### North Dakota Department of Human Services

### 2007-2009 Biennial Report

### Working to Improve the Lives of North Dakotans







John Hoeven, Governor Carol K. Olson, Executive Director

The North Dakota Department of Human Services' 2007-2009 Biennial Report contains information about Department programs, services, caseloads, and expenditures. It was produced in accordance with N.D. Century Code Section 54-06-04.

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#### N.D. Department of Human Services

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This information can be made available in an alternative format. Please contact the Department.

#### November 24, 2009

The Honorable John Hoeven Governor of North Dakota 600 E Boulevard, First Floor Bismarck ND 58505-0001

Dear Governor Hoeven.

This report summarizes the North Dakota Department of Human Services' major accomplishments during the 2007 – 2009 biennium, and documents expenditures, caseloads, and the utilization of key service areas.

The Department serves as a safety net for many of the state's most vulnerable residents and takes that responsibility seriously. Our dedicated employees work with partners to support the self-sufficiency, independence, and well-being of low-income families, elderly individuals, infants and children, and people with disabilities.

Most expenditures are connected to the delivery of health-related services through Medicaid and other programs. When combined with traditional human services such as public assistance and child welfare services, along with the child support enforcement services administered by the Department, this Cabinet Agency directly impacts the quality of life of about one in five state residents. The Medicaid dollars and other funds that flow from the Department to public, private, and non-profit health and human service providers have a significant economic impact in communities across the state.

This biennium was marked by natural disasters that affected thousands of North Dakotans. These included tornadoes along with widespread and significant flooding. Department staff worked with county social service offices, the Voluntary Organizations Active in Disasters, and other federal, state, and community partners to provide needed services and supports to affected individuals, families, and communities.

The Department's institutions temporarily sheltered 129 vulnerable persons and about 60 caregivers displaced by flooding. Human service center staffs provided disaster mental health counseling, case management, and other support to affected individuals, and also established and helped staff a supportive care shelter in West Fargo. This report documents the Department's disaster response and recovery efforts.

It also documents accomplishments. For example, North Dakota's child support enforcement program was recognized as one of the top programs in the country earning numerous honors. We have also adopted technology to improve access to behavioral health services in rural areas. We share the credit for our accomplishments and continue to strive to address challenges with our numerous public and private partners.

Sincerely,

Carol K. Olson Executive Director

Carott, Okon



John Hoeven
Governor
North Dakota



Carol K. Olson
Executive Director
N.D. Department of
Human Services

Supporting the governor in his commitment to enhance the quality of life for North Dakotans

### **Our Mission:**

To provide quality, efficient, and effective human services, which improve the lives of people

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### N.D. Department of Human Services Mission:

To provide quality, efficient, and effective human services, which improve the lives of people.

### **Guiding Principles:**

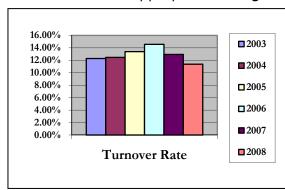
- The Department of Human Services has the responsibility to serve our state's most vulnerable people.
- Planning, evaluation, budgeting, and best practices regarding service delivery and allocation of resources are data-driven, evidence-based, and results oriented.
- Essential core services are based on individual needs with full consumer involvement and aimed at optimizing self-sufficiency and independence.
- Local and natural support systems will be fully engaged and partnerships generated to maximize resources and efficiency.
- Services will be designed to accommodate specific regional needs, with resources allocated in a cost-effective manner to create alternative solutions to reach rural and urban populations.

### **Organizational Background and Structure:**

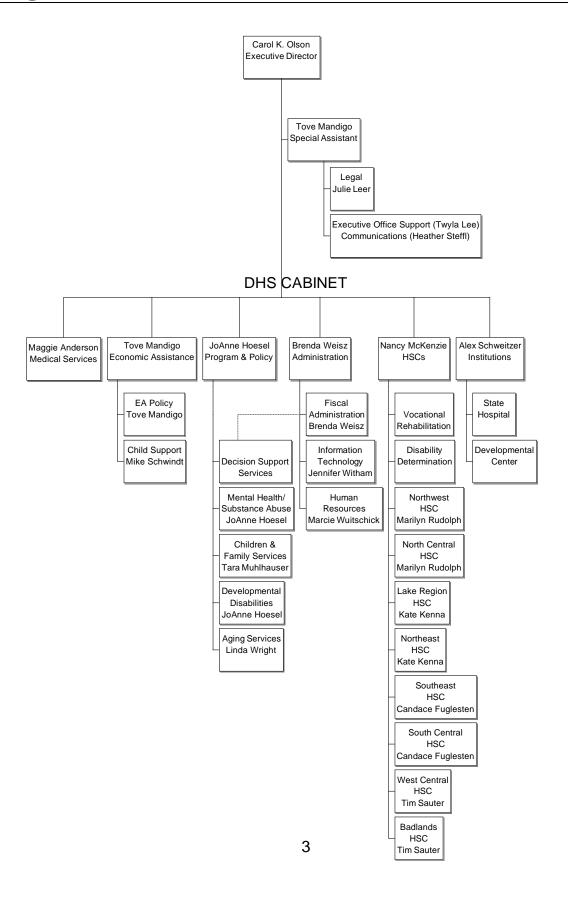
The N.D. Department of Human Services is an umbrella agency that employs about 2,000 employees and administers over 100 legislatively authorized programs that are provided through the cooperative efforts of the Department, counties, the tribes, and service providers.

The Governor appoints the Department's executive director who is a member of the Governor's Cabinet. The Department provides direct services, program direction and

technical assistance, sets standards, conducts training, manages the computerized eligibility, information, and reporting systems, and manages services within its appropriated budget.



### **Organizational Chart**



### **Facing Nature's Challenges Together**

Department employees and partners stepped up to assist fellow North Dakotans impacted by a series of natural disasters this biennium.

#### Northwood, ND Tornado (Aug. 26, 2007)

- DHS provided 13 households (50 people) with Disaster Food Stamp benefits totaling \$6,409.
- Northeast Human Service Center employees and other DHS staff devoted over 262 hours of service staffing the One-Stop-Recovery Center and providing crisis counseling and other support. They helped assist 498 residents.
- DHS issued provisional child care licenses so providers could serve children in temporary locations.
- DHS held a Denim Day benefit and raised \$4,217 in donations to help the community.

### Rolette County Tornadoes (July 7, 2008)

- DHS replaced food assistance benefits for seven affected participating households totaling \$2,712.
- DHS Lake Region Human Service Center's outreach office staff in Rolla offered assistance to mental health colleagues at the IHS hospital as they worked to serve community members.

#### 2009 Spring Flooding

- DHS replaced food assistance benefits for 18 affected participating households totaling \$6,594.
- DHS staff worked with the Voluntary Organizations Active in Disasters, emergency management personnel, FEMA, and other partners to support shelter and evacuation needs.

Medical Services Division applied for and received a federal waiver providing flexibility to respond to disaster-related needs of Medicaid clients and providers.

- Waived documentation requirements for people applying for or renewing Medicaid or Children's Health Insurance Program coverage if documents were unavailable due to flood damage or displacement
- Temporarily lifted the "gatekeeper" responsibilities of the Primary Care Case Management Program to ensure access to care
- Provided flexibility for clients receiving home and community-based Medicaid waiver services, such as allowing short-term respite and expanding provider types

#### BISMARCK REGION

- DHS West Central Human Service Center helped temporarily relocate 18 vulnerable individuals from lowlying apartments and supported housing in Bismarck and addressed medication needs.
- West Central staff provided disaster mental health and other assistance to Linton residents.

#### **FARGO REGION**

DHS West Central Human Service Center staff assisted with planning, facility cleaning, and welcoming about 33 vulnerable individuals evacuated from Community Living Services in Fargo who were temporarily relocated to Bismarck.

