The National Association of Social Workers North Carolina Chapter (NASW-NC) is a membership organization with 4,500 social work members that promotes, develops, and protects the practice of social work and social workers. NASW-NC also seeks to enhance the effective functioning and well-being of individuals, families and communities through its work and advocacy.

NASW-NC praises legislative leaders for funding that is focused on our aging population:

- Adult guardianship: Budgets additional Social Services Block Grant (SSBG) federal receipts of $987,309, along with local match receipts, for local county departments of social services to provide additional adult guardianship services.
- Home and Community Care Block Grant (HCCBG): Increases access to HCCBG, community-based services and supports by budgeting $850,000 in additional SSBG federal receipts and an additional $94,444 in local match.

Additionally, NASW-NC praises legislators on:

- Amending risk categories for Medicaid. This move allows outpatient providers and behavioral health and I/DD provider agencies that are nationally accredited to be considered low risk. These category changes allow Medicaid providers to practice without additional hoops to jump through like fingerprinting required by high risk providers.
- Not including harmful Medicaid work requirements in the budget.
- Lifting state employee salaries to $31,200 or providing a 2% raise if the salary is already at that level or higher; a one time, 1% payment for retirees; and five non-expiring bonus leave days.

However, NASW-NC has the following budget concerns:

- No funding for the Suicide Prevention Lifeline- this program needs approximately $350,000 as it is no longer funded by the Mental Health Block Grant. On average, nearly 5,000 calls are made monthly and more than 255+ calls are made daily. All calls to the Lifeline are person response calls with lives saved, attempts thwarted of all ages, abilities, ethnicities, and all 100 counties from across the state are served.
- No funding for Mental Health First Aid Training- approximately $350,000 is needed. Like the Suicide Prevention Lifeline, this program is no longer funded by the Mental Health Block Grant. As of February 2018, 49,314 individuals have been trained: 35,000 in adult mental health first aid and 13,637 in youth mental health first aid.
- Reductions in single stream funding to LME/MCOs: $438,041 recurring and $16,583,635 nonrecurring. LME/MCOs continue to provide services despite long waiting lists for services. Reducing funding further reduces access to services.
• Redirected funds from the Maternal and Child Health Block Grant to some organizations that are anti-choice and provide biased pregnancy care. These funds could result in a reduction of direct services to patients served through the Division of Public Health.

• No funds for additional opioid staff- $780,425 is needed. This supports the Opioid Action plan by aiding in monitoring and assuring that quality services are provided. Staff are also needed to coordinate Substance Abuse Block Grant and Cures money to ensure compliance with Federal rules.

• Nonrecurring, grant funds for school systems to hire support staff- including school social workers. Since the funding is nonrecurring and only funded for one year, we are concerned that some school systems will hesitate to hire full time staff without future funding measures.

• Did not fund closing the health insurance coverage gap that could benefit 670,000 individuals and inject over $4 billion into North Carolina’s economy annually.

• Did not use all of the $70 million from the new Child Care and Development Block Grant (CCDBG) funds to provide support for the 50,000 children on the Child Care Subsidy waiting list. Instead, only 3,700 additional children will gain access to child care under this budget proposal as $50 million is diverted to other services.

Additionally, not allowing amendments or public discussion during the budget process likely caused several oversights in funding measures. We hope these can be fixed immediately.