Wake County Health and Human Services Board Meeting Minutes
April 23rd, 2026

Board Members Present:
Dr. Ojinga Harrison
Maty Ferrer Hoppmann
Wanda Hunter
Trey McBrayer
Dr. Tonya Minggia
Ann Rollins
Dr. Anita Sawhney
Commissioner Cheryl Stallings
Tanyetta Sutton
Irv Trust
Dr. Kelcy Walker Pope
Birchie Warren
Tamara Wilson

Guests Present:
Veronica Bitting
Janet Burnette
Diena Burton
Van Burton
Theetric Caudle Jr.
Tilda Caulde
Tatianna Cooper
Ida Dawson
Cathy Eagles
A.K. Fuentes
Dr. George Greene
Yvonne Harrison
Linnie Herndon
Shirley Herndon
Kathleen Herndon-Lee
Shynese Hockaday
Corey James
Virginia Johnson
Talar Kararashin
George Lee
Lauren Morris
Shawn Morris
Tonya Morrison
Bettie Murchison
Jeanette Pearce
Sharon Peterson
Regenia Sanders
Theara Sanders
Lauren Smith
Luurtia Smith
Tracy Stone-Diko
Tirzah Turner
Charles Tyman
Dorothy Winston

Staff Members Present:
Kathy Del Hoyo
Petra Hager
Anika Hamilton
Kevin Harrell
Richie Hayner
Brittany Hunt
Rebecca Kaufman
Karen Morant
Ken Murphy
Modupe Omosaiye
Serenia Parsons
Tina Payton
Toni Pedroza
Catherine Rivera
Michael Wescott
Rochelle Whitaker
Joselyn Williams

Call to Order
Chair Ann Rollins called the meeting to order at 7:38 a.m. The meeting began with brief introductions.

Next Board Meeting – May 21st, 2026

Approval of Minutes
Chair Ann Rollins asked for a motion to approve the February 26th and March 26th, 2026 Board meeting minutes. There was a motion by Mr. Irv Trust and Ms. Tanyetta Sutton seconded. Both sets of minutes were unanimously approved.

Treasurer's Report
In the absence of Treasurer Terry McTernan, Ms. Brittany Hunt (Executive Assistant) provided the Treasurer's Report. In February, the fund was reported as $9,317.95. This amount remained unchanged.

Public Health Update
(Presented by Ms. Rebecca Kaufman)
Ms. Rebecca Kaufman (Director of Public Health) provided brief updates from the Public Health department.

- Public Health celebrated National Public Health Week recently with the Workforce team and a planning team planning a week's worth of events. Ms. Kaufman thanked staff for their planning and for their work day in and day out. Some events focused on wellness while others offered professional development opportunities. The week's kickoff had music and popcorn at the front of the new Public Health building. The week happened to align with Spring Break for many students so there were many children and members from the community enjoying the festivities as well. This was an aspect that staff hoped to turn into a monthly event as it was a great opportunity for engagement. For the week of celebrations, an employee engagement lunch was held. Staff looked forward to continuing to acknowledge National Public Health Week in the years to come.
- Safe Routes to School (SRTS) had held a poster contest encouraging youth to submit posters around safe streets and laws around motor vehicles. Ms. Kaufman, staff, and partners from the Raleigh Police Department, the Wake County Public School System (WCPSS) and others voted on a winner. The winner of the contest will soon have their design shared both in physical printed copies and electronically through the digital signs in County buildings. The submissions from youth were impressive, especially given the mixed media and the varying messages highlighted.
    - SRTS was also working with the Town of Knightdale for the Town to put in grants for a partnership with Safe Routes to School.
- The Tobacco Prevention and Control group in Raleigh voted to expand the tobacco free policy, a win celebrated on Monday of that week. That night (April 23rd), the Youth-Led Tobacco Free Community Forum would be held. Ms. Kaufman encouraged attendance as youth presented what they had done around tobacco prevention to reduce the number of people smoking and vaping. She shared that vaping was a focus for the youth given the increased use of vapes in schools and in the community. This event would be held at the County's EMS Center.
- The Wake Wheels for Health minibus was now out in the community. Last week nurses were on the bus for the first time providing preliminary health assessments and screenings. This was a goal for the bus but had been delayed due to the need to work through policies and standing orders.
    - Public Health was excited to share the minibuses with the community. There was actually a second bus being delivered to Wake County. Both minibuses had originally been

procured and used during the COVID-19 pandemic. Because of this, they had "COVID-19" emblazoned on the side which needed to be replaced. The County was able to use grant funding to have the bus now read "Wake Wheels for Health."