#### 2009 Spring Flooding Response (continued)

- The Developmental Center provided temporary shelter to 55 Friendship Inc. clients and their caregivers displaced from Fargo, and to veterans evacuated from the Veterans Home in Lisbon, N.D.
- The State Hospital admitted 22 patients evacuated from Prairie St. John's, a private mental health and substance abuse treatment provider, and three Manor Care nursing facility residents from Fargo.
- DHS issued provisional child care licenses so providers could continue to serve children and families at a different location while their homes were in jeopardy.
- DHS staff from various regional human service centers assisted at the West Fargo Reception Center for voluntary evacuees and also assisted on-site at designated shelters.
- Staff from DHS Southeast Human Service Center, the county social service office, and other agencies, made home visits to vulnerable clients who lived independently in the Fargo area to inform them of the flood threat and to help them relocate to safer areas.
- Southeast and other staff helped establish a **Supportive Care Shelter in West Fargo** and helped provide direct care and support onsite to 89 people from March 29 April 1.
- South Central Human Service Center made its crisis residential unit available and served about nine Southeast Human Service Center clients who were displaced by flooding.

#### JAMESTOWN REGION

- DHS South Central Human Service Center staff helped relocate four Jamestown residents displaced by water problems.
- South Central staff participated in planning for potential evacuation of vulnerable persons within 13 evacuation zones in Jamestown. No mandatory evacuations became necessary.



South Central helped relocate other vulnerable persons, working with the State Hospital and other agencies.

SOUTH CENTRAL

HUMAN SERVICE

CENTER MOVED TO

429 2ND ST SW

When the flood threat and dike construction forced the human service center in Jamestown to relocate, South Central staff worked to pack and move files and equipment while maintaining core services. They worked in a smaller temporary setting from April 21 to July 22, 2009.

DHS made housing available on the **State Hospital** campus as a supportive care shelter that served 13 Barnes County and Stutsman County evacuees.

### **Human Services Funding**

The N.D. Department of Human Services received and distributed funds appropriated

## North Dakota Department of Human Services Department-Wide Administrative Costs 2007-2009 Biennium

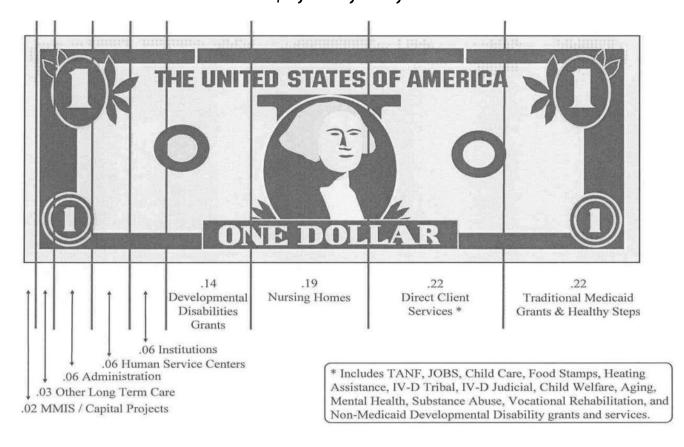
Administration / Support	\$	12,290,898
Division of Information Technology		37,772,514
Program and Policy		29,473,333
Human Service Centers		15,406,349
Institutions		7,006,774
Total	\$	101,949,868

Percentage of budget expended for Administrative Costs

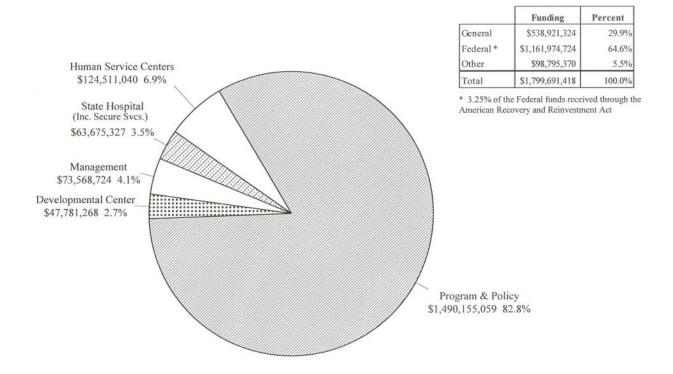
5.66%

by Congress and the N.D.
Legislature for the purpose of providing health and human services. Most funds were distributed directly to service providers or supported the direct services provided at the State Hospital, the Developmental Center, and the eight regional human service centers. Some funds were distributed directly to vulnerable individuals whom the counties determined qualified for programs and benefits.

# Where Did the Money Go? Department-wide Total Funds \$1, 799,691,418



# N.D. Department of Human Services Major Expenditures (2007-2009 Biennium)



### Management/Administrative Support Services

#### Include

- Executive Office
- Fiscal Administration
- Human Resources
- Information Technology Services
- Legal Advisory Unit

- Provider Audit
- Public Information
- Decision Support
- Tribal Liaison

#### **Accomplishments**

 Continued to co-chair and support the North Dakota Olmstead Commission in its efforts to monitor and support the delivery of services to people with disabilities in the least restrictive and appropriate settings

#### Accomplishments (continued)

- Implemented a Leadership Development Program to help participants explore leadership concepts, individual leadership styles, and interpersonal traits. Programming also promoted a deeper understanding of the Department's programs and services, strategic planning, and budgeting. The inaugural class of 17 employees selected from across the agency graduated on Nov. 25, 2008.
- Partnered with the federal Centers for Medicare and Medicaid Services (CMS), the Governor's Office, and the ND Insurance Department to implement an "Own Your Future" federal and state partnership campaign urging North Dakotans age 50-65 to plan ahead for their future care needs
  - Individuals responding to the direct mail and public service campaign received a free long-term care planning kit from CMS and information about state resources and services.
- Completed the design phase of the Medicaid Management Information System (MMIS)
- Completed the creation of an internal Client Information Sharing System that will interface with the new MMIS and other Department data systems
  - The resulting Master Client Index will link data to a single view of the client to improve eligibility management, increase cross-program enrollment, and measure program effectiveness.
- Held 19 Stakeholder Meetings involving consumers, providers, the public, and employees in 2007 to identify gaps in services and needs, and to invite comments about programs and services, which were used to develop the Department's 2009 budget proposal

#### Major Themes/Issues Identified

- The aging population was impacting service capacity, and funding was not keeping pace with the growing demand for services and costs.
- o Child welfare services (foster care, prevention services, and crisis residential and shelter care services) were stressed in many regions.
- More services were needed to appropriately serve children transitioning into adult services (including supported housing and other housing).
- Transportation was an issue across the state and across delivery systems due to fuel costs and the travel involved in accessing services.
- Workforce concerns existed across the service delivery system from direct care workers to clinical specialists.
- Capacity issues existed across the state's mental health system.
- o Concerns existed about public substance abuse treatment system gaps.
- Support existed for technology solutions and more technical assistance.
- o Relationships and collaboration remained strong with providers and others.
- Details are at <a href="http://www.nd.gov/dhs/info/pubs/docs/2007-exec-summary-public-stakeholder-mtg-report.pdf">http://www.nd.gov/dhs/info/pubs/docs/2007-exec-summary-public-stakeholder-mtg-report.pdf</a>
- NOTE: Some of the issues identified above were addressed during the biennium and are reflected in the accomplishments listed in this report; others were addressed by legislative action on HB 1012 in 2009. (See Appendices.)

