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February 16, 2018

The Honorable Orrin Hatch
Chair: Senate Finance Committee
Senate Hart Office Building Room 104
Washington, D.C. 20515

The Honorable Ron Wyden
Ranking Member: Senate Finance Committee
Senate Dirksen Office Building Room 221
Washington, D.C. 20515

Dear Chairman Hatch and Ranking Member Wyden:

Generations United applauds your leadership in inviting stakeholder input on ways to better address the opioid crisis through Medicaid, Medicare and human services. Generations United's recommendations will focus on the impact of the crisis on children and caregivers in grandfamilies or kinship care because the children's parents have died or are incarcerated, currently using drugs, in treatment or otherwise unable to take care of the children.

Generations United is the national organization focused on improving the lives of children, youth and older people through intergenerational strategies, programs and public policies. For twenty years, Generations United's National Center on Grandfamilies has been a leading voice for issues affecting families headed by grandparents or other relatives and the need for evidence-based practices to support them.

According to the U.S. Census, about 2.5 million children are living with grandparents, relatives or close family friends without either of their parents in the home. With the rise in opioid use, more grandparents and other relatives are stepping in to raise children. Nearly 1/3 of children in foster care are being raised by grandparents or other relatives in "kinship care." Yet for every single child in foster care with relatives, 20 children are being raised by relatives outside the foster care system. Those children and families do not have access to a range of supports and services available to children in traditional foster homes with unrelated caregivers. The vast majority of relatives step up to care for the children at a moment's notice with little to no support. They are suddenly forced to navigate unfamiliar, complex systems to help meet the physical, mental and cognitive health challenges of the children, many of whom have experienced significant trauma.

Often, relative caregivers who step in to care for children because of their parent's substance use do not have legal custody of the children, making it difficult to secure needed health care coverage to meet their needs. Taking on the unexpected expense of a child, especially when they do not know how to access health care for the child, can be devastating to caregivers living on fixed incomes. Countless grandfamilies report spending down their retirement savings to address the health, mental health, food and clothing needs of the children, or to pay legal expenses

seeking legal custody of the children. Other caregivers forgo their own medications or other health needs in order to meet the needs of the children.

Despite these challenges, research shows that children do well in the care of relatives who receive appropriate supports and services to help the children thrive. Compared with children in foster care with non-relatives, children with relatives have more stable and safe childhoods with a greater likelihood of having a permanent home. They experience fewer school changes, have better behavioral and mental health outcomes and are more likely to report that they “always feel loved.”

Recommendations:

Provide Grants for Kinship Navigator Services:

Kinship navigator programs offer grandfamilies a single point of entry for connecting to health and mental health services, financial and legal assistance, substance use prevention and treatment, housing, support groups and other services. Research shows that kinship families who use quality kinship navigation services experience greater safety, permanency and wellbeing. With the passage of the Family First Prevention Services Act, states will be able to receive partial federal reimbursement for the provision of evidence-based kinship navigation services. While this is a major step to help ensure sustainability of existing kinship navigator programs, currently only about 20 states have some form of a navigator program, and many are limited to one geographic region within their state. The federal government should encourage and equip states, tribes and localities that do not have programs to develop them through competitive grant programs and technical assistance similar to what was provided through the Family Connections Grants in the Fostering Connections to Success and Increasing Adoptions Act of 2008.

Address Barriers to Licensing Kin as Foster Parents:

For many families who step in to care for children impacted by the opioid crisis, becoming licensed as foster parents provides necessary structure and support to help them meet the needs of the children. The Family First Prevention Services Act seeks to address barriers to licensing relatives as foster parents by requiring states to measure their licensing standards against national standards and to identify and address barriers to licensing relatives. Generations United recommends the Department of Health and Human Services use the [National Association for Regulatory Administration Model Family Foster Licensing Standards](#) as those national standards. These widely respected standards were developed in partnership with the American Bar Association, the Annie E. Casey Foundation and Generations United.

Tribal governments also license foster and relative family care providers. Many have developed important strategies and supports for helping relative family care providers. Federal and state governments should engage tribal governments and examine how they can encourage innovative tribal practices and ensure that model federal and state standards provide culturally appropriate support to American Indian and Alaska Native grandfamilies.