- These minibuses are able to provide a multitude of services as well as outreach. A team oversees the use of the two buses and staff are able to sign them out as desired. Outreach efforts have so far come from nurses as well as staff with the HIV/STD team. The buses are small allowing them to travel anywhere in the county with ease.
- This month there was a huge push with swimming pool inspections. Most pool owners want their pools opened by the Memorial Day weekend to allow for pool goers to enjoy the water. These inspections are a collaborative effort between Environmental Health and Safety (EHS) and Onsite Water Protection. The two divisions had done over 380 pool inspections in 2026 so far. Staff were also hiring summer pool technicians who would ensure the program was running with as many pools inspected by the Memorial Day goal as possible.
- Finally, the Pharmacy continued to increase the number of prescriptions available for community programs. They started a detention center discharge program that allowed individuals to receive prescriptions 30 days post release. This program acted as a bridge until the person could visit their healthcare provider. Staff were also working with Healing Transitions to provide prescriptions as needed. Pharmacy staff were looking to break down barriers anywhere possible.

Social Services Update

(Presented by Ms. Toni Pedroza)

Ms. Toni Pedroza (Director of Social Services) provided brief updates from the Social Services department.

- Staff were planning a more structured supportive accountability training for supervisors and program managers. This is in addition to a leadership academy designed for Child Welfare (CW) and Economic Services staff. This will take anywhere from three to six months to establish and only enhance accountability training already available.
- Ever busy, staff were also working to implement the HR1 policy changes to Food and Nutrition Services (FNS) by working closely alongside the State and Communications. Additional policy changes were already being prepped for Medicaid as well. This requires a great deal of training for staff, some of which did not begin working for the County until the start of the COVID-19 pandemic. This was important as many of the policies implemented during COVID-19 to allow for more accessible assistance were no longer in effect. This meant that some staff were having to learn the new HR1 policy changes at the same time as having to understand pre-COVID-19 policies. This was requiring training and supervisor monitoring, but staff were working through these efforts in the name of consistency and accuracy.
- In good news, however, the State had received $319 million which was approved in House Bill (HB) 696 to cover a shortfall in the Medicaid program.
- Ms. Pedroza was working with Smart Start to support their outreach efforts around providers in the community as well as generally supporting providers. She was active on the Smart Start Board and commended Executive Director of Wake County Smart Start Ms. Gayle Headen for her work.
- Both Ms. Pedroza and Ms. Rebecca Kaufman (Director of Public Health) had recently attended a Housing symposium and were intent on exploring ways to partner with the Housing Affordability and Community Revitalization department. Ms. Pedroza hoped to collaborate with Ms. Morgan Mansa (Director of Housing Affordability and Community Revitalization).

Vice Chair Wanda Hunter asked if the $319 million secured would impact HR1 in any way, such as covering any potential gaps. Ms. Pedroza said that it would not. It was essentially meant for providers who were underpaid due to errors. This was found during audits for Medicaid. Interestingly, when state or federal audits came to North Carolina, they generally began with Wake County. Because of this, the County was audited a fair bit more than others in the state. Staff are looking at Medicaid applications and how some changes might better implement the policy changes enacted by HR1. Ms. Pedroza would keep the Board abreast of any changes.

When asked about the efficacy rate for Medicaid, Ms. Pedroza shared that Medicaid applications had met timeliness for almost four years now. Medicaid recertifications, however, had not met timeliness rates. During COVID-19 when more people were eligible for Medicaid, there was an influx of cases that would later become ineligible once the policies enacted during the pandemic ended. Some of these same cases, however, then became eligible for Medicaid Expansion. Because of this, staff were being meticulous to ensure they were not closing or terminating a case before determining if the person was indeed eligible. Prior to COVID-19, the highest months for recertifications had 8,000 to 9,000 to process. Currently, there are anywhere between 12,000 to 15,000 recertifications monthly. These cases could not be terminated if staff were unable to review and rolled over into the next month. Part of the way to address this spike in caseloads was straight through processing. This allowed a case to be prepared internally so that NC FAST could process it without ever needing staff to interview the client. This is getting a little better each month with the County doing some work, State doing some work, and NC FAST simply processing the cases. While no huge impact has been made yet, this was a project that the State and fellow counties were working on diligently.

Ms. Tanyetta Sutton noted that there were a few students in the Wake County Public School System (WCPSS) without Medicaid due to immigration. These were individuals from all over the globe. She asked if the $319 million could assist with those who were not legal immigrants. Ms. Pedroza clarified that the new Medicaid policies that were to go into effect meant most would not be eligible for Medicaid. There were very few exceptions to this rule. There were some area clinics that still served these populations as well as entities serving individuals who were not legal immigrants. However, the state had yet to see the full impact of the policy changes to come. Many would lose their Medicaid as they did not have the legal status necessary to continue coverage.

