A. Call to Order by President
   Conitha King (AL)

B. Roll Call and Declaration of Quorum by Secretary
   Michelle Grose-Bray (AK)

C. Board and Committee Reports
   1. Historian Report
      Suzi Ballinger (OH)
   2. Reading of Minutes
      Michelle Grose-Bray (AK)
   3. Federal Issues Report
      Jason Bernbaum (AZ)
   4. Membership Report
      Amanda Gehring (KY)
   5. Regional Coordinators Report
      Scot Carson (AZ)
   6. Time and Place Report
      Stan Mead (LA)
   7. Resolutions Report
      Jason Bernbaum (AZ)
   8. Bylaws Report
      Harry Roberts (DE)
   9. Marketing and Communications Report
      Michelle Grose-Bray (AK)
      Super Marketing Committee Update
   10. Nominating Report
      Scott Carson (AZ)
   11. Training Committee Report
      Jason Sanchez (NM)
   12. Continuing Professional Education Committee
      TBD

D. Website Update
   Jesse Bratton (OK)

E. Committee Reports
   13. Arrangements Committee Report
      Deena Brown (OK)
      2018 Conference – Williamsburg, VA
      2019 Conference – Phoenix, AZ
      Michelle Grose-Bray (AK)
   15. Audit Committee Report
      Tina Coutu (AR)
   16. Treasurers Report
      Jesse Bratton (OK)
   17. Program Committee
      Chris Smith (OK)
1. Historian Report

Suzi Ballinger of Ohio presented the Historian report.

Ms. President, Board members, Regional Coordinators, Past Presidents and guests, the Historian’s report is as follows:

The National Association of State Human Services Finance Officers (HSFo) held its fall planning meeting in Phoenix, Arizona at the Embassy Suites by Hilton hotel from December 2, 2017 to December 6, 2017. There were a total of 29 registrants, including 21 attendees, 7 guests and 1 corporate sponsor in attendance.

Saturday, December 2 – The Training and Program Committees met to get organized for their meetings and to discuss current status of work.

Sunday, December 3 – Executive Officers met in the morning, followed by a full Board meeting for the balance of the morning. This included reports from most committees. The Program Committee met for the entire day.

Monday, December 4 – The Board, Past Presidents and Committee Chairs met to discuss Arrangements, Sponsor Development and the Audit Report. In addition, OpenGov, one of the corporate sponsors, shared a presentation with the attendees concerning cloud-based budgeting and planning systems and performance measurement strategies. The Site Selection Committee reviewed 3 potential sites for the 2019 annual conference from the morning through close of business. The Program Committee met for the entire day. Monday evening the Appreciation Dinner was held in the hotel.

Tuesday, December 5th – The Board, Past Presidents and Committee Chairs met to discuss the financial status, budget and future plans for the organization. The Program Committee presented their proposed Annual Conference Agenda to the Board for comments and suggestions. The Site Selection Committee toured 2 additional properties as possible sites for the 2019 Annual Conference. The five properties toured over 2 days included Arizona Grand Resort, The Westin Phoenix Downtown, The Scottsdale Plaza Resort, Doubletree and The Scott. After discussions by the Site Selection Committee, it was decided that the 2019 Annual Conference would be held at The Scott Resort and Spa.

Wednesday, December 6th – The Board met to finalize all business and attendees networked on issues confronting their agencies.

There have been no scheduled trainings since the meeting in Phoenix.

The Site Selection Committee for the 2020 annual conference met in Providence, Rhode Island from March 25, 2018 to March 27, 2018. Attendees were Conitha King, Stan Mead, Michelle Gross-Bray, Deena Brown and Dague Clark. The members visited 4 potential sites for the annual conference – Marriot, Hilton, Omni and the Biltmore. The final selection will be announced at the San Diego Planning Session held April 14, 2018 to April 18, 2018.
Ms. President, this concludes the Historian report, and I make a motion for its acceptance.
2nd by Demetrius Taylor GA, Motion passed.

2. Secretary Report

Michelle Grose-Bray, Secretary

Madame President, Executive Board Members, Committee chairs, and Past Presidents

The minutes from the 2017 Fall planning meeting held in Phoenix, AZ have been uploaded to the HSFO website. I request the reading of the minutes be waived.
2nd by Jason Sanchez, NM Motion passed

3. FEDERAL ISSUES REPORT

The Trump administration will allow states for the first time to impose work requirements on Medicaid recipients.

The Centers for Medicare & Medicaid Services released a guidance Thursday outlining what states need to do to mandate that certain Medicaid enrollees work to qualify for benefits. The agency is expected to start approving state waivers promoting "community engagement activities" in coming weeks.

The historic move would be a significant change in how the government health insurance program operates and would fulfill a longtime Republican goal. States, for instance, could require non-disabled, working age recipients to work, volunteer, go to school or enter a job training program. The guidance also includes caregiving as one of the activities.

"Medicaid needs to be more flexible so that states can best address the needs of this population. Our fundamental goal is to make a positive and lasting difference in the health and wellness of our beneficiaries, and today's announcement is a step in that direction," said Seema Verma, the agency's administrator.

Critics, however, argue that Republicans are using work requirements to thin the Medicaid rolls. They fear many recipients will be unable to meet the mandate and be left uninsured. The work requirements will likely be challenged in court.

In its guidance, CMS pointed to studies that show working and volunteering can contribute to better health as justification that the requirement is in keeping with Medicaid's mission.
The agency's guidance provides states with a lot of flexibility in designing their programs and highlights that many recipients may need additional considerations.

For instance, the guidance notes that some Medicaid recipients may have trouble meeting these requirements because of poor health, substance abuse or high unemployment in their areas. States should take these issues -- as well as recipients' employability -- into consideration and allow for modifications or exemptions, the agency said. Pregnant women will also be exempt. The agency specifically calls out the opioid epidemic, saying that time spent in treatment can count towards the mandate and those in intensive recovery programs can be excused. Many governors, including Republican ones, have defended the Medicaid program as being critical to addressing the substance abuse crisis.