Offer Training for Kinship Families on Substance Use and Trauma:

Grandfamilies where caregivers are not licensed as foster parents are often unable to access critical information and training related to the impact of substance use and trauma on children. Federal agencies should offer support to states and tribes and direct them to offer training on the impact of substance use, adverse childhood experiences (ACEs) and trauma on children’s mental, emotional, physical and behavioral health and effective strategies for preventing substance use by impacted children and helping them thrive despite their challenges. Trainings should be offered in a variety of settings—including schools, health centers, support groups, caregivers’ homes and online—to better ensure access for relatives. Furthermore, child

care/respite services should be offered to allow caregivers to attend with the assurance that the children are well cared for.

Improve Access to Health Care for Children in Kinship Families:

Access to quality health care coverage and services is critical to meeting the physical and mental health needs of children and caregivers in kinship families impacted by substance use. Federal support for Medicaid and Indian Health Service programs must be protected from caps or cuts that would leave fewer people with coverage or reduce benefits. Early and Periodic Testing and Diagnostic Treatment (EPSDT) benefits must be preserved to ensure that the special health needs of children are diagnosed and treated in a timely way.

States should enhance Medicaid outreach efforts to kinship families. Less than half of eligible children in kinship care receive Medicaid. In particular, grandfamilies who do not have legal custody but are caring for the children full-time report barriers securing Medicaid for the children. For these relatives stepping in to care for related children when parents are not able to because of opioids, it is critically important that the children be able to receive Medicaid and any tax benefits that can assist them in the care of the child.

Medicaid outreach efforts should also include tribal governments to improve outreach to American Indian and Alaska Native grandfamilies and leverage Medicaid services agreements that many tribes have with the states.

Provide Therapeutic Foster Care Services for Kinship Families:

Kinship families raising children with high level behavioral or mental health needs often do not have access to proven supportive services like Therapeutic Family Care (TFC) to help the children thrive. TFC is the least restrictive intensive treatment intervention for children and youth with mental and behavioral disorders, who would otherwise be in expensive congregate care with sometimes less successful outcomes and higher utilization of psychotropic medications. TFC provides services and supports wherever the child resides, whether their own family, an adoptive family, a kinship placement or a treatment/therapeutic foster home. The importance of family-based services and supports for caregivers (parents, kin, and non-relative foster parents) are recognized by Congress in the Bipartisan Budget Act, including the Family First Prevention Services Act and reauthorization of Title IV-B, the Child Abuse Prevention and Treatment Act (CAPTA), and the Maternal, Infant and Early Childhood Home Visiting Program (MIECHV).

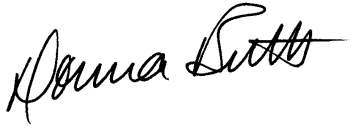
As Congress continues to address the root causes, best treatments and ripple effects of opioid abuse in particular, we ask for your attention and remedy to a specific barrier to family-based care that is addressed through bipartisan legislation: S. 1357/H.R. 2290, the Family-Based Care Services Act. The Act clarifies available core services and adds professional quality standards to the vital service of therapeutic family/foster care (TFC) for qualifying youth involved in the child welfare and foster care systems, children with disabilities and children with severe mental illness or behavioral health needs.

Elevate and Promote Best Practices for Serving Kinship Families Impacted by Substance Use:

Many traditional social service, substance use prevention and treatment, health and mental health organizations are designed to serve families with birth parents and children or unrelated foster families. They are unfamiliar with the unique needs and dynamics of serving the kinship triad of children, birth parents and relative caregivers. Technical assistance and resource information is needed to help programs adapt and best serve the growing numbers of kinship families. Generations United recommends creating a national technical assistance center on grandfamilies that engages experienced experts to assist organizations in efforts to serve kinship families and promote best or promising practices and programs with a special emphasis on serving grandfamilies impacted by opioids or other substance use.

Thank you again for your leadership and commitment to children and families impacted by the opioid crisis and for this opportunity to submit our recommendations. Please direct follow up questions or comments to Jaia Lent at jlent@gu.org or 202-777-0115.

Sincerely,

A handwritten signature in black ink, reading "Donna Butts". The signature is fluid and cursive, with a long horizontal stroke extending from the end of the name.

Donna Butts
Executive Director