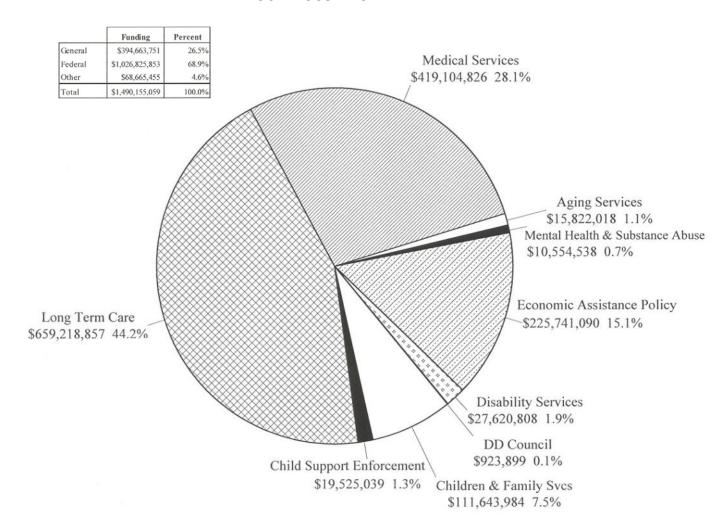
### **Program & Policy Divisions**

#### Include

- Aging Services Division
- Child Support Enforcement Division
- Children and Family Services Division
- Disability Services Division

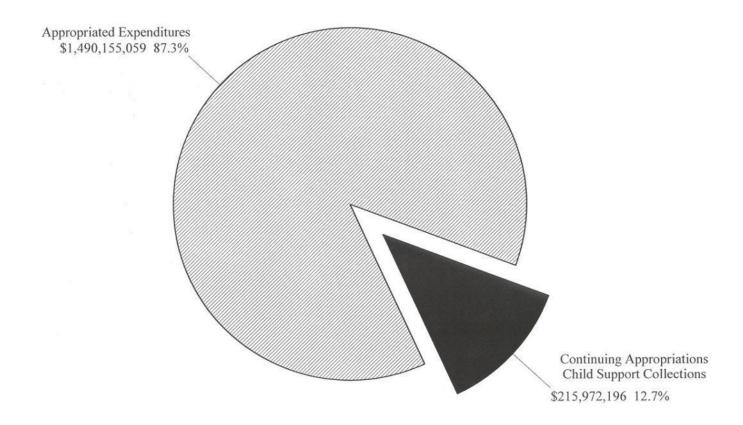
- Economic Assistance Policy Division
- Medical Services Division
- Mental Health and Substance Abuse Services Division

#### Expenditures for Program and Policy Divisions 2007-2009 Biennium



### **Program & Policy Divisions**

# Appropriated Expenditures and Continuing Appropriations 2007-2009 Biennium



General	\$394,663,751	23.1%
Federal	\$1,026,825,853	60.2%
Other	\$68,665,455	4.0%
Child Support Collections	\$215,972,196	12.7%
Total	\$1,706,127,255	100.0%

### **Aging Services Division**

1237 W Divide Avenue, Suite 6 Bismarck ND 58501

Phone: 701.328.4601 Fax: 701.328.8744

N.D. Relay: 1.800.366.6888 E-mail: <a href="mailto:dhsaging@nd.gov">dhsaging@nd.gov</a>



Linda Wright Division Director

#### Service Delivery System

While division staff in the state office provided direct services such as staffing the Aging & Disability Resource LINK and providing ombudsman services and vulnerable adult protective services, "aging services" were also provided by staff located in the Department's eight regional human service centers, and by county social service office employees, or through contracts with non-profit providers and tribal entities.

The division distributed funding, monitored contracts, developed policy, and administered

programs and services that benefitted individuals age 60 and older, and younger adults with physical disabilities. Services helped individuals live independently in their homes and communities and helped enhance individual quality of life.

#### Services

- Adult Family Foster Care licensing
- Information and Assistance (Aging & Disability Resource LINK 1.800.451.8693 and Web site www.carechoice.nd.gov)
- Long-Term Care Ombudsman Program to resolve concerns of individuals residing in skilled nursing facilities, basic care facilities, and assisted living facilities
- N.D. Family Caregiver Support Program to provide respite and other supportive services to family members caring for loved ones who are elderly or disabled, and also serves grandparents and other older relatives who are caring for children
- Administration and distribution of funding for Older Americans Act services such as senior meals including home-delivered meals, health maintenance screenings, and outreach services
- Vulnerable Adult Protective Services to address exploitation, abuse, and self neglect situations
- Telecommunications Equipment
   Distribution Program administration
- Administration of the state allocation of the Senior Community Service Employment Program
- Guardianship Program for vulnerable adults administration

### **Aging Services Division**

- Provided respite, support, or training to 844 family caregivers, 17 of whom were seniors caring for younger relatives, through the N.D. Family Caregiver Support Program
- Responded to 1,962 concerns received by the state Long-Term Care Ombudsman Program
- Provided 1,059,229 home-delivered meals to 8,330 individuals, and 1,435,102 meals to 18,119 individuals at designated meal sites through contracted Older Americans Act (OAA) service providers
- Provided funding to OAA service providers to support health maintenance services (blood pressure/pulse/rapid health screenings, foot care, medication setup, and home visits) that benefitted 5,786 individuals
- Provided funding to OAA service providers enabling outreach workers to personally contact 20,195 older people to identify needs and link them to beneficial programs
- Partnered with Legal Assistance of North Dakota to present 11 Surrogate Decision
   Making Training sessions in the Spring of 2009; 200 people participated
- Launched the new Aging and Disability Resource LINK Web site in March 2008, which features a searchable on-line database of services for seniors and adults with disabilities; it replaced the Senior Info-Line Web site
- Co-sponsored the N.D. Symposium on Home and Community-Based Services with the Medical Services Division in April 2008 and trained 140 attendees including county social service case managers, OAA service provider administrators and outreach workers, and Department staff
- Began meeting with the Developmental Disabilities and Medical Services divisions to develop a plan to recruit additional adult family foster care homes
- Co-chaired an Assisted Living Workgroup with the Medical Services Division in April 2009 to review the landlord/tenant statute and discussed potential changes
- Worked with the Governor's Committee on Aging to host five community forums in the spring of 2009, which featured national experts on senior health and wellness and were attended by 703 people
- Coordinated a Web-based training for community-based mental health clinicians with the Mental Health and Substance Abuse Services Division in 2008 as part of the Department's aging and mental health education initiative
- Partnered with the North Dakota Protection and Advocacy Project and other agencies and organizations, as part of a N.D. Olmstead Commission Work Group, to develop the Guardianship Handbook: Guide for Court Appointed Guardians in North Dakota

### **Child Support Enforcement Division**

1600 E Century Avenue, Suite 7 PO Box 7190

Bismarck ND 58507-7190 Phone: 701.328-3582 or

1.800.231.4255 Fax: 701.328.6575

N.D. Relay: 1.800.366.6888 E-mail: <a href="mailto:centralofficecse@nd.gov">centralofficecse@nd.gov</a> Web: <a href="mailto:www.childsupportnd.com">www.childsupportnd.com</a>



Mike Schwindt Division Director

#### **Service Delivery System**

The courts are responsible for issuing court orders, and establishing custody, child support, medical support, and visitation.

During the 2007-2009 biennium, the Child Support Enforcement program provided services to thousands of children and parents by working with the court system, employers, and other divisions and agencies. The program provided a variety of services depending on the type of child support case. IV-D child support cases were opened when either parent applied for services, or when a child received public assistance through Temporary Assistance for Needy Families (TANF), foster care, or Medicaid. The division received and paid out all child support payments (for both IV-D and non-IV-D cases) through the federally-required State Disbursement Unit.

#### Child Support Enforcement Expenditures 2007-2009 Biennium

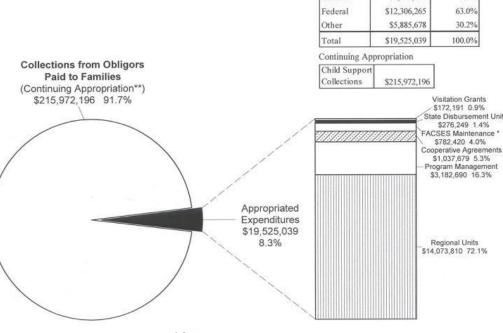
General

Funding

\$1,333,096

Percent

6.8%



\* Fully Automated Child Support Enforcement System

\*\* NDCC 14-09-25 provides a continuing appropriation for child support paid to families.