States will be required to describe strategies to assist recipients in meeting the requirements and to link them to job training and support resources, including child care and transportation. However, they will not be allowed to use federal Medicaid funding to finance these services. The agency is encouraging states to align their Medicaid work requirements with those mandated by other federal safety net programs. Recipients who meet the work requirements in the Supplemental Nutrition Assistance Program, commonly known as food stamps, and by the Temporary Assistance for Needy Families, must be considered in compliance with their state's Medicaid rules.

Republicans have long wanted to add work requirements to the Medicaid program, which covers nearly 75 million low-income children, adults, elderly and disabled Americans. The broadening of Medicaid to low-income adults under Obamacare -- roughly 11 million have gained coverage under the health reform law's Medicaid expansion provision -- further spurred GOP efforts.

However, the Obama administration did not approve any state waivers that would impose work mandates, saying it was not in keeping with the program's mission to provide access to medical services. Consumer advocates and health policy experts fear that such a requirement could prove a big hurdle for many recipients, leaving them without the care they need.

The Trump administration swiftly signaled that it held a different view. Verma, sent a letter to governors hours after after she was confirmed in March urging them to apply for such waivers.

Related: Trump administration open to making some Medicaid recipients work, pay premiums

"One of the things that states have told us time and time again is that they want more flexibility to engage their working-age, able-bodied citizens on Medicaid," Verma told a conference of state Medicaid directors in November. "They want to develop programs that will help them break the chains of poverty and live up to their fullest potential. We support this."
The guidance release Thursday pointed to several studies that said unemployment is harmful to one's health and can prompt higher rates of hospital admission and death, as well as poorer general and mental health. Ten states -- Arizona, Arkansas, Indiana, Kansas, Kentucky, Maine, New Hampshire, North Carolina, Utah and Wisconsin -- have submitted waivers that include work or community engagement requirements, according to the agency. South Dakota's governor said in his State of the State address Tuesday that he would also look to require certain recipients to work.

Verma, who served as a Medicaid consultant for Indiana and Kentucky before joining the Trump administration, has long advocated for work requirements. Now, she is in a position to approve them.

"For the future of our country, we need all Americans to be active participants in their communities," she said in November. "Believing that community engagement requirements do not support or promote the objectives of Medicaid is a tragic example of the soft bigotry of low expectations consistently espoused by the prior administration. Those days are over."

Related: Millions of Medicaid recipients already work

Many Medicaid recipients are already employed. Some 60% of non-disabled, working-age adults have jobs, while nearly 80% live in families with at least one member in the labor force, according to a Kaiser Family Foundation analysis. Most of those who don't work cite illness, disability or family obligations as the reason.
The work requirements will likely have an impact on a broad number of adults. Many Medicaid enrollees may have physical or mental health problems -- such as arthritis or asthma -- that don't meet the criteria for federal disability programs, but still interfere with their ability to work, Kaiser said. They could find it difficult to apply for exempt status and verify it, which may need to be done monthly in some states, while those who are working may have a hard time verifying their hours, especially if they have variable shifts.

Plus, state Medicaid agencies won't get any additional federal funding to help recipients find and hold jobs, even though they are generally not equipped to develop, provide, and administer work support programs, said MaryBeth Musumeci, associate director of Kaiser's Program on Medicaid and the Uninsured.

"The new [state programs] will penalize individuals by having them lose health coverage, rather than incentivize them, as a voluntary program with adequately funded supportive services necessary to overcome barriers, would," she said.

Consumer advocacy groups are likely to consider legal action once CMS starts approving state waivers. Requiring recipients to work would be illegal because it is not consistent with Medicaid's objectives, said Leonardo Cuello, health policy director of the National Health Law Program. He dismissed the agency's justification that unemployment makes people less healthy.

"Working doesn't make people healthy. It's making people healthier that enables them to work," he said.

Taking away people's access to health care is a "terrible strategy if you want to promote work."


Health Insurance Options for DACA Grantees

For many DACA Grantees, access to health care is still a dream deferred. It’s not astonishing that there is a misunderstanding among migrants and enrollment helpers about the eligibility of young non-citizens with the position of Deferred Action for Childhood Arrivals (DACA). These uninsured migrants are an exception to the general rule that non-citizens who are “lawfully present” are qualified for coverage under the ACA. They are also the only migrants with Deferred Action who are not qualified.

The Obama Administration founded the DACA program to offer certain undocumented youth, usually called “DREAMers,” with the chance to work and to further their education in the U.S. without fear of deportation (“removal”). Removal action against these young grownups may be delayed for at least two years, and extensions are accessible. Under DACA guidelines, the young individuals must meet certain requirements, such as arrival in the U.S. before the age of 16, and present enrollment in school or the military. Once granted DACA, they have the approval to work and are qualified for a Social Security number and an employment authorization document (EAD). But at the same time,
these DACA recipients do get sick. And when they do, they are often faced with the challenges of which health insurance to opt for. This situation turns out to be more complex when the law concerning health insurance by DACA recipients was passed. This law gave DACA recipients minimal opportunities about which options to opt for.

Below are some of the health insurance options DACA Grantees Direction can consider.

State-Funded Program

DACA Grantees have the same eligibility for health care and coverage as undocumented migrants have. They may be qualified for a different, state-funded program available irrespective of immigration status (such as “Medi-Cal” in California). If their state selects a CHIP option to offer prenatal care irrespective of status, then pregnant DACA grantees may obtain care. A chart upheld by the National Immigration Law Center contains detailed information on state coverage programs.

Medicaid

Limited emergency services can be paid for by Medicaid, including labor and delivery during childbirth. It is widely believed that Medicaid is not available to DACA recipients, but certain jurisdictions – New York, California, Massachusetts and Washington, D.C. – do permit DACA recipients to apply for Medicaid benefits.

