child consistently as prescribed (CCKids Policies 202 & 203);
  - Knowing who the primary care physician is for the child including office hours and how to contact the PCP 24 hours a day;
  - When to contact the PCP in order to receive timely services when a child begins to have symptoms of illness;
  - When to go to the emergency room and for what conditions;
  - When to use alternatives to the emergency room including the PCP's office and urgent care;
  - Knowing who provides dental and vision care for the child; and
  - Keeping all appointments, especially for behavioral health services
- b. CCKids will train care coordinators, DCMs and any other staff (including caregivers) on:
  - Health plan self-help and after-hours resources
  - Alternative to unnecessary emergency department visits
  - Health plan covered contraceptive options available and benefits for pregnant members
- c. Training for caregivers on the information above may be provided:
  - During initial training for new foster parents and in the mandatory foster parent trainings each year through the identified trainers in each CBC;
  - During monthly face-to-face meetings between the Dependency Case Manager and the caregiver in the home;
  - During initial and ongoing staffings with parents, foster parents and relative/non-relative caregivers.

### 3. Documentation of Care Coordination Activities

- Care Coordinators are responsible for documenting all care coordination activities in the IMV note section within the Integrate® application.
- Caseload documentation, via the Integrate "CASES" application will be completed monthly for members who have health and behavioral health conditions that require coordination of care.

### 4. Quality Improvement:

- a. Sunshine Health oversees the case management program as part of Utilization Management
- b. Nurse Care Coordinators will review case management reports/data, available within the Integrate® system and/or the Sunshine Health Secure Provider Portal (SPP) and will communicate with the CBCIH Integration Manager and CBCIH Nurse/Health Care Consultant as needed, or upon request.
- c. The activities and outcomes of the SCM program are reviewed and evaluated by the Operating Committee; findings may be shared with the CBC Lead Agency staff and/or Nurse Care Coordinators for process improvement opportunities.



- d. Complaints regarding the case management program are tracked and reviewed separately by Sunshine Health's Utilization Management Program.
- e. Evaluation of the SCM program is conducted annually as part of the quality improvement plan, and includes:
  - i. A review of the program structure, policies and procedures, work flows and decision support tools; and
  - ii. Performance metrics, which are evaluated via tracking and trending of data that is collected from systems and case review processes.
- f. All exchanges of confidential information with all individuals adhere to the parameters established by regulatory and state mandates and privacy policies.

### **Communications and Approved Training**

Communities Connected for Kids will ensure compliance that any communication, messaging, training and education information related to the CWSP is approved by CBCIH prior to sharing with stakeholders to ensure consistent and accurate messaging. CCKids will meet with CBCIH regularly to stay abreast of developments.

Approved:

DocuSigned by:  
  
96C0E7A7E02E4BA...

Carol DeLoach, CEO  
March 1, 2023