



EXECUTIVE SUMMARY: Major Themes/Issues Identified at the 2009 Public Stakeholder Meetings

*Held in Bismarck, Devils Lake, Dickinson, Fargo,
Grand Forks, Jamestown, Minot, and Williston*

Meeting the Needs of an Aging Population Could Reshape the Service Delivery System

- There is interest in **Aging and Disability Resource Centers (ADRC)**.
 - Centers for Independent Living or Older Americans Act (OAA) Outreach Service Providers said they should be involved in any ADRC in their regions.
 - There is a need to reassess reimbursement for **OAA Outreach Services** that help people remain in their homes by connecting them to services, which helps support the options counseling and application assistance functions of an ADRC.
 - Valley City Medical Community advocated for **care/case managers for elderly who do not have family** or other informal supports to help them locate and access services and to regularly check in with them to help them remain in their homes.
 - Some concern was expressed that a one-size fits all model would emerge.
- Adding **Medication Management** services to all Home and Community-Based Services could help people remain in their homes longer.
 - Stakeholders want it provided by Qualified Service Providers (QSPs) and reimbursable.
- Increasing the **medical cost cap/medical deduction for the Service Payments for the Elderly and Disabled (SPED) program** would benefit consumers by reducing fees.
 - *Note in June 2009, 15% of SPED clients had a cost share. On July 1, 2009, the revised sliding fee schedule went into effect, further reducing fees.*
- **Older Americans Act (OAA) Service Providers** appreciate the additional funding the Governor and Legislators provided for senior meals, but are requesting full reimbursement for **nutrition, outreach, and health maintenance services**.
 - Local cost sharing resources and individual voluntary contributions are becoming more limited.
 - There are added costs of meeting needs in rural areas.
 - Transportation reimbursement for outreach workers would help.

Child Welfare could be enhanced with more funding for prevention-focused services

- **Parent Education** and **Parent Resource Centers** were widely supported as a way to strengthen families and to prevent child abuse and neglect.
- Need to provide more financial support for **Intensive In-Home Services** and **Family-Group Decision Making** to support at-risk families and to keep children safe.
 - Region VIII would like funding and access for intensive in-home services restored.
- Representatives from rural counties that are part of **multi-county child protection projects want more funding** from DHS to provide a full-time specialist for each project so they can attract and retain this expertise.
 - Changing reimbursement to base it on child protective services reports was not well received.

County partners have recommendations to further support them in the delivery of direct services to our shared clients.

- Counties requested one public assistance eligibility **computer system** (Repeat from 2007).
- Counties would like **more frequent training** on economic assistance policy changes (2007).
- Counties requested more state funding for **administrative costs** related to child welfare services.
- Counties would like DHS to recognize and provide funding for **indirect costs** (overhead).

- Counties expressed **appreciation** for the support and services Department staff at the regional human service centers provide.

Enhancing services for vulnerable people with disabilities

- **Improve access to case management services** so there is more parity with the Developmental Disability (DD) system. Lack of parity impacts people with serious mental illness, traumatic brain injuries, and others who don't meet DD criteria.
- Providers and advocates are seeing an increased number of persons who need services and supports, but **who are part of a gap group that does not qualify for Developmental Disabilities case management** and other services. This is stressing the resources of community providers.
- The lack of **access to Guardianship services** for vulnerable persons is a concern shared by advocates, providers, and court representatives across the state.
 - Requested funding to pay costs associated with establishing guardianships.
 - Requested payment/reimbursement for guardians/conservators.
 - Recommended the development of a system.

Enhancing access to health services

- **Access to dental services** is impacting the quality of life for Medicaid clients of all ages.
- **Dental providers** attended meetings in the state's four largest communities and raised concerns about **client no-shows, reimbursement rates, and the timeliness of claims processing**.
- Transportation providers reported that getting reimbursed for **Medicaid medical transportation** is difficult and time consuming; some providers have stopped providing services to client or don't attempt to secure reimbursement.

Capacity continues to be a concern across the state's mental health system

- There is an acute **shortage of mental health professionals** (counselors, psychologists, and psychiatrists) specializing in children's mental health services.
 - ND should explore ways to "grow our own."
- ND needs to develop more **inpatient bed capacity** at the State Hospital and through contracted providers and to support more crisis beds in communities.
 - Increase the reimbursement to contracted providers.
- ND needs **more residential options** for adults and children with significant mental illness and behavioral issues.
- Continue to support recovery by funding **Peer Support**.

Serving young people transitioning into adult services remains a challenge

- There is a gap in services for **individuals who don't meet case management criteria**, but who need supports and services to achieve independence (Repeat from 2007).
- **Supported housing and other housing** remains an unmet need especially for youth aging out of foster care (2007).

Other issues impact Department clients

- Access to **accessible and affordable housing** affects human service clients and others in communities across the state.
- Some rural residents and others face challenges **accessing transportation** to get them to needed human services (Repeat from 2007).