Employer-Sponsored Health Insurance

Since DACA recipients are eligible to work, they can always opt for the one provided by their employer- if there’s anyone provided. Based on the quality of the coverage offered and the size of the employer subsidy, this may be the most effective option, if it’s accessible. Also, if the employer offers health care, whether or not it’s required, employees may be unable to exercise another choice to acquire health coverage from one of the health insurance exchanges funded by the federal government or state under the ACA.

Medi-Cal Benefits

A light at the end of the tunnel seemed for some undocumented migrants and DACA recipients in California when Medi-Cal benefits became accessible for low-income children and families, irrespective of immigration status.

To be eligible, people have to meet certain requirements, including a household income that does not surpass 138 percent of the Federal Poverty Level (FPL). Some DACA recipients are not qualified because they earn too much to qualify under this low-income group, but at the same time, they are too poor to afford medical insurance on their own.

Community Health Centers

In case you are not qualified for the above, another way is to go to community clinics and obtain health care on the spot.
Affordable Care Act (ACA)

SB 10 allows California to seek a federal waiver to allow undocumented immigrants and DACA recipients to use their money to purchase health coverage through Covered California. Under the ACA, states can apply for a waiver to amend provisions of the law depending on strategies set by the U.S. Department of Health and Human Services.

If the renunciation is accepted, undocumented migrants will be able to obtain health coverage on California’s exchange, but they won’t be qualified for the subsidies that make exchange plans more affordable for lower-income residents.

Home Remedies

It is no longer news that many DACA recipients consider treating themselves at home and this is more common among them. When the Affordable Care Act was developed in 2014, it omitted undocumented migrants and DACA recipients from purchasing health coverage through government sponsored health exchanges and from receiving premium tax credits or other savings on marketplace plans.

Since many DACA Grantees are giving back to the country in diverse ways. Many are working on a degree, while others are working professionals or trying to move their way up in their jobs. They pay taxes and assist in improving the economy, but what about their health?

For many DACA recipients, the lack of health insurance is not a problem, since they don't often visit a doctor. Therefore, they often resort to treating themselves at home.

Over The Counter Medicine

Just like the home remedies, another way DACA recipients seek medical attention is by purchasing medicine in pharmacies. This is simply self-medication- prescribing drugs to themselves as long as they know the cause of their ailment. This is often not too good, as self-medication can't be compared with opting for a health insurance.

Ability to Pay program

The Ability to Pay program is also obtainable at the Los Angeles County hospital; people pay only for the time they get in touch with the doctor and that payment counts for the whole month. If patients need prescriptions or a follow-up appointment, their one-time payment covers the visits as long as it is within the same month.

Private Health Insurance

For those immigrants in need of affordable health coverage, private health insurance is an option, and websites like HealthCoverageFast.com provides such coverage with a few questions and in minutes you can get affordable health coverage that meets you or your family’s needs. With many plans and carriers to choose from, you can be rest assured that there is a health plan that suits your needs. You can get qualified here.
For People With Mental Health Problems

If you have, or believe you may have, mental health problem, it can be helpful to talk about these issues with others. It can be scary to reach out for help, but it is often the first step to helping you heal, grow, and recover. Having a good support system and engaging with trustworthy people are key elements to successfully talking about your own mental health.

Build Your Support System
Find someone—such as a parent, family member, teacher, faith leader, health care provider or other trusted individual, who:

- Gives good advice when you want and ask for it; assists you in taking action that will help
- Likes, respects, and trusts you and who you like, respect, and trust, too
- Allows you the space to change, grow, make decisions, and even make mistakes
- Listens to you and shares with you, both the good and bad times
- Respects your need for confidentiality so you can tell him or her anything
- Lets you freely express your feelings and emotions without judging, teasing, or criticizing
- Works with you to figure out what to do the next time a difficult situation comes up
- Has your best interest in mind

Find a Peer Group
Find a group of people with mental health problems similar to yours. Peer support relationships can positively affect individual recovery because:

- People who have common life experiences have a unique ability to help each other based on a shared history and a deep understanding that may go beyond what exists in other relationships
- People offer their experiences, strengths, and hopes to peers, which allows for natural evolution of personal growth, wellness promotion, and recovery
- Peers can be very supportive since they have "been there" and serve as living examples that individuals can and do recover from mental health problems
- Peers also serve as advocates and support others who may experience discrimination and prejudice

You may want to start or join a self-help or peer support group. National organizations across the country have peer support networks and peer advocates. Find an organization that can help you connect with peer groups and other peer support.

Participate in Your Treatment Decisions
It’s also important for you to be educated, informed, and engaged about your own mental health.

- Find out as much as you can about mental health wellness and information specific to your diagnosed mental health problem.
- Play an active role in your own treatment.

Get involved in your treatment through shared decision making. Participate fully with your mental health provider and make informed treatment decisions together. Participating fully in shared decision making includes:
Recognizing a decision needs to be made
• Identifying partners in the process as equals
• Stating options as equal
• Exploring understanding and expectations
• Identifying preferences
• Negotiating options/concordance
• Sharing decisions
• Arranging follow-up to evaluate decision-making outcomes

Learn more about shared decision making.

Develop a Recovery Plan
Recovery is a process of change where individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. Studies show that most people with mental health problems get better, and many recover completely. You may want to develop a written recovery plan. Recovery plans:

• Enable you to identify goals for achieving wellness
• Specify what you can do to reach those goals
• Can be daily activities as well as longer term goals
• Track your mental health problem
• Identify triggers or other stressful events that can make you feel worse, and help you learn how to manage them

You can develop these plans with family members and other supporters. Learn more about recovery.