Some of the few who would still be eligible were pregnant women along with Cuban refugees. Dr. Ojinga Harrison asked if other refugees invited to come to America and previously eligible would still qualify and Ms. Pedroza stated that they would not be eligible. Cuban refugees were one of the very few exceptions allowed in the new policies. Ms. Maty Ferrer Hoppmann asked if legal refugees who had Medicaid due to this status would no longer qualify and Ms. Pedroza confirmed this. The State had sent counties lists of individuals identified in NC FAST that would need to be removed as they no longer met eligibility requirements.

Ms. Ferrer Hoppmann asked what the estimated time to hear back about applications was for FNS and Medicaid. For FNS, an emergency application had to be processed with food in the household within seven days. This meant staff had to process the emergency application in four days. Regular FNS applications were processed within 30 days, so this could look like a 30- to 45-day wait. The good news, however, was that service goes back to the date of application. So if someone applied with a regular FNS application on April 7th and it was processed on May 7th, their coverage would start as of April 1st. Adult Medicaid was a little different. Staff were required to wait while the State assessed the case prior to processing. A Social Worker would look at all of the assets of the applicant not only currently but five years back to ensure eligibility. Because of this, the wait was usually closer to 45 days, though longer was not unheard of for these cases. Service, like with regular FNS, went back to when it was first applied for. Wake County also had strong relationships with long-term care facilities so staff were often aware when someone was attempting to secure Adult Medicaid. This allowed for contact with the potential applicant as early as possible.

Ms. Pedroza reminded the Board that there were 34 Medicaid workers also spread throughout WakeMed hospitals. This was in an effort to make Medicaid accessible directly in hospitals. This benefitted WakeMed as they wanted to be able to provide services and appropriately bill patients as smoothly as possible. There were additional workers spread throughout other partners such as Oak City Cares, Neighbor Health, Rex Hospital, and Duke Hospital. But WakeMed had the most workers by far.

When asked if the new policies would impact those from Venezuela here on asylum who were previously eligible and had cases pending, Ms. Pedroza stated that they would no longer be eligible for Medicaid under the new policies.

Ms. Hunter asked if it was possible to have outreach efforts from the Medicaid Managed Care Organizations (MCOs) to highlight their value-added benefits. Many Medicaid recipients were not aware of the benefits available to them through their selected MCO. She had recently participated in a Black maternal health community baby shower where, dependent on the MCO, car seats, playpens, and breast pumps were available for free for participants of the plan. Ms. Pedroza shared that Ms. Kathryn Thompson (Medicaid Assistant Division Director) was working with Ms. Lechelle Wardell (Population Health Director) who helped conduct the Ask-the-Doc series for Public Health (a town hall series inviting the public to ask questions of a panel of experts). Discussions were happening to invite all MCOs for a similar event catered to the MCO plans to inform the community of benefits from each plan as well as enrollment periods. She did agree many were simply unaware of what the plans offered, especially when switching from one provider to another. She did point out that caution was needed – the County could not favor or promote one MCO over another. To avoid this, all MCO plans would be invited to ensure no preference was given or implied to sway client choices.

Chair Ann Rollins asked how the work with Blue Cross Blue Sheild's (BCBS) Healthy Blue was going with the foster care system. Ms. Pedroza was open and stated there had not yet been huge improvement in this area. Ms. Shanta Nowell (Child Welfare Division Director) was meeting with BCBS on a weekly basis to discuss the children living in the building. The State, too, was kept up-to-date in order to report the children's needs as well as how to best identify placement with BCBS.

This all was occurring as three hundred beds sat vacant at the State's Central Hospital all due to a lack of staffing. While this could potentially be a placement for some of these children, the State simply had a staffing crisis being both felt and seen in all one hundred counties. Most workers providing some of these critical services – childcare providers included – were serving the most vulnerable of populations yet receiving some of the least pay. Those in these fields clearly loved what they did above the monetary reward, but with the cost of living rising, it was becoming hard to retain them. Deputy County Manager Duane Holder would be meeting with BCBS in the near future to discuss the crisis further. Ms. Pedroza did know that BCBS put out three request for proposals (RFPs) for more providers to address the capacity issue. The crisis was only growing more severe with more children entering County custody alongside larger sibling groups.

Dr. Ojinga Harrison agreed – many loved to do the work and could contribute greatly to the field. And yet those same passionate individuals were leaving the fields that they loved and going to jobs elsewhere simply because they could not afford to live on the salaries provided. This was a severe loss with the most vulnerable populations in need of consistency with workers who could connect with them over time, not a multitude of people who may only scratch the surface of that connection. Ms. Pedroza spoke of the amazing work of Adult Services. This division served those aged 18 and older. This meant for some children aging out of foster care at 18 or 21, particularly those who were disabled, they moved directly into the Guardianship program. This person could remain in Guardianship from 21 until death. Caseloads, understandably, keep growing. In Wake County there were almost 1,000 people under Guardianship. Some were contracted out while others received care from County workers.