NOTE: The State Disbursement Unit collected \$239.9 million during the 2007-2009 biennium. These collections were used as follows:

\$224.9 million in payments to families and other jurisdictions

\$7.7 million retained by the State to offset grant expenditures

\$7.3 million credited to the Federal Government

### **Child Support Enforcement Division**

#### **Services**

- Child support establishment and enforcement services
  - o Income withholding
  - License or registration suspension
  - Tax refund intercept
  - Credit bureau reporting
  - Financial institution data match
  - Other tools
- Customer service
- Medical support establishment and enforcement

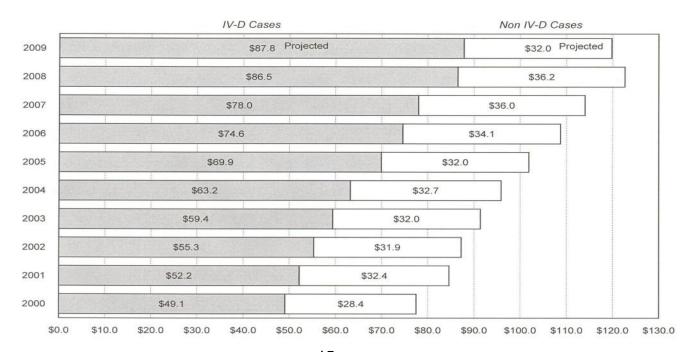
- New Hire reporting (a program for employers)
- Parent locate services
- Review and adjustment of child support obligations
- State Disbursement Unit services (disbursement of collected support)
- Development and implementation of policies, procedures, instructions, and training

- Assumed the administration of the eight regional child support enforcement units on July 1, 2007
  - Welcomed about 120 new employees as a state law took effect transferring program financing and administration to the state
  - Partnered with the Human Resource and Fiscal Administration divisions to transition new staff onto payroll and to acquaint them to DHS processes and procedures
- Received the 2008 Outstanding Program Award from the National Child Support Enforcement Association (NCSEA) – an association representing public, private, and international child support enforcement organizations
  - The award was based on program performance.
- Honored further when DHS Child Support Enforcement Division Director Mike Schwindt received NCSEA's 2008 Outstanding Manager Award
- Led the nation for the fifth year in a row in the federal Interstate Case Reconciliation program with a score of 91.5% of cases reconciled with other states
- Received the federal Office of Child Support Enforcement (OCSE) Commissioner's Award for Innovative Partnerships on behalf of the Department's Multi-Program Collaboration Workgroup
  - o DHS Child Support Enforcement Division Director Mike Schwindt received the *Commissioner's Award for Exemplary Leadership*.
- Received the Midwestern Legislative Conference of the Council of State Governments 2007 Innovations Award, followed by the Council of State Government national 2007 Innovation Award for North Dakota's Parental Responsibility Initiative for the Development of Employment (PRIDE) program

- The Department collaborated with the courts and Job Service North Dakota to develop and implement the program, which works to address the underemployment and unemployment of noncustodial parents who are behind in their support payments and who are referred by the courts.
- The award recognizes new, creative, and successful state programs that are transferable to other states.
- Received the federal Office of Child Support Enforcement Commissioner's Innovation Award for the PRIDE program
- Maintained customer service while the regional child support enforcement units in Devils Lake, Fargo, and Williston moved to new offices following the administrative change and related lease changes
- Reached a milestone at the State Child Support Disbursement Unit: \$1 billion in collections since its inception
  - o The Unit, which began operating in Nov. 1998, receives and distributes child support to children living in North Dakota, and other states and countries.
- Participated in a collaborative effort with the Children and Family Services Division that was featured on the cover of federal Office of Child Support Enforcement (OCSE) May 2009 issue of Child Support Report
  - The grant-funded effort automated foster care notifications to redirect payments to the appropriate entity if a child is removed from a home, made parent locate services available to the child welfare system, changed referral processes, and produced guidelines for handling support that exceeds foster care payments in a way that more directly benefits the affected children.

#### Annual Child Support Receipts in North Dakota Calendar Years 2000-2009

(Figures are in Millions)



### **Children and Family Services Division**

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Tara Muhlhauser Division Director

#### **Service Delivery System**

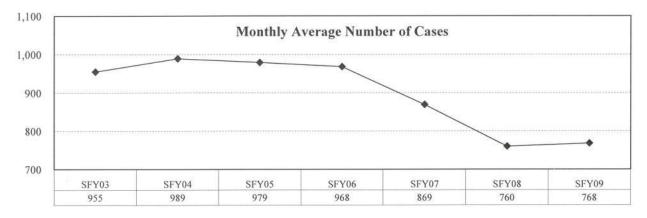
Services remained focused on the safety, permanency, and wellbeing of children and families and were provided by county social service offices or through contracts with non-profit providers and tribes. The division distributed funding, monitored contracts, developed policy, provided technical assistance, and performed administrative functions related to the delivery of the child welfare services listed below.

#### **Services**

- Adoption (recruitment, assessment, placement, and follow-up services, subsidies, birth-family services, child placement agency licensure, etc.)
- Child Protection (child abuse and neglect prevention and investigation)
- Early Childhood Services (child care provider licensing, training, etc.)
- Family Preservation Services (case aide, intensive in-home, respite, and related services)
- Foster Care, including independent living skills training, and Kinship Care
- Head Start State Collaboration Office
- Refugee Assistance Program

#### Foster Care in North Dakota

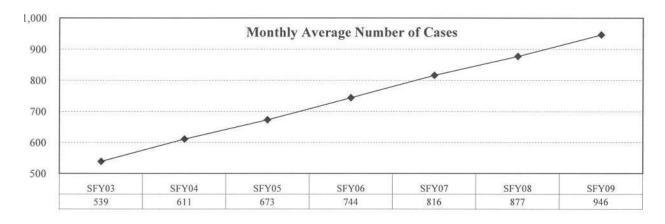
Monthly Average Number of Cases by State Fiscal Year



### **Children and Family Services Division**

#### Subsidized Adoption in North Dakota

Monthly Average Number of Cases by State Fiscal Year



- Worked with the federal Children's Bureau, the N.D. Supreme Court, counties, and local partners to complete a self-assessment on child welfare services in the state in preparation for the federal Child and Family Services Review
- Participated with county partners in the April 2008 Federal Child and Family Services Review, an evaluation of state child welfare systems (services related to child abuse and neglect and foster care)
  - A federal review team visited Cass, Burleigh, Morton, and Ward Counties to assess N.D. on federal safety, permanency, and child well-being goals.
- Co-sponsored with community partners the annual Pinwheel Campaign, which is held in April to raise awareness about the Prevention of Child Abuse and Neglect
- Helped plan the Children's Justice Symposium that was sponsored by the N.D. Supreme Court and drew over 440 participants interested in strengthening connections between the child welfare system, the courts, and the human service delivery system
- Participated in a collaborative effort with the Child Support Enforcement Division that was featured on the cover of the federal Administration for Children and Families' Office of Child Support Enforcement May 2009 Child Support Report
  - The grant-funded effort automated foster care notifications to redirect payments to the appropriate entity if a child is removed from a home; made parent locate services available to the child welfare system; changed referral processes, and produced guidelines for handling support that exceeds foster care payments in a way that more directly benefits the affected children.

### **Disability Services Division:**

#### **Developmental Disabilities**

1237 W Divide Avenue, Suite 1A Bismarck ND 58501-1208

Phone: 701.328.8930 1.800.755.8529 Fax: 701.328.8969 TTY: 701.328.8968

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JoAnne Hoesel Division Director

#### **Service Delivery System**

The division supervised the delivery of an array of services to people with developmental disabilities. Private providers and DHS employees at the regional human service centers provided most of the direct services. Services included support and training for individuals and families to maximize community and family inclusion, independence, and self-sufficiency; and to prevent institutionalization and to enable institutionalized individuals to return to the community.

#### Services

- Case management
- Day support services

- Residential support services for qualifying individuals with developmental disabilities
- Family support and other developmental disability services
- Infant development services for children up to three years of age who have or are at-risk of developmental delays or disabilities, and their families through contracted providers

- Participated in the Developmental Center Transition Task Force to help residents transition to community settings
- Received federal approval of the Developmental Disabilities (DD) traditional services and self-directed support waivers (renewals) for five more years
- Began work on a Medicaid waiver for autism spectrum disorder services
- Conducted training for human service center staff on new and older elements of the division's waivers
- Issued a "request for proposals" to study rate-setting specifically targeted for consumers who are medically fragile or behaviorally challenged
- Worked with several providers interested in expanding facilities to increase the transition of individuals to less restrictive environments
- Served more than 3,000 individuals statewide in partnership with DD providers, community services and dedicated state employees

### Disability Services Division:

#### **Vocational Rehabilitation**

1237 W Divide Avenue, Suite 1B Bismarck ND 58501-1208

Phone: 701.328.8950 Toll Free: 1.800.755.2745

Fax: 701.328.8969 TTY: 701.328.8968 E-mail: <a href="mailto:dhsds@nd.gov">dhsds@nd.gov</a>



Nancy McKenzie
Division Director

#### **Service Delivery System**

This division provided training and employment services to individuals with disabilities so they could become and remain employed. It also provided services to help people with vision impairments to remain living in their homes. In addition, consultants with the division worked with large and small employers to solve disability-related issues in the workplace.