Source:
https://www.mentalhealth.gov/talk/people-mental-health-problems

Children's Services
The County of San Diego has historically made every effort to protect, serve and enrich the children in our region. Here you will find an array of services dedicated to promoting healthy, happy and opportunity-filled lives for every child.

The service areas and services for this program are listed below. Click on any entry for more information.

Adoptions Program
• Adoption Links
• Adoptions Overview

Child Abuse Prevention Coordinating Council
• About Child Abuse Prevention Coordinating Council

Child Care Services

Child Support
• About Child Support
Child Welfare Services (CWS)

- About Volunteers in Child Welfare Services
- Child Abuse Hotline
- Child Welfare Improvements and the COAS
- Independent Living Skills
- Ombudsman
- Polinsky Children's Center
- Relative Notification
- San Pasqual Academy
- Volunteer Opportunities

Children In Need, Inc.

- About Children in Need, Inc.

First 5 Commission of San Diego

- About the First 5 Commission of San Diego

Foster Care Services Committee

- About Foster Care Services Committee

Foster and Adoptive Resource Family Services

- Become a Foster/Adoptive Resource Parent
- Foster Frequently Asked Questions
- Additional Links & Resources
- Foster Home Licensing Orientation Schedule (PDF)
- Taking Care of Business Day 2014 (PDF)

Heart Gallery

Polinsky Children's Center (PCC) Advisory Board

- About PCC Advisory Board

Safe Arms for Newborns

- About Safe Arms for Newborns
- Safe Arms Designated Locations

Safe4Baby

- About Safe4Baby
- Sudden Infant Death Syndrome
- Safe Sleeping for Infants
- Shaken Baby Syndrome
- Safely Surrendered Baby Law
Volunteers in Child Welfare Services

- Foster Youth Mentors
- How to Volunteer
- Polinsky Volunteer Program

The list above shows resources available in San Diego County, California. Please visit: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/cs.html for details.

Prepared by Michele McDonald, federal issues chair, presented by Jason Bernbaum. Jason Moved for acceptance, 2nd by Jason Sanchez. Motion Passed.

4. MEMBERSHIP COMMITTEE REPORT

HSFO 2018 April Planning Meeting San Diego, CA April 14-18, 2018

Madam President, Board Members, Regional Coordinators, Past Presidents, and Committee Chairs:

I would like to thank Michelle Grose-Bray, Jesse Bratton and the regional coordinators for their support these last few months.

As of April 11, 2018, we have 38 paid members. This includes new member agencies OH Montgomery County and NE Health & Human Services System. We have several agencies that were active last year that we have not yet paid membership dues for 2018:

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<tr>
<th>Agency Name</th>
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<tbody>
<tr>
<td>AR Department of Health &amp; Human Services</td>
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<tr>
<td>CT Department of Social Services</td>
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<tr>
<td>IL Department of Health Care and Family Services</td>
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<td>IN Dept of Child Services</td>
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<td>KY Department for Medicaid Services</td>
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<td>MS Department of Medicaid</td>
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<td>NC Department of Health &amp; Human Services</td>
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<td>NJ Department for Children and Families</td>
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<td>NV Department of Health and Human Services</td>
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<td>NV Washoe County Social Services</td>
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<td>WV Department of Health &amp; Human Services</td>
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<td>WY Department of Family Services</td>
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I am hopeful that all of the above agencies will renew their memberships for 2018. Payments from IL Department of Health Care and Family Services, MS Department of Medicaid, NC Department of Health & Human Services and NJ Department for Children and Families are forthcoming per communications with them.
Activities since the fall business meeting held in Phoenix, Arizona in December 2017 include:

- Issuing invoices for 2018 Membership Dues
- Working with regional coordinators to contact previous member agencies and update contact information
- Coordinate follow-up on unpaid memberships with Jesse Bratton
- Updating the historical membership listing as appropriate
- Following up with potential members interested in HSFO

Future activities currently planned include:

- Continued efforts to retain and build memberships, including outreach to potential new member states.
- Continued efforts towards securing payment of dues from previously active agencies
- Partner with the Marketing and Communications Chair as well as the HSFO board to promote the organization
- Other activities as suggested or requested by the Executive Board.

This concludes my report and I move for its acceptance.

Amanda Gehring
Membership Chair
2nd by Michelle Grose-Bray. Motion Passed.

5. REGIONAL COORDINATORS REPORT

Madam President, Board Members, Regional Coordinators, Past Presidents and Committee Chairs:

First, I would like to thank President Conitha King for the opportunity to chair the Regional Coordinator Committee for 2018. I am unable to travel to the Spring Planning Meeting and I have asked Past President, Scott Carson to present my report. Thank you, Scott.

Since the Fall Planning Meeting in Phoenix, Arizona the Regional Coordinator Committee members have:

- Had Committee and individuals calls and emails to update and coordinate activities,
- Regional Coordinators and I have actively participated in numerous Super Marketing and Program Committee calls, and
- Assisted with trying to find updated information on former HSFo Member agencies that have not been members in recent years.

We look forward to the materials that will be developed by the Super Marketing Committee to help grow our organization. Thank you, and this concludes my report and I move for its acceptance.

Scott Carson for,

Dague B. Clark

Regional Coordinator Committee 2018 Chair

2nd by Michelle Grose-Bray
6. TIME AND PLACE REPORT

"Madam President,

It is my pleasure to present the Time and Place report.

The 2018 Annual Conference will be held in Williamsburg, VA at the Kingsmill Resort. The dates of the conference are August 25 – August 31, 2018. The room rate for the conference is $129.00 per night plus tax for either a single or double.

The 2018 Fall Planning Meeting will be held in San Antonio, TX. The meeting hotel, dates and room rates have not been determined. They will be posted on the HSFO Website when available.

The 2019 Annual Conference will be held in Phoenix, AZ at The Scott Resort & Spa. The dates of the conference are October 5 - October 11, 2019. The room rate for the conference is $124.00 per night plus tax for either a single or double.