Ms. Sutton commended staff working with those in foster care living in the Swinburne building.

Ms. Rollins uplifted the need for foster care homes which Ms. Pedroza confirmed was still a vital part of Child Welfare's work. To date and historically, the children living in the Social Services buildings were in need of therapeutic placement and services, but the support of foster homes could not be overstated even to offset the placement needs to finetune the search for those of greatest need for Level III and Level IV placement.

Commissioner Cheryl Stallings shared that the Wake County Board of Commissioners (BOC) would likely vote on the recommended fiscal year (FY) 2027 budget on June 4th. This would be one month after it was presented to the BOC by County Manager David Ellis on May 4th. During this month, the BOC would meet to discuss the recommended budget and would accept public feedback and comments. One recommendation was to purchase a building to make it more comfortable for children transitioning from foster care to live in a Social Services building. While this building would also be used to address some staffing issues in general, the budget item was specifically to address the fact that Swinburne was never intended for someone to live in it. Ms. Pedroza thanked Commissioner Stallings confirming that a separate building would allow for more privacy for the youth.

2026 Mayor Frank Eagles Excellence in Community Service Award
(Presented by Ms. Ann Rollins)
Chair Ann Rollins recognized the nominees of the 2026 Mayor Frank Eagles Excellence in Community Service. The award was presented to the 2026 winner – Ms. Kathleen "Kat" Herndon-Lee. Nominees were recognized with certificates. Pictures were taken.

The efforts submitted and acknowledged for the winner and the nominees are outlined below.

Ms. Herndon-Lee is an inaugural member of the Western Regional Community Advocacy Committee (WRCAC), Apex Service Groups and Faith Alliance, the Wake Emergency Assistance Providers (EAP) Collaboration, the Wake County Meals on Wheels Board. Additionally, Ms. Herndon-Lee faithfully serves as an Ordained Deacon at White Oak Missionary Baptist Church and the volunteer Director of Human Services for White Oak Foundation, Inc. since 2006. In 2010 she joined the WRCAC to represent the Foundation and began advocating for the opening of a regional center to expand county services in the western region of Wake County. Since helping establish the WRCAC's mission and vision in 2012, she has continued to guide its strategic priorities, including affordable housing, food security, workforce development, and transportation. She has also led the Health and Well Being Subcommittee, developing coordinated approaches to senior services and expanding support for low to moderate income older adults. Ms. Herndon-Lee was named by the WRCAC a Food Security Superhero in 2022 for her leadership and dedication to developing and sustaining a regional food security ecosystem during a pandemic.

Ms. Herdon Lee is widely recognized for her leadership in strengthening regional food security. As Co Chair of the WRCAC Food Security Action Group, she helped build and sustain cross sector partnerships with faith organizations, nonprofits, schools, businesses, and local governments to improve logistics, volunteer engagement, resource coordination, and community education. Key achievements include integrating food insecurity screenings into COVID 19 testing settings and expanding collaborative distribution models across the region. From 2017 to 2024, her leadership helped increase Summer Meal sites in low-income neighborhoods from 8 to 26. Prior to COVID 19, she partnered with the NC Department of Public Instruction and local stakeholders to coordinate meal delivery and enrichment programming for children in 8 HUD identified low-income communities. At the onset of the pandemic, she coordinated the rapid opening of 11 food distribution sites on the first day of school closures, later expanding the network to 26 neighborhoods and five hotels. These sites also serve as resource hubs for WCPSS to distribute technology and information and Wake County Human Service to distribute public health communication resources.

During the pandemic, Ms. Herndon-Lee helped establish the region as a County recognized Food Distribution Hub, supported by multiple restaurant partners and faith communities. This effort expanded into four Regional Food Hubs serving 26 neighborhoods in partnership five churches, with Ms. Herndon-Lee helping manage operations while simultaneously scaling the White Oak Food Pantry. Community partners raised more than $155,000 to sustain regional food distribution efforts when public funding declined. She also leveraged White Oak Baptist Church's vans to coordinate food delivery to seniors in Cary and Apex and established drive thru distribution events at the Luther Green Senior Center in Morrisville.

Since 2017, she has continued to expand White Oak's Food Hub operations in partnership with the Food Bank and Food Lion, including the establishment of 4 additional church-based pantries in Apex. In collaboration with Resources for Seniors and Meals on Wheels, she enhanced senior services by launching the Friendship Café in 2022, a pop-up senior center providing healthy meals, community engagement, enrichment and exercise programs, digital literacy support, and access to programs such as Cool for Wake. She also continues to operate White Oak's Youth Summer Camp, offering work experience and scholarships to youth transitioning out of the program.