#### **Services**

Vision services

- Vocational rehabilitation (VR) services for clients
- Rehabilitation Consulting and Services for businesses
- Client Assistance Program

- Helped 1,696 people with disabilities to become employed or to maintain their employment by providing Vocational Rehabilitation services
- Assisted over 2,000 people age 55 and older who were affected by vision impairments including blindness to remain in their homes
- Established assistive technology labs in Bismarck and Minot to allow people with disabilities and employers to try specialized employment-related equipment
- Established a Career Resource Center in Bismarck to help clients with employment searches
- Worked to strengthen relationships with the Tribal 121 programs through shared training and client casework
- Built a solid relationship with the Department of Public Instruction and helped develop the Community of Practice, creating greater coordination and focus on meeting the needs of youth with disabilities who are transitioning from school-based services to adult services
- Implemented annual Employer Awards to recognize businesses who hire people with disabilities

### **Disability Determination Services Division**

#### 1237 W Divide Avenue, Suite 4 Bismarck ND 58501-1208

Phone: 701.328.8700 Toll Free: 1.800.543.2048

Fax: 701.328.8709

#### Nancy McKenzie Division Director

#### Sue Bickel Supervisor

The division conducted disability determinations under a contract with the federal Social Security Administration.

#### Accomplishments

Received a federal Commissioner's Citation in May 2009 (one of 10 awarded) for assisting other federally contracted Disability Determination Services Offices in other states with their claims caseloads

"This willingness to use your resources to keep the disability workload moving no matter what the location has set the ND DDS apart as an award winner."

- Martha J. Lambíe

600 East Boulevard Avenue Bismarck ND 58505-0250

Phone: 701.328.2332 Toll Free: 1.800.755.2716

Fax: 701.328.1060

N.D. Relay: 1.800.366.6888 E-mail: dhseap@nd.gov



Tove Mandigo Division Director

#### Service Delivery System

Economic assistance programs helped people with low-incomes meet food, shelter, and household needs while also promoting self-sufficiency through work readiness and job placement services. These programs aided many working families to make ends meet, and also helped sustain people who were frail and elderly, who had disabilities that impacted their employment or wages, or who were children deprived of the support of one or both parents.

The division was responsible for the administration, policy development, training, and distribution of economic assistance program benefits. County social service offices determined

whether individuals qualified for assistance.

#### Services

- Basic Care Assistance (helping low-income individuals afford this form of long-term care)
- Child Care Assistance
- Estate recovery (for Medicaid and other programs)
- Low-Income Home Energy Assistance Program (helping qualifying individuals with heating and weatherization)
- Quality Review to ensure proper program participation and benefits
- Supplemental Nutrition
   Assistance Program (formerly called Food Stamps)
- Temporary Assistance for Needy Families (TANF)
- System Support and Development (maintaining the computerized eligibility systems, and assisting system users)

#### Accomplishments

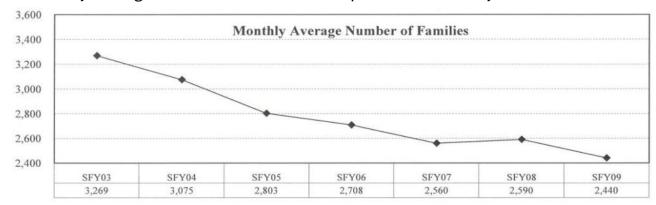
Assisted North Dakotans impacted by natural disasters by implementing a Disaster Food Stamp program in Northwood, and issuing replacement benefits to Supplemental Nutrition Assistance Program clients who lost food due to the Northwood tornado (13 households), Rolette County tornadoes (seven households), and statewide spring flooding and related power outages (18 households)

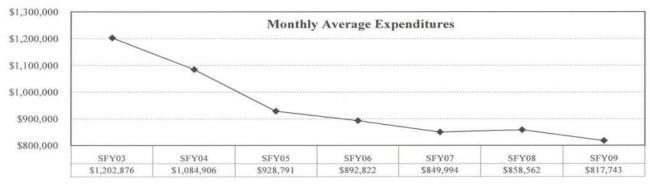
#### **Accomplishments (continued)**

- Implemented a cooling assistance program with the counties in the summer of 2007 to address an extended heat wave and provided vouchers for window air conditioning units, which benefitted 725 low-income households in 44 counties
  - o To qualify, households had to meet Low Income Home Energy Assistance Program criteria and have a medical need verified by a healthcare provider
- Assisted an average of 15,737 households in each year of the biennium with heating assistance (LIHEAP), with an average annual benefit of \$970/household
- Served an average monthly caseload of 2,515 families through the TANF program and Transition Assistance providing an average monthly payment of \$333
- Achieved a work participation rate of 54.8% (3-year average from 2007-2009) and exceeded federal requirements for the TANF program
  - Over half of the work-eligible parents in the program were working or participating in approved work activities for at least 20 hours per week
- Was selected and participated in a pilot of the federal Administration for Children and Families' Online Work Readiness Assessment Tool to help identify TANF clients' strengths and barriers and to provide appropriate services

#### Temporary Assistance for Needy Families (TANF)

Monthly Average Number of Families and Expenditures in ND by State Fiscal Year



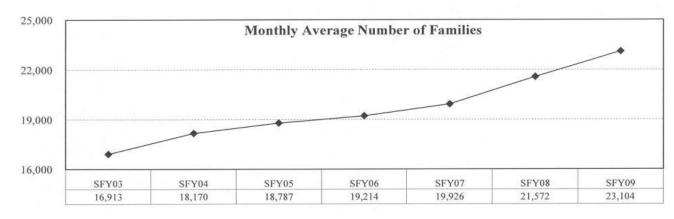


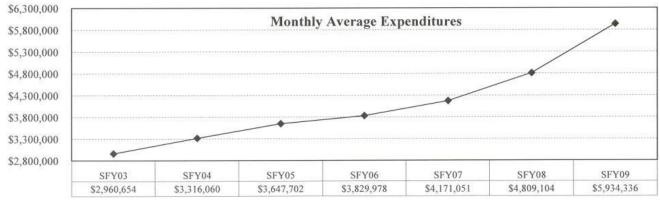
#### **Accomplishments (continued)**

- Contracted with a new EBT card (specialized debit card) provider for the Food Stamp program, which was renamed the Supplemental Nutrition Assistance Program (SNAP) following a name change at the federal level
- Implemented simplified reporting for SNAP, which reduces the paperwork and reporting frequency for most households receiving SNAP benefits
- Implemented a shorter timeframe to process applications for households entitled to expedited service
- Started partnering with the Creating a Hunger Free North Dakota Coalition
- Worked with county social service office partners to achieve a **SNAP payment error rate** of 3.29% for FFY 2007; the national average error rate was 5.64%

#### Supplemental Nutrition Assistance Program in N.D. (Food Stamps)

Monthly Average Number of Families and Expenditures by State Fiscal Year

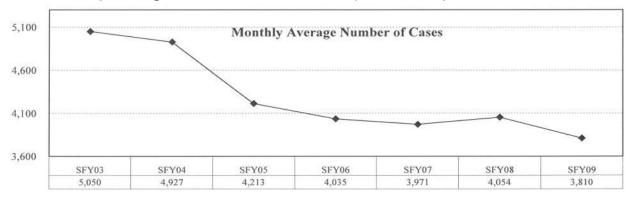


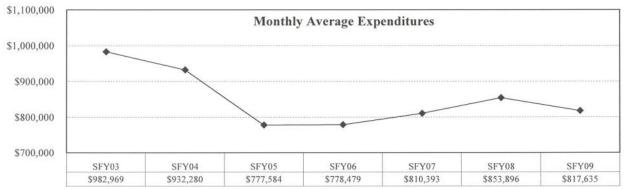


- Served about 1,238 women through the Alternatives to Abortion Program during the biennium
  - Education services include prenatal education, fetal development, and healthy choices during and after pregnancy, and childbirth information.
  - Counseling services provide help to women and couples related to decisionmaking about parenting, making an adoption plan, or terminating the pregnancy.
  - The average age of women receiving services was 22.5 years.
  - o In state fiscal year (SFY) 2008, 41 women elected to parent their child and in SFY 2009. 51 women made the same decision.
  - Seventeen women in SFY 2008 elected to place their child for adoption, and 11 did so in SFY 2009.
- Served a monthly average of 3,932 families through the child care assistance program and provided an average payment of \$212 per month to their care providers