The 2020 Annual Conference will be held in Providence, RI. The conference hotel, dates and rooms rates have not been determined. They will be post on the HSFO Website when available.

San Antonio, TX is under consideration for the 2021 Annual Conference and will be decided at this meeting.

We are currently soliciting a host site for the 2022 Annual Conference. Any member interested in hosting our conference should contact me. My phone number and e-mail address maybe found on the HSFO Web Site.

This concludes my report and I move for its acceptance.

Stan Mead, 2018 Time & Place Chairperson

2nd by Michelle Grose-Bray, Motion passed

7. RESOLUTIONS REPORT

Madame President, Executive Board members, past presidents, and committee members

At this time I have not received any requests for resolutions. Please feel free to contact me for any resolutions that need to be presented at the annual conference to be held in Williamsburg, VA. This is my report and I respectively move for its acceptance. Peggy Hughes, Maryland

2nd by Demetrius Taylor Motion passed

8. BYLAWS REPORT

President King has asked me to serve this year as the By-Laws Chair and I would like to provide the following report.

As of March 26, 2018 I have received no requests for bylaws changes. This concludes my report and I move for its acceptance.

Harry B. Roberts, III, Bylaws Chair

2nd by Jesse Bratton, Motion passed
9. MARKETING AND COMMUNICATIONS REPORT

Unfortunately, Tara LaBlanc was unable to file a report due to sickness.

The temporary interim Super Marketing Committee offers the following update:

During the Fall 2017 planning meeting, President Conitha King appointed a “Super Marketing Committee” with the primary goal of producing marketing materials and developing a marketing plan for the HSFO organization. Beginning February 2, 2018 be-weekly teleconferences were held. I would like to acknowledge active participants, Amanda Gering, Dague Clarke, Demetrious Taylor, Jason Bernbaum, Tara LeBlanc, and Jesse Bratton.

Amanda Gering spearheaded the effort of drafting the HSFO brochure and the training “filler” that is included in your report package. This information will be made available to all HSFO members in hardcopy and electronically for their use.

In addition to the brochure, the committee opted for “In your face” the current webmaster, proposal to manage HSFO social media presence. For approximately, $6200 the webmaster will develop Facebook and LinkedIn postings advertising and promoting HSFO. Its my recommendation the marketing chair (or Super Marketing Chair, if necessary), training chair, arrangements chair, and program chair coordinate and provide information to the webmaster to promote the HSFO upcoming events.

Currently, our webmaster contract allows for two monthly email blasts. It’s my recommendation that an email marketing plan be drafted our contractual webmaster arrangement is used.

Report submitted by Michelle Grose-Bray, I move for its acceptance.

2nd by Demetrius Taylor, Motion passed

10. NOMINATING REPORT

Due to the resignation of Roberta Blyth, using the established process as outlined in the HSFO bylaws, the Executive Board and the Nominating Committee members formally convened during the Fall 2017 Planning Meeting to fill the vacant role of HSFO Historian. As a result of that process, Susan Ballinger of Ohio was selected to fill the 2018 Historian position.

As a result of this selection, Susan Ballinger’s prior position of Regional Coordinator became vacant necessitating an appointment by HSFO President Conitha King of Alabama. Demetrius Taylor of Georgia was selected to serve as a Regional Coordinator.

With these appointments, all board positions for the 2018 year were filled.

In late March of this year, the first call for nominations and applications for the anticipated board vacancies for the 2019 year was sent out to all current members and posted to the HSFO website. Positions included in the first call include Historian and four (4) Regional Coordinators. A second call will be issued in late May or early June. Once the deadline for applications has passed, a meeting with all members of the HSFO Nominating Committee will be convened to select candidates allowing the HSFO Executive Board to make contingent position offers.

This concludes my report and I move for its acceptance.

Prepared By: K. Scott Carson, March 23, 2018
Stan Mead encouraged all attendees to participate in the HSFO committees to learn how HSFO operates. Conitha King also offered the same encouragement. Stan Mead 2nd the motion, motion passed.

11. TRAINING COMMITTEE REPORT

During the 2018 business year, HSFO continued our emphasis on providing quality training that is both current and relevant. Policy and governance related to the health and welfare arena is both dynamic and fluid. It is imperative that industry professionals keep up to date with all the changing rules, regulations and applied standards. HSFO has positioned itself as a leader in providing the highest quality training via partnerships with corporate members considered leaders in the health and welfare fields.

Past and future trainings for the current business year are as follows:

- Basic Cost Allocation Training – Scheduled in Oklahoma City from May 22nd through 24th at the Residence Inn Bricktown. There are currently 20 registrants from 10 states.
- Child Welfare Training – Training plans for this topic are in development.

I am excited about the future of this organization and have found working with the training committee on this vital function to be extremely rewarding. I look forward to not only the remainder of this year but what will hopefully be many years to come of working with the outstanding people in both HSFO and our many corporate partners. I respectfully submit this report and move for its acceptance.

Prepared By: Jason Sanchez, April 9, 2018

2nd by Demetrius Taylor

There were questions regarding the individuals attending the training and whether their state agencies are members and if anyone is doing any follow up to solicit a membership. Deena Brown provided the demographics of individuals attending. Federal agencies were part of the group. One state, Utah, sends people to training, just not to the conference. Deena Brown also stated that with the Cost Allocation Training held in OK, Chris Smith and Jesse Bratto offer information about HSFO memberships and the conference. This is the effort to promote HSFO. Conitha indicated that PCG offers a meet and greet session for all individuals to meet each other. Discussion was held regarding the Medicaid online training. Establishing a deadline to complete the training was discussed.

Motion passed.

12. CONTINUING EDUCATION REPORT

The 2018 continuing education chair had to submit their resignation. However, the individual was able to report that no activity has occurred since the December 2017 planning meeting. The president is currently looking to fill this chair.