Nominees and their respective organizations and affiliations:

- **Ms. Sheila Alamin-Khashoggi** – Wake County Housing Authority, Raleigh Wake Citizens Association, Raleigh Human Services Board
- **Ms**. **Tilda Caulde** – Northeast Community Coalition (NECC)
- **Ms. Tatianna Cooper** – Saving Adolescent Girls Everywhere, Inc (SAGE)
- **Ms. Kimberly Diaz** – Animal Help Now; Close to Nature Wildlife Rehabilitation Center; North Carolina Wildlife Commission; Animal Control in Raleigh, Holly Springs, and Dunn
- **Ms. Shynese Hockaday** – iRise Foundation, Rotary Club of Knightdale
- **Ms**. **Virginia Johnson** – Fuquay-Varina's Drug Free Communities (DFC), Fuquay-Varina Downtown Rotary Club, Statewide Practie Board, North Carolina Foundation for Alcohol and Drug studies, Wake Parent Teacher Association (PTA), North Carolina PTA
- **Ms. Ida Johnson Dawson** – Advance Community Health; Maternal Health Clinics, Southeastern Wake Adult Day Center; North Carolina Women's Empowerment Network; Raleigh Alumnae Chapter of Delta Sigma Theta, Inc; Emergency Response Team; North Carolina Public Health Association; Healthy Mothers, Healthy Babies Coalition of Wake County, NC; North Carolina Association of Physician Assistants; The Raleigh Chapter of CHUMS, Inc; North Carolina State Employees Credit Union Advisory Board; Marie D. Lewis Foundation Board of Directors; Children's Supervisor for the Raleigh – Clayton Day Women's Bible Study Fellowship; Durham District Steward Board for the CME Church; Young Missionary Temple CME Church
- **Ms. Nadia Marriott** – Ruth's Grace Inc
- **Ms. Sharon Munoz** – Hispanic Legacy Network, LLC
- **Ms. Lauren Smith** – Wolves on the Run, Bully City Fest, City of Oaks Marathon/Half
- **Ms. Brenda Williamson** – Southeast Raleigh, State of North Carolina, City of Raleigh, North Carolina Institute of Political Leadership Fellow, North Caroline Rural Economic Development Institute Fellow
- **Ms**. **Victoria Zampieri** – North Carolina Department of Health and Human Services (NC DHHS)

Priorities Discussion and HHS Board Retreat Follow-up

(Presented by Ms. Ann Rollins)

Chair Ann Rollins provided a brief framework for an initial priorities discussion in the wake of the Health and Human Services Board's Retreat in March. She noted the presentations from the retreat including

Deputy County Manager Duane Holder's review of the County strategic plan and the business plans for Public Health and Social Services.

Commissioner Cheryl Stallings reminded the Board that County Manager David Ellis and the Budget staff had worked diligently on the fiscal year (FY) 2027 budget. She encouraged Board members to challenge narratives in the community claiming all governments and elected officials were the same. Wake County and the twelve municipalities all passed budgets annually that were transparent and allowed for public comments. Each fiscal year runs from July 1st to June 30th. County Manager Ellis will provide his recommended budget on May 4th with the Wake County Board of Commissioners (BOC) likely voting on June 4th as to whether to approve it outright or with changes. Commissioner Stallings confirmed that the BOC had seen a draft of the recommended budget and had asked County Manager Ellis to be blunt in his presentation. The Commissioners requested a category outlining monies that the County is taking on that the State is not funding as well as federal shifts occurring from HR1. This could be shared broadly to the Board members to disseminate to the community.

Commissioner Stallings also explained that the biggest line item in the budget is public education funding. This was intended to be a shared responsibility with the State covering operational expenses (including salary) and the County covering facilities (including buildings and renovations). The State, unfortunately, has consistently underfunded their share for years. County Commissioners are then asked to bridge the gap. But this is not sustainable. The current County budget has $740 million for the Wake County Public School System (WCPSS) operational expenses which makes up a third of the WCPSS operating expenses as a whole. County property taxes make up about 75% of the County budget. This is the bulk of the County's revenue. People, understandably, get upset about the amount of property taxes they have to pay. This single line item – public education funding – has the biggest impact. If the State covered their portion of the operating expenses as intended, County property taxes would be lower for all. This talking point – and others – would soon be available to share with the community and voters to best make an informed decision moving forward.

Ms. Maty Ferrer Hoppmann recalled how she was able to share knowledge gleaned from County Manager David Ellis' presentation at the Board retreat about property taxes. Having the additional context helped to make the conversation more robust than simple frustration.