#### Child Care Assistance Program in N.D.

Monthly Average Number of Cases and Expenditures by State Fiscal Year





#### **Medical Services Division**

600 E Boulevard Avenue Bismarck ND 58505-0250

Phone: 701.328.2321 Toll Free: 1.800.755.2604

Fax: 701.328.1544

N.D. Relay: 1.800.366.6888 E-mail: <u>dhsmed@nd.gov</u>



Maggie Anderson Division Director

#### Service Delivery System

The division administered both the state Medicaid Program, which provided health coverage and related support services for qualifying families and children, pregnant women, the elderly, and people with disabilities, and the Children's Health Insurance Program (Healthy Steps), which served only children. The division's budget also funded long-term care services provided in nursing facilities and basic care facilities, as well as home and community-based long-term care services that helped people stay in their homes and prevented or delayed the need for institutional care.

The long-term care portion of the division's budget included a wide range of medical and support services for

individuals who lacked some capacity for self-care, and were expected to need care for an extended period of time. These services were typically provided to the elderly, people with physical disabilities, and people with developmental disabilities.

County social service offices primarily determined whether individuals qualified for Medicaid coverage, and the division paid hospitals, clinics, nursing facilities, physicians, pharmacies, dentists, home care providers, and other participating providers for covered Medicaid services. Department staff members and county social service offices both determined eligibility for the Children's Health Insurance Program.

#### **Services**

- Medicaid policy, provider payments, and utilization review
- State and locally-funded home and community-based long-term care services funded through the Service Payments for the Elderly and Disabled (SPED) and Expanded-SPED programs
- Basic Care Assistance payments
- Children's Health Insurance Program – policy and eligibility determination and oversight of contract for coverage and services
- Health Tracks screenings and services for Medicaid clients up to age 21
- Medicaid primary care provider program, which supports consistency of care through a single medical professional in a clinic setting

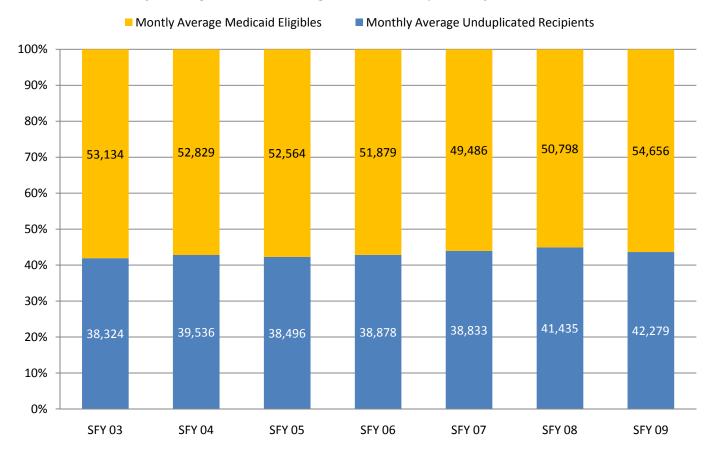
#### **Medical Services Division**

- Implemented voluntary Disease Management Services for Medicaid recipients diagnosed with asthma, diabetes, congestive heart failure, or chronic obstructive pulmonary disease
  - Services are provided under a contract and nurses in each region of the state who work with recipients and recipients' health care providers to provide case management, patient education, and health management services.
- Implemented the **Program of All-inclusive Care for the Elderly (PACE)** in August 2008, through Northland Healthcare Alliance to provide patient-centered, coordinated managed care to frail elderly individuals who are eligible for Medicare and Medicaid and live in the community
  - The goal is to meet participant's unique health care needs through a care team so they can remain living independently in the community.
- Submitted and received federal approval on the Money Follows the Person rebalancing grant implementation plan following extensive stakeholder input and began working in August 2008 toward the goal of transitioning 110 Medicaid clients (voluntarily) from institutions to home and community settings
  - Transitioned nine individuals from nursing homes and three individuals from intermediate care facilities for people with developmental disabilities during the biennium
- Increased the eligibility level on Oct. 1, 2008, of the Children's Health Insurance Program (CHIP) to 150% (net income) of federal poverty level and contracted with the Caring Foundation to conduct outreach and raise awareness about the child health coverage programs available to help uninsured N.D. children
- Conducted a Spring 2009 Healthy Steps Children's Health Insurance Program
   Outreach Campaign with the Caring Foundation
  - Involved 703 contacts with schools, public health units, health care providers, child care centers, and other entities, as well as direct outreach to parents at health fairs and other venues, and paid advertising
  - Resulted in the distribution of 1,394 applications and generated 712 calls to the 1-800-KIDS-NOW child coverage help line
- Launched the Medicaid Buy-in for Children with Disabilities in April 2008
- Implemented 12-month continuous eligibility for children covered by Medicaid in June 2008, ensuring stability of their health coverage
- Submitted and received federal approval on a Medicaid waiver to allow North Dakota to use Medicaid funds to pay for the care of up to 15 medically fragile children in their homes
  - o Five children were enrolled in waiver services during the biennium.
- Added a Program Integrity Administrator to lead division efforts in assuring staff and providers are actively involved in increasing the integrity of Medicaid

- Received federal approval of a new **Technology Dependent Medicaid Waiver** (effective Aug. 2007) to provide service options for individuals who depend on ventilators for at least 20 hours per day to help them live in their own homes and communities and to delay or divert institutional care
- Added home delivered meals, family personal care, and extended personal care as available covered services under the Home and Community Based Services (Medicaid) Waiver (effective July 2007)
- Created a Web-based electronic billing system for Qualified Service Providers (QSP) so they could use the Internet instead of paper to submit their billing for the services they provide to help people stay in their homes
- Improved the timeliness of Medicaid claims payments and addressed a backlog created by problems with the current 30-year-old Medicaid Management Information System
- Received CMS approval of the renewal of the N.D. Medicaid programs' emergency room co-pay waiver that allows the state to impose a \$6 co-pay on ER services that involve non-emergencies

#### North Dakota Medicaid Program

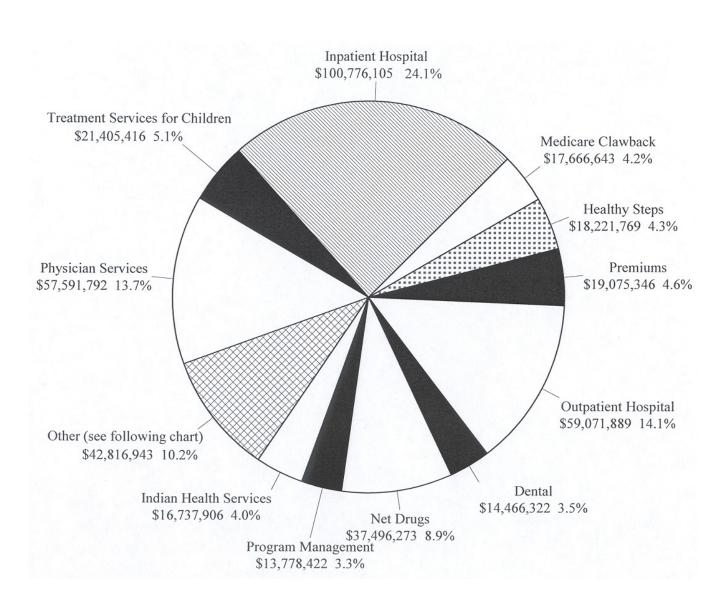
Monthly Average Number of Eligibles and Recipients by State Fiscal Year