Michelle Grose-Bray moved for its acceptance of this report. Jesse Bratton 2nd.

Chris Smith offered an idea of using a bar code during the conference for individuals to claim CPE credits during the conference. Discussion was held on different ideas for compiling the individuals CPE credits as the compilation is a very tedious process for the CPE chair.
Motion passed.

13. WEBSITE UPDATE

Jesse Bratto provided an update on the website development. Currently, Jesse is working with the website developer on the options available for the members’ only section of the website. Jesse indicated that he has a password for the member’s only section, and he believes it looks great. Once the members’ only section is completed, Jesse believes the website may offer lots of assistance to HSFO on its other administrative needs.

14. ARRANGEMENTS COMMITTEE REPORT

The 71th Annual Conference will be in Williamsburg Virginia- August, 26-30, 2018 at the Kingsmill Resort. Room Rates are $129 plus tax. Rate is extended 2 days pre and post as availability allows. Reservations cutoff date for the group rate is August 9, 2018. Registration is up on the website. If you haven’t reserved your room yet, I encourage you to do so at your earliest convenience.

The Conference event will be Tuesday afternoon/evening. We are currently working on the logistics for a possible trip to Virginia Beach. We will have dinner at the location as well.

The guest event will be on Monday. We are looking at a visit to Colonial Williamsburg for those registered guest wishing to attend.

The Presidents reception and conference banquet will be held at the Kingsmill Resort.

We are planning to have a book drive for local children this year giving all attendees an opportunity to bring children’s books. Book drives have been very successful at previous conferences thanks to our membership’s generosity.

Thanks to Stan Mean, Bob Bumbalough and Vonnetta Allenbaugh. Additionally I’d like to thank De Earhart, a longtime friend to HSFO. She has been helping Bob and Vonnetta with local information for events scheduled to be outside the hotel. I appreciate all them helping me with arrangements for a second year in a row.

Many Thanks to Rhonda Sanchez who will be leading registration for us again this year.

We are in the early stages of planning for the 72nd annual conference that will be held in Phoenix, Arizona at The Scott Hotel. More information will be provides as arrangements are set.

This concludes my report and I move for acceptance. 2nd by Conitha King

Discussion was held regarding the hospitality suite and its offerings. Information was given on the hotel and activities available.

The contract has been signed with the Scott hotel in Phoenix. The date for the conference is in October to avoid the blistering summer heat in Phoenix.
15. HSFO CORPORATE MEMBER/SPONSORSHIP REPORT

Madame President, Executive Board members, past presidents, and committee chairs

At the December 2017 Fall planning meeting, the corporate tier structure was approved. Three levels – bronze, silver, and gold levels were approved. Each level has its dollar rate with its benefits. In addition, the board approved conference sponsorship activities. Some of the additional offerings are:

- $500 for inclusion of corporate logo on the conference bag
- $900 for non-exclusive sponsorship of business meetings
- $1,500 for an exclusive night of hospitality sponsorship
- Partial sponsorship of meetings, events, conference were also made available at a non-defined additional donation amount
- Free increased marketing and visibility on the new HSFo web site
- Free inclusion of corporate logo and information in the annual conference materials
- Free inclusion of corporate logo and information in any formal marketing brochure distributed to existing, new and prospective member agencies

While discussing the tier levels with continuing corporate members, it was brought to my attention how the silver level membership did not include a free conference registration but instead included a free planning meeting registration with a sponsorship of a planning meeting break. It was requested that an option be provided to corporate members, who do not normally attend the planning meetings, be offered an additional conference registration instead. The 2018 president and myself discussed this change. It was determine the financial value was equal for either option therefore, a revision to the silver level membership occurred. Corporate members may now opt for either the free planning meeting registration and break sponsorship or an additional conference registration.

Since December 2017, one corporate sponsor has increased their level from a previous silver level member to a gold level membership. I am continuing to work with our corporate members on selecting a tier level. To date, at least one other corporate member has verbally agreed to a gold level membership and two others have agreed to the bronze level membership.

In addition to the marketing and additional sponsorship discussions, we plan to continue our efforts to engage corporate members and prospective sponsors in the following ways:

- E-mail inviting corporate members to attend the spring business meeting and annual conference
- E-mail thanking the corporate members for their support of HSFo and information related to what additional opportunities are available for targeted sponsorship/support
- E-mail encouraging active participation on a panel or in a session at the conference being held later this summer in Williamsburg, VA
- Phone calls to corporate members and potential sponsors introducing myself and the organization and explaining the benefits of membership and targeted sponsorship dollars that are used by HSFo to fund annual business meetings and the conference
- Reaching out to various corporations/organizations that work with or in support of the health and welfare arena in an attempt to increase awareness of HSFo as well as membership
• Collaborating with corporate partners to enhance our contact list containing key state, federal and external partners
• Working with both corporate members and HSFo leadership to explore ways of enhancing our already mutually beneficial relationship

I respectfully submit this report and move for its acceptance. 2nd by Demetrius Taylor. Motion Passed.

Prepared By: Michelle Grose-Bray March 28, 2018

16. AUDIT COMMITTEE REPORT

Madame President, Executive Board and HSFO members, the Audit report is as follows:

The audit of HSFO financial records for the period of December 1, 2016 through Nov. 30, 2017 was scheduled to begin after the December 2017 Fall planning meeting. Records were received recently and audit has started. The audit will include transactions from the December 2016 Fall planning meeting held in Williamsburg, VA, the April 2017 Spring planning meeting held in Juneau, AK, the August 2017 Annual meeting held in New Orleans, LA, the financial records maintained by Mr. Harry Roberts, and any other transactions that occurred during the audit scope.

The full audit report will be available at the annual conference in Williamsburg, VA.

This concludes my report and I move for its acceptance.