Commissioner Stallings shared that the General Assembly was considering a constitutional amendment to go on the November ballot that capped the counties ability to manage their own property tax rates. This deflection of their lack of action. North Carolina was the only state in the nation without a budget. If this constitutional amendment were to pass, there was a high likelihood County services would be cut to make up the difference. Voters needed to be made aware of this reality.

Dr. Ojinga Harrison asked for a concrete example of something the State was not paying for that the County covered. Commissioner Stallings explained that the $740 million in operational costs for WCPSS was one example which included teacher and bus driver salaries. The County was trying to provide competitive wages as more and more teachers were leaving North Carolina to pursue teaching elsewhere. North Carolina ranked 50th in the nation for the percentage of the State's Gross Domestic Product (GDP) that goes to public education. The majority of children in Wake County – and the state – go to public schools. And though work is done to ensure the teachers' salaries are competitive, relative to the other states, North Carolina is struggling. Ms. Tanyetta Sutton confirmed this reality sharing a story of a phenomenal teacher who left the career entirely to better support her family.

Another example of where the State was falling behind came with the vacant State psychiatric beds that could not be filled due to a lack in staffing. The State was not paying competitive wages for these mental health professionals and the most vulnerable were paying the price. In addition, the State prison system was in crisis with both infrastructure and staffing. There were currently around one hundred people in Wake County jails that were supposed to be in the State prison system. There were beds, but not staff to

meet this need. HR1 was a federal cost shift that staff were preparing for but not yet sure would be passed to counties. The County is planning for the worst with budget expansions allowing for additional positions in Social Services to meet the increased workload. The State has yet to give indication of helping to pay for the cost shifts brought by HR1.

Mr. Birchie Warren asked, given the circumstances, how Commissioner Stallings would advise an ordinary citizen to be involved and helpful. She stressed voter education and engagement were critical. Unless different people were in the General Assembly, these issues were likely to continue. There were a couple of seats in northern and southern Wake County who were supporting the constitutional amendment. On the surface, it could be enticing to go along with the constitutional amendment thinking that it would simply lower property taxes without any repercussions. But the reality was that services would be greatly impacted. It would take three fifths of the House and Senate with both needing to agree before it would appear on the November ballot. However, voters needed to be aware of the actual consequences in case it actually appeared.

Mr. Irv Trust asked if the General Assembly was addressing the property tax loophole. Commissioner Stallings was relieved to share that it seemed the General Assembly was looking to close this loophole creating such a strain on the budget. This would not help the FY 2027 budget but could potentially assist with FY 2028. This was the Blue Ridge loophole detailed by County Manager David Ellis during his presentation to the Health and Human Services Board during their March Board retreat. Board members had a brief discussion of the impacts of these crises falling hard upon rural communities. Vice Chair Wanda Hunter spoke of the elimination of corporate income taxes and how this also continued to place a strain on the state. Commissioner Stallings agreed noting that, when used appropriately, taxes were an investment back into the community. As Dr. Ojinga Harrison pointed out, these salaries and subsequent taxes were becoming less actualized when companies chose to fill jobs with artificial intelligence (AI). Ms. Rollins shared that though Deputy County Manager Duane Holder could not be in attendance that day, he had shared a desire to discuss State funds to prevent the increased federal share of cost of eligibility falling to counties. This was potentially a large concern given HR1.

Ms. Toni Pedroza (Director of Social Services) explained that HR1 was proposing to change the share of Food and Nutrition Services (FNS). Historically, this had been a 50% responsibility of the State and 50% responsibility of any given county. This meant that FNS workers were hired with 50% of their salaries and equipment covered by the County and the other 50% covered by the State. HR1 would be changing this in October 2026 to be 75% responsibility from the County and 25% responsibility from the State. For the remainder of the FY 2027 (October 2026 through June 2027), this would be an additional cost of $2.5 million. By the full FY 2028, it would be a $4 million loss in revenue. This was simply to administer the FNS program. The State, unfortunately, had given no indication of helping the counties pay or absorb this cost. When Ms. Pedroza inquired about the split in a recent State meeting, the response was that there had always been a split without recognizing the large shift in demand this placed upon counties. Wake County approved around $15 million in FNS benefits every month. These were benefits that then were extended to the local community with benefactors spending in grocery stores. It was, in short, an economic driver in addition to being a benefit. This $15 million a month helped to pay for individuals stocking grocery shelves, helping checking out customers, driving the trucks to deliver the food, and maintaining warehouses storing the groceries.

In 2028 another part of FNS would be brought under scrutiny related to the payment error accuracy rate. This accuracy rate is determined as a state – not as a county – and any error rate over 5% will result in the entire state having to pay a share of the benefit costs. If the error rate was under 5%, the state was held harmless and there would be no cost. Across the state, there were $450 million in FNS benefits paid annually. It was important to note that in a county as large as Wake County, those eligible for benefits were very small compared to the over million residents. In small rural counties, however, those eligible for benefits could go up to 60% in an area where jobs were scarce and the population was aging.