### **Medical Services Division**

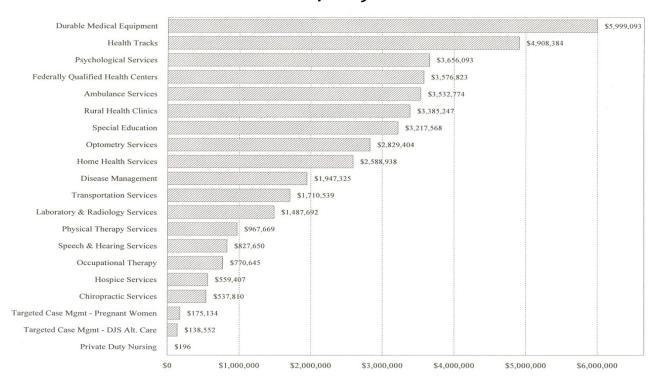
	Funding	Percent
General	\$116,991,936	27.9%
Federal	\$280,052,228	66.8%
Other	\$22,060,662	5.3%
Total	\$419,104,826	100.0%

## Medical Services Expenditures 2007-2009 Biennium

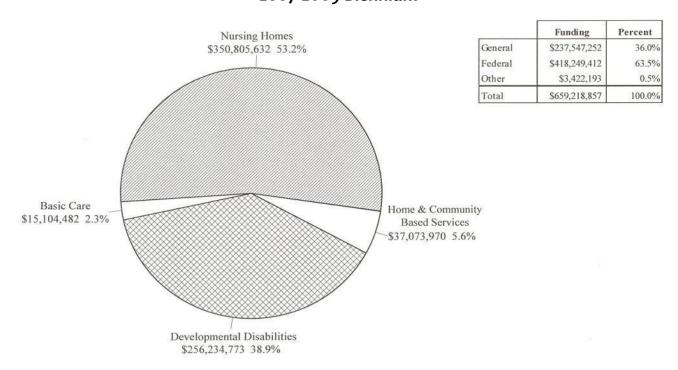


## **Medical Services Division**

### Total of "Other" Expenditures (\$42,816, 943) 2007-2009 Biennium



# Long Term Care Continuum Expenditures 2007-2009 Biennium



### **Mental Health & Substance Abuse Services Division**

1237 W Divide Avenue, Suite 1C Bismarck ND 58501-1208

Phone: 701.328.8920 Toll Free: 1.800.755.2719

Fax: 701.328.8969

N.D. Relay: 1.800.366.6888 E-mail: dhsmhsas@nd.gov



JoAnne Hoesel Division Director

### **Service Delivery System**

The division distributed funds from federal block grants and other sources, monitored contracts, developed policy, sponsored training, guided initiatives, collaborated with other resources and providers, and fulfilled administrative responsibilities. In North Dakota, public treatment services continued to be provided through the State Hospital (acute inpatient treatment), regional human service centers, or through contracts with non-profit providers and the tribes.

#### Services

 Administration of contracted problem gambling treatment and prevention services

- Administration of disaster mental health services
- Administration of mental health treatment and recovery services
- Administration of substance abuse treatment and prevention services
- Conducting education, training, and research related to mental health and substance abuse treatment services
- Contracting for community-based sex offender treatment and management
- Licensing of substance abuse treatment programs/providers
- ND Prevention Resource Center Library
- Strategic planning with the regional human service centers and State Hospital to guide the delivery of public treatment services

### **Accomplishments**

- Sponsored a public awareness campaign, "Mental Health Recovery...What a Difference a Friend Makes" to address the stigma of mental health and educate people about the important role friends and family have in supporting recovery
- Received a grant from the National Association of State Mental Health Program Directors/Substance Abuse Mental Health Services Administration to develop a Peer Support program so individuals recovering from mental illness can receive support and assistance in their communities from others in recovery

### **Mental Health & Substance Abuse Services Division**

### Accomplishments (continued)

- Promoted the adoption and use of evidence-based practices through training, securing technical assistance, and funding
  - Evidence-based practices are service models that research has determined improve outcomes for consumers, programs, and service systems.
- Provided funding for technical assistance and support from the Ohio Substance Abuse/Mental Illness Coordinating Center of Excellence (SAMI) to implement the Integrated Dual Disorder Treatment (IDDT) program at Southeast Human Service Center in Fargo
  - This evidence-based practice improves the quality of life for people with cooccurring severe mental and substance use disorders by combining substance abuse services with mental health services using a treatment team.
- Used federal Olmstead grant funding to support 49 transition-age teens/young adults to establish or maintain independent living
- Supported UCLA's 2008 site visit to N.D. to review the human service centers for compliance with the MATRIX model, an evidence-based model used to treat methamphetamine addiction
  - Three human service centers became the <u>first sites</u> in the nation to obtain national certification.
- Funded, with the Prairie Land Addiction Technology Transfer Center, Motivational Interviewing training for over 200 clinicians at the human service centers
  - o This evidence-based method helps people resolve their ambivalence about change.
- Expanded DHS' involvement in the Treatment Collaborative for Traumatized Youth led by the Neuropsychiatric Research Institute, University of North Dakota School of Medicine and Health Sciences, and funded the training of clinicians at each regional human service center
  - o 101 children have been served in this project through 2009.
  - o On average, each child in this project had witnessed 5.93 traumatic events.
- Implemented a youth advisory council to support alcohol prevention and enforcement efforts
- Funded a regional community readiness survey in 2008 to gauge perceptions of alcohol and other drug abuse in North Dakota communities
- Convened a Tribal Community Readiness Workgroup in 2008 involving tribal prevention coordinators and tribal guests to develop a Tribal community readiness/needs assessment survey to be conducted in the four tribal region
  - o The survey to identify appropriate prevention strategies for tribal communities was completed, and two of the four tribes implemented it.
- Initiated a Recovery Council to formulate strategies to strengthen the connection between traditional treatment and the recovery community and to foster community support for individuals in recovery

## **Field Services Area**

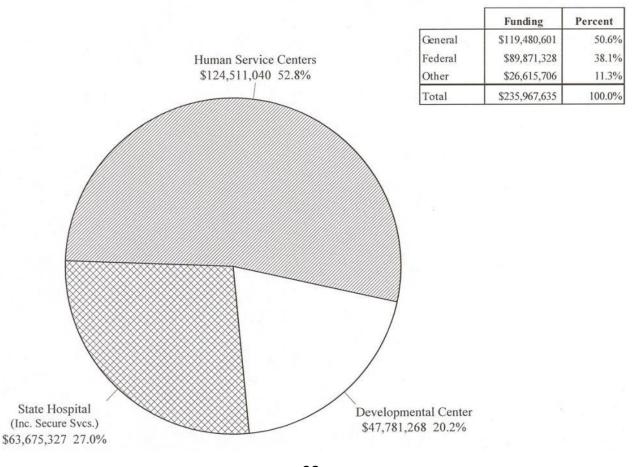
#### Includes

- Regional Human Services Centers
  - o Bismarck West Central Human Service Center
  - o Devils Lake Lake Region Human Service Center
  - o Dickinson Badlands Human Service Center
  - Fargo Southeast Human Service Center
  - o Grand Forks Northeast Human Service Center
  - Jamestown South Central Human Service Center
  - Minot North Central Human Service Center
  - Williston Northwest Human Service Center

#### Institutions

- North Dakota State Hospital
- o Developmental Center

# Field Services Expenditures 2007-2009 Biennium



The Department's eight regional human service centers continued to function as a network of clinics providing an array of community-based services to North Dakotans – many with disabilities - either directly or through contracts with other service providers.

Each served a multi-county area, providing counseling and mental health services, substance abuse treatment, services for people with disabilities, vulnerable adult protective services, and other related services. Human service center employees also provided direction and regulatory oversight of some programs and services provided through county social service offices and other providers.



Nancy McKenzie
Statewide Human Service
Center Director

The human service centers remained an important part of the state's safety net. Fees were adjusted for income and household size (number of dependents) and insurance

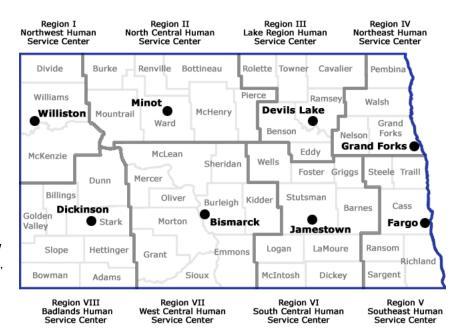
was accepted if available. Fees were waived for some individuals who did not have the ability to pay for needed services.