Presented by Kori Kappes, AZ 2nd by Demetrius Taylor, motion passed
### Income

#### Administrative Income
- Agency Dues (Less Conf Reg Share) | $39,800.00
- Interest Income | $41.19
  - Total Income | $39,841.19

#### Planning Meeting Income
- Phoenix, AZ | $500.00
- San Diego, CA | $1,950.00
- Fall 2018 | $2,450.00

#### Conference Income
- Corporate Sponsor Dues | $7,600.00
- Agency Dues Conf Registration | $28,600.00
- New Orleans 2017 Conference | $5,302.00
  - Total Conference Income | $41,502.00

#### Training Income
- Training Inc 1 (Medicaid Basic Online) | $3,650.00
- Training Inc 2 (Medicaid Advanced Online) | $500.00
- Training Inc 3 (Basic Cost Allocation) | $13,500.00
- Training Inc 4 (Advanced Cost Allocation) | $3,150.00
- Prior Year Training Income | $20,800.00
  - Total Training Income | $20,800.00

#### Total Income
- Total Income | $104,593.19

### Expenses

#### Planning Meeting Expenses
- Phoenix, AZ | $(11,693.56)
- San Diego, CA | $(1,211.92)
- Fall 2018 | $12,905.48

#### Conference Expenses
- Program Speaker / Travel Costs | $- 
- Williamsburg 2018 Conf | $- 
- Future Conf Site Selection | $(1,675.47)
- Future Conf Expense | $(7,500.00) 
  - Total Conference Expenses | $(9,175.47)

#### Training Expenses
- Training Exp 1 (Medicaid Basic Online) | $(500.00)
- Training Exp 2 (Medicaid Advanced Online) | $(100.00)
- Training Exp 3 (Basic Cost Allocation) | $- 
- Training Exp 4 (Advanced Cost Allocation) | $- 
- Prior Year Training Expenses | $(600.00)
**Administrative Expense**

<table>
<thead>
<tr>
<th>Expense</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounting Services</td>
<td>$(3,834.77)</td>
</tr>
<tr>
<td>Internet Services</td>
<td>$(2,800.00)</td>
</tr>
<tr>
<td>Internet Services Transition Planning</td>
<td>$ -</td>
</tr>
<tr>
<td>Marketing and Communication</td>
<td>$ -</td>
</tr>
<tr>
<td>Insurance Expense</td>
<td>$ -</td>
</tr>
<tr>
<td>Credit Card Fees</td>
<td>$(2,821.67)</td>
</tr>
<tr>
<td>Postage / PO Box Rental</td>
<td>$ -</td>
</tr>
<tr>
<td>General Training</td>
<td>$ -</td>
</tr>
<tr>
<td>CPE Application Fee</td>
<td>$ -</td>
</tr>
<tr>
<td>Other Administrative Costs</td>
<td>$ -</td>
</tr>
</tbody>
</table>

**Total Expenses**

$ (32,137.39)

**Net Income or (Loss)**

$ 72,455.80

---

**National Association of State Human Services Finance Officers**

*Balance Sheet as of 4/11/2018*

**Assets**

<table>
<thead>
<tr>
<th>Category</th>
<th>As of 11/30/2017</th>
<th>As of 4/11/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Assets</strong></td>
<td></td>
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<tr>
<td>Delaware Checking</td>
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<td>Delaware Credit Card</td>
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<td>Delaware Savings</td>
<td>$ 176,486.82</td>
<td>$ 243,428.01</td>
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<tr>
<td><strong>Total Current Assets</strong></td>
<td>$ 186,692.09</td>
<td>$ 259,147.89</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$ 186,692.09</td>
<td>$ 259,147.89</td>
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</table>

**Liabilities and Equity**

<table>
<thead>
<tr>
<th>Category</th>
<th>As of 11/30/2017</th>
<th>As of 4/11/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Liabilities</strong></td>
<td></td>
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</tr>
<tr>
<td>Accounts Payable</td>
<td>$ -</td>
<td>$ -</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
<td>$ -</td>
<td>$ -</td>
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<tr>
<td><strong>Equity</strong></td>
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<tr>
<td>Opening Balance</td>
<td>$ 208,067.69</td>
<td>$ 186,692.09</td>
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<tr>
<td>Net Income or (Loss)</td>
<td>$(21,375.60)</td>
<td>$ 72,455.80</td>
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<tr>
<td><strong>Total Equity</strong></td>
<td>$ 186,692.09</td>
<td>$ 259,147.89</td>
</tr>
<tr>
<td><strong>Total Liabilities and Equity</strong></td>
<td>$ 186,692.09</td>
<td>$ 259,147.89</td>
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## Income

<table>
<thead>
<tr>
<th>Administrative Income</th>
<th>Actuals</th>
<th>Budget</th>
</tr>
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<tbody>
<tr>
<td>Agency Dues</td>
<td>$39,800.00</td>
<td>$56,100.00</td>
</tr>
<tr>
<td>Interest Income</td>
<td>$41.19</td>
<td>$100.00</td>
</tr>
<tr>
<td></td>
<td>$39,841.19</td>
<td>$56,200.00</td>
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</table>