When considering where the money would come from to potentially pay if the error rate was over 5%, it was likely the General Assembly would be approached an absorb some while expecting counties to cover the rest. If this comes to pass, it will be based on benefits given. Because there is no approved budget at the state level, this only promises to be a huge and unbearable cost to rural counties. They simply would not have the funds to cover such a cost. Ultimately, the State has the right to select not to provide FNS altogether. And if the State opposes supporting the program as a whole, it cannot continue in Wake County. The County cannot individually support a federal program that has been rejected by the State. Either the State approved it and all counties could provide the federal program or it did not exist. These were, admittedly, great leaps in possible outcomes. It was, however, not out of the realm of possibility given the concerning changes in policies and demand on staff.

Ms. Rollins asked how many staff would be impacted at the County if the State chose not to continue FNS. Ms. Pedroza stated that a hundred staff at Wake County would be impacted. Ms. Ferrer Hoppmann asked how many families would be affected. In Wake County there were over 87,000 participants – not families, but participants – on FNS. Considering this was for but one county and the potential impact on the state as a whole, this was a very real and very terrifying prospect.

When asked if the General Assembly was not passing the budget for Social Services or in general, it was clarified that none of the budget had been passed. The General Assembly last passed a budget in 2023 and were still operating off this budget despite needs increasing over the years. This presented a clear opportunity for voters to better understand the limitations placed on counties, especially given the passed down costs from the State. Ms. Hunter spoke of her work encouraging individuals in Brunswick County to advocate, specifically for issues surrounding water.

Ms. Pedroza did share that the State hired local consultants assisting counties with lowering their error rates. Wake County was one of the eight counties chosen to work alongside the State in this endeavor. Consultants sat beside staff to see exactly what work went into approving an application. Staff also created work flow charts to outline how to process FNS applications from beginning to end. The consultants were amazed by the level of detail and it was helpful to show pain points that could be improved in the NC FAST system to prevent errors.

Errors, of course, were unavoidable entirely as human beings. Errors, for FNS, were mistakes made in providing benefits – either too much or too little. A family eligible for $300 in benefits only receiving $200 would be marked as an error. There is a unique formula used, part of which could hypothetically be built into NC FAST and has been to an extent with “trial budget.” Trial budget was a method for checking math within the NC FAST system. The downside was that it was an optional feature, not required. The County was suggesting that it be required as an extra layer of assurance when working a case. Especially with emergency applications, there was a tight deadline of a four-day turnaround. While each case might only take a worker five minutes, there were 5,000 applications received a month equating to 25,000 minutes or close to 417 hours of work.

It was also important to note that the State only pulled 30 cases from Wake County to evaluate its part in the error rate. This is not representative of the work of staff when there are over 5,000 applications received each month. Ms. Rollins pointed out that this was not even statistically significant of the work staff did. Despite this, it was the State following federal guidelines auditing a random sample of thirty cases. However, the County did do its own quality assurance (QA) internally. Every FNS application that has more than five individuals in the household receives a QA audit due to more individuals meaning more benefits. Because the error rate is attached to the benefit amount, staff want to make sure these are absolutely correct.

Ms. Rebecca Kaufman (Director of Public Health) shared that the budget process was a little different for departments this year. Staff worked with Budget Management Services (BMS) to be invited for expansions. Throughout the year, Public Health leadership worked with staff from the County Manager’s

Office (FMO) and BMS to convert three Certified Medical Assistant (CMA) positions into Registered Nurse (RN) positions needed in the clinic area. Public Health submitted three expansion requests.

- Requested $54,000 to meet gap from loss in American Rescue Plan Act (ARPA) dollars for the financial assistance program for wells and septic systems through Onsite Water Protection. This would bring the total amount to $100,000 as the division had had in years past
- Onsite Water Protection staff for mandatory septic inspections. Septic systems were becoming more creative with a lack of good soil and sophisticated systems. This required for these systems to be inspected more thoroughly
- Environmental Health and Safety (EHS) staff for restaurant inspections

Staff understood the constraints of this year's budget and worked accordingly to both keep the expansion requests to critical needs and support staff as able to ensure consistent and stable resources.

Ms. Rollins thanked Commissioner Stallings, Ms. Pedroza, and Ms. Kaufman for the in-depth discussion. The Health and Human Services Board would continue to discuss its potential priorities. There was a lot to consider, including past priorities of senior services, foster care, mental/behavioral health, access to healthcare, Medicaid, and the State budget. She also highlighted the attention the Board had heard from Regional Centers and the Community Advocacy Committees (CACs). The Board members were given packets with details of each Center as well as the CAC schedules. They were encouraged to attend and join CACs local to them and to let the Board know of their efforts to keep both groups collaborating together.