<table>
<thead>
<tr>
<th>Planning Meeting Income</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Phoenix, AZ</td>
<td>$500.00</td>
<td>$1,000.00</td>
</tr>
<tr>
<td>San Diego, CA</td>
<td>$1,950.00</td>
<td>$2,000.00</td>
</tr>
<tr>
<td>Fall 2018</td>
<td>-$</td>
<td>$650.00</td>
</tr>
<tr>
<td></td>
<td>$2,450.00</td>
<td>$3,650.00</td>
</tr>
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<table>
<thead>
<tr>
<th>Conference Income</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Corporate Sponsor Dues</td>
<td>$7,600.00</td>
<td>$39,600.00</td>
</tr>
<tr>
<td>Agency Dues Conf Registration</td>
<td>$28,600.00</td>
<td>$35,700.00</td>
</tr>
<tr>
<td>Williamsburg 2018 Conf</td>
<td>$5,302.00</td>
<td>$104,980.00</td>
</tr>
<tr>
<td></td>
<td>$41,502.00</td>
<td>$180,280.00</td>
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<table>
<thead>
<tr>
<th>Training Income</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Inc 1 (Medicaid Basic Online)</td>
<td>$3,650.00</td>
<td>$15,000.00</td>
</tr>
<tr>
<td>Training Inc 2 (Medicaid Advanced Online)</td>
<td>$500.00</td>
<td>$15,000.00</td>
</tr>
<tr>
<td>Training Inc 3 (Basic Cost Allocation)</td>
<td>$13,500.00</td>
<td>$15,000.00</td>
</tr>
<tr>
<td>Training Inc 4 (Advanced Cost Allocation)</td>
<td>$3,150.00</td>
<td>$15,000.00</td>
</tr>
<tr>
<td>Training Inc 5</td>
<td>-$</td>
<td>$-</td>
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<tr>
<td>Training Inc 6</td>
<td>-$</td>
<td>$-</td>
</tr>
<tr>
<td>Prior Year Training Income</td>
<td>-$</td>
<td>$-</td>
</tr>
<tr>
<td></td>
<td>$20,800.00</td>
<td>$60,000.00</td>
</tr>
</tbody>
</table>

### Total Income

| Total Income                                             | $104,593.19| $300,130.00|

## Expenses

<table>
<thead>
<tr>
<th>Planning Meeting Expenses</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Phoenix, AZ</td>
<td>$(11,693.56)</td>
<td>$(15,000.00)</td>
</tr>
<tr>
<td>San Diego, CA</td>
<td>$(1,211.92)</td>
<td>$(15,000.00)</td>
</tr>
<tr>
<td>Fall 2018</td>
<td>-$</td>
<td>$(500.00)</td>
</tr>
<tr>
<td></td>
<td>$(12,905.48)</td>
<td>$(30,500.00)</td>
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<table>
<thead>
<tr>
<th>Conference Expenses</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Speaker / Travel Costs</td>
<td>-$</td>
<td>$(20,000.00)</td>
</tr>
<tr>
<td>Williamsburg 2018 Conf</td>
<td>-$</td>
<td>$(168,930.00)</td>
</tr>
<tr>
<td>Future Conf Site Selection</td>
<td>$(1,675.47)</td>
<td>$-</td>
</tr>
<tr>
<td>Future Conf Expense</td>
<td>$(7,500.00)</td>
<td>$(6,000.00)</td>
</tr>
<tr>
<td></td>
<td>$(9,175.47)</td>
<td>$(194,930.00)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Training Expenses</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Exp 1 (Medicaid Basic Online)</td>
<td>$(500.00)</td>
<td>$(10,000.00)</td>
</tr>
<tr>
<td>Training Exp 2 (Medicaid Advanced Online)</td>
<td>$(100.00)</td>
<td>$(10,000.00)</td>
</tr>
<tr>
<td>Training Exp 3 (Basic Cost Allocation)</td>
<td>-$</td>
<td>$(10,000.00)</td>
</tr>
<tr>
<td>Training Exp 4 (Advanced Cost Allocation)</td>
<td>$ -</td>
<td>$ (10,000.00)</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>-----</td>
<td>----------------</td>
</tr>
<tr>
<td>Training Exp 5</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Training Exp 6</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td>Prior Year Training Expenses</td>
<td>$ -</td>
<td>$ -</td>
</tr>
<tr>
<td></td>
<td>$ (600.00)</td>
<td>$ (40,000.00)</td>
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</table>

**Administrative Expense**

<table>
<thead>
<tr>
<th>Description</th>
<th>$</th>
<th>$</th>
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</thead>
<tbody>
<tr>
<td>Accounting Services</td>
<td>(3,834.77)</td>
<td>(11,500.00)</td>
</tr>
<tr>
<td>Internet Services</td>
<td>(2,800.00)</td>
<td>(8,400.00)</td>
</tr>
<tr>
<td>Internet Services Transition Planning</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Marketing and Communication</td>
<td>-</td>
<td>(15,000.00)</td>
</tr>
<tr>
<td>Insurance Expense</td>
<td>-</td>
<td>(3,000.00)</td>
</tr>
<tr>
<td>Credit Card Fees</td>
<td>(2,821.67)</td>
<td>(2,000.00)</td>
</tr>
<tr>
<td>Postage / PO Box Rental</td>
<td>-</td>
<td>(215.00)</td>
</tr>
<tr>
<td>General Training</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>CPE Registration</td>
<td>-</td>
<td>(1,000.00)</td>
</tr>
<tr>
<td>Other Administrative Costs</td>
<td>-</td>
<td>(6,000.00)</td>
</tr>
<tr>
<td></td>
<td>$ (9,456.44)</td>
<td>$ (47,115.00)</td>
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</table>

**Total Expenses**

<table>
<thead>
<tr>
<th></th>
<th>$ (32,137.39)</th>
<th>$ (312,545.00)</th>
</tr>
</thead>
</table>

**Net Income or (Loss)**

<table>
<thead>
<tr>
<th></th>
<th>$ 72,455.80</th>
<th>$ (12,415.00)</th>
</tr>
</thead>
</table>

18. **PROGRAM COMMITTEE REPORT**

Chris Smith provided an overview of the Williamsburg, VA conference sessions. The conference program was developed from great discussion and participation from corporate members in attendance and state agency members. Chris requested acceptance of his report. 2nd by Demetrius Taylor.

Conitha King thanked everyone for attending the Spring Planning meeting. Conitha King made a motion to adjourn the meeting. 2nd by Michelle Grose-Bray. Motion carried and the meeting was adjourned.