Ms. Rollins also stressed the requirement for all Board members to serve on one of the Board's two subcommittees – the Public Health Committee (PHC) or the Social Services Committee (SSC). All Board members had now been assigned to one of the subcommittees and needed to be attending regularly per the Board's Operating Procedures. She recognized Mr. Irv Trust who had stepped into the role of Vice Chair for the PHC serving alongside PHC Chair Dr. Anita Sawhney. Vice Chair Wanda Hunter served as Co-Chair of the SSC alongside Ms. DaQuanta Copeland (Community Engagement Coordinator of the Housing Affordability and Community Revitalization Department). However, as Ms. Copeland was no longer a Health and Human Services Board member, Ms. Maty Ferrer Hoppmann was being considered as a Co-Chair. The meeting time for the SSC was being discussed and could potentially change in the near future.

It was noted that some of the issues and priorities considered by the Board were already embedded in other programs and initiatives. For example, Live Well Wake (LWW) had mental health/behavioral health as a focus area from the Community Health Needs Assessment (CHNA). This provided an opportunity for Board members to connect with such initiatives to keep a line of communication open for developments. There were upcoming conversations that would be illuminating as the Board continued to consider these efforts – Mr. Ben Canada (County Manager's Office Chief of Staff) would visit in May while Ms. Brooke Blanton (Senior and Adult Services Manager) along with the Directors of Resources for Seniors and Meals on Wheels would be presenting in June. The latter was part of the internal work being done by Ms. Pedroza, Mr. Holder, and the staff at Central Pines.

Ms. Ferrer Hoppmann expressed a want to address the concern of children in foster care being forced to live in Social Services buildings while possible placement beds sat vacant at the State hospital. Ms. Rollins spoke of the need for both placements for these youth who had high needs as well as children who could be placed in a foster care home. Ms. Pedroza spoke to the fact that most of the children entering foster care from ages 0 to 11 would likely find a foster care home. It was those in their teenage years who already had high acuity needs – behavioral health and medical conditions – that were hard to place. There was a need for education and the empty beds were certainly an opportunity that staff wished they had access to. However, these one hundred beds would also be available to foster care programs throughout

the state. Wake County would be competing with other counties for placement. Because of this, advocacy was needed for more parents to become foster parents to enhance access.

Dr. Ojinga Harrison shared that the individuals with the highest needs were driving the cost of care. The need to both address the cost and the needs early was clear. Long-term, a good process for these individuals might help them avoid prison and improve their overall outcomes for life. Commissioner Stallings reiterated this point with the Social Determinants of Health (SDoH) emphasizing that it was about creating healthy and safe communities to thrive in.

Ms. Kaufman informed Board members that the Behavioral Health department was looking at the Wake Network of Care with hopes of improving the resource.

Dr. Harrison noted how the Board had celebrated the winner and nominees of the Mayor Frank Eagles Award that day. It might be an opportunity to connect with these individuals who were doing so much work directly with local partners and communities to ask how to assist, enhance, and elevate their work. Ms. Rollins pointed out the Regional Networks report that the Board receives monthly from the CACs and Regional Centers. This might be an opportunity to streamline the report and bullet highlights for action. She asked Ms. Karen Morant (Director of the Western Health and Human Services Center (WHHSC)) for her insight. Ms. Morant encouraged participation in the local CACs, acknowledging that Dr. Harrison had been in attendance for the Western Region CAC. Visiting partners as well as the Centers themselves was important. Wake County, in isolation, could not help move individuals to stability, safety, and security without its partners. Each Center had its partners as well as priorities aligned with both the BOC and Human Services as an agency. Ms. Morant reminded Board members that the Board used to do windshield tours across the county stopping at each respective Regional Center. This was an event that could potentially be brought back to emphasize all of the Centers and their partners.

Ms. Hunter suggested revisiting an effort to honor former Commissioner Dr. James West's legacy. He had dedicated his life to the work of Human Services as well as the Board and deserved to be recognized and remembered. Ms. Rollins agreed, encouraging Board members to consider lasting efforts.

Finally, Public Health was recognized that month by the BOC and the County Manager for receiving accreditation with honors in November. Staff alongside Ms. Rollins and Ms. Hunter were in attendance at the BOC meeting where the department was recognized for its outstanding efforts.

Public Comments

- None

Adjournment

The meeting was adjourned at 9:42 a.m.

Board Chair's Signature: Ann Rollins **Date:** 05/21/2026

Respectfully submitted by Brittany Hunt