The centers continued to implement evidence-based practices and worked to share resources and expertise and to assist the clients and staffs at other centers impacted by capacity issues, especially due to the natural disasters that occurred this biennium.

#### **Services**

Provided directly or through contracts

- Adult family foster care provider licensing
- Crisis and outreach mental health services
- Developmental disability case management and related services such as day supports, residential supports, and extended supports such as job coaches

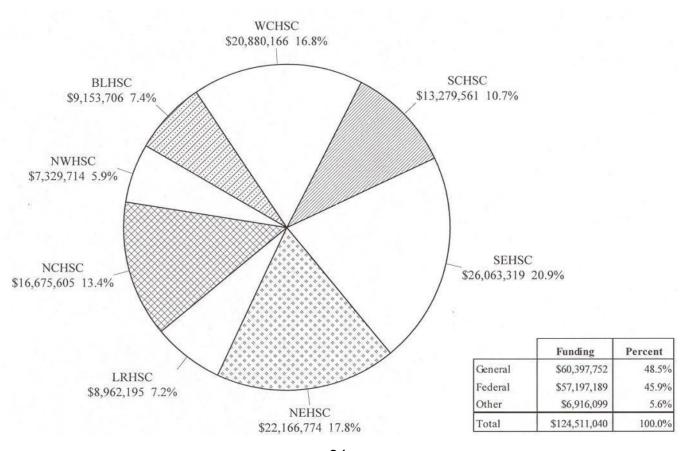


### Services (continued)

- Family Caregiver Support and oversight of Aging Services programs in their regions
- Mental health evaluation and treatment services, care coordination, medication management, and residential and crisis services
- State Hospital admission screening and referral
- Substance abuse evaluation and treatment services including care

- coordination, case aide, evaluations, treatment, and residential services
- Supervision and regulatory oversight of child welfare services provided by county social service offices
- Vocational rehabilitation and vision services
- Vulnerable adult protective services
- Other services

# Human Service Center Expenditures 2007-2009 Biennium



#### Bismarck - West Central Human Service Center



1237 W Divide Avenue, Suite 5 Bismarck, ND 58501-1208

**Director: Tim Sauter** 

Counties served for human service programs: Burleigh, Emmons, Grant, Kidder, McLean, Mercer, Morton, Oliver,

Sheridan, and Sioux

701-328-8888

Toll Free: 1-888-328-2662

Fax: 701-328-8900

TTY:1-800-366-6888 (Relay ND) Crisis Line: 701-328-8899 OR Toll Free 1-888-328-2112 E-mail: dhswchsc@nd.gov

**Outreach Office** 

1101 Third Avenue NW, Beulah, ND 58523

701-873-2399 / 1-888-616-1441

Fax: 701-873-2939

**Devils Lake - Lake Region Human Service Center** 

200 Hwy 2 SW

Devils Lake, ND 58301

**Director: Kate Kenna** 

Counties served for human service programs: Benson,

Cavalier, Eddy, Ramsey, Rolette, and Towner

701-665-2200

Fax: 701-665-2300 TTY: 701-665-2211

Crisis Line: 701-662-5050 E-mail: dhslrhsc@nd.gov

**Outreach Office** 

113 Main Avenue East, Rolla, ND 58367-0088

701-477-8272

**Dickinson - Badlands Human Service Center** 

300 13<sup>th</sup> Avenue W. Suite 1 Dickinson, ND 58601

**Director: Tim Sauter** 

Counties served for human service programs: Adams, Billings, Bowman, Dunn, Golden Valley, Hettinger, Slope, and Stark

701-227-7500

Fax: 701-227-7575

Toll Free: 1-888-227-7525 Crisis Line: 866-491-2472 OR

701-290-5719 TTY: 701-227-7574 E-mail: dhsblhsc@nd.gov

#### Fargo - Southeast Human Service Center

2624 9th Avenue SW Fargo, ND 58103-2350



**Director: Candace Fuglesten** 

Counties served for human service programs: Cass. Ransom. Richland. Sargent, Steele and Traill. Day care licensing services are provided to Barnes. Cass. Dickev. Eddv. Foster. Grigas. LaMoure, Logan, Ransom, Richland, Sargent, Steele, Traill, and Wells

701-298-4500 Fax: 701-298-4400 TTY: 701-298-4450 Toll Free: 1-888-342-4900

Crisis Line: 701-235-SEEK (7335) Suicide Prevention: 1-800-273-TALK

(8255)

E-mail: dhssehsc@nd.gov

#### **Grand Forks - Northeast Human Service Center**



151 S 4th St, Suite 401 Grand Forks, ND 58201-4735

**Director: Kate Kenna** 

Counties served for human service programs: Grand Forks, Nelson, Pembina,

and Walsh

701-795-3000 Fax: 701-795-3050 TTY: 1-800-366-6889

Crisis Line: 701-775-0525 or -0526 OR

1-800-845-3731

E-mail: dhsnehsc@nd.gov

**Outreach Office** 

5th & School Road, Grafton, ND 58237

701-352-4334

Toll Free: 888-845-2215

Jamestown - South Central Human Service Center

520 3rd St NW, PO Box 2055 Jamestown, ND 58402

**Director: Candace Fuglesten** 

Counties served for human service programs: Barnes, Dickey, Foster, Griggs, LaMoure, Logan, McIntosh,

Stutsman, and Wells

701-253-6300 Fax: 701-253-6400 TTY: 701-253-6414

**Crisis Line: 701-253-6304**Toll Free: 1-800-260-1310
E-mail: <a href="mailto:dhsschsc@nd.gov">dhsschsc@nd.gov</a>

**Minot - North Central Human Service Center** 

400 22nd Avenue NW Minot, ND 58703-1089

**Director: Marilyn Rudolph** 

Counties served for human service programs: Bottineau, Burke, McHenry, Mountrail, Pierce, Renville and Ward

701-857-8500 Fax 701-857-8555 TTY: 701-857-8666

Crisis Line: 701-857-8500 OR Toll Free 1-888-470-6968 E-mail: dhsnchsc@nd.gov

**Williston - Northwest Human Service Center** 

316 2nd Avenue W, PO Box 1266

Williston, ND 58802-1266

**Director: Marilyn Rudolph** 

Counties served for human service programs: Divide,

McKenzie, and Williams

701-774-4600 Fax: 701-774-4620 Toll Free (ND only): 1-800-231-7724

Crisis Line: **701-572-9111** TTY: 701-774-4692

E-mail: <a href="mailto:dhsnwhsc@nd.gov">dhsnwhsc@nd.gov</a>

### **Accomplishments**

- Became the first state with certified Matrix Model of Intensive Outpatient Alcohol and Drug treatment sites in the nation (as determined by the Matrix Institute in Los Angeles)
  - North Central, Southeast, and West Central human service centers received the three-year certifications following an on-site review.
- Added videoconferencing equipment at each regional human service centers to provide **Telemedicine services** to clients in areas with a shortage of behavioral health professionals

### **Accomplishments** (continued)

#### **Badlands Human Service Center** (BLHSC)

Added an **acupuncture treatment** program for persons with chronic addictions to assist in their recovery process

#### Lake Region Human Service Center (LRHSC)

- Implemented a new intake system for walk-in clients with immediate access to services
- Implemented a Structured Psychotherapy for Adolescents Residing in Chronic Stress treatment group for adolescents
- Incorporated **Motivational Interviewing** into service delivery and successfully implemented Person-Centered treatment planning across the agency
- Participated in a city-wide Depression Awareness Event and conducted over 100 depression screenings

#### North Central Human Service Center (NCHSC)

- Collaborated with law enforcement, consumers, hospitals, jails, mental health providers, and the National Alliance on Mental Illness as part of the Ward County Crisis Intervention Team Committee to develop a mental health training curriculum for law enforcement and to conduct training with a goal of diverting people from jail and improving the outcomes of police interactions with people with mental illnesses
- Expanded residential therapeutic services to include transitional living training at Kay's Place, the group home operated by North Central that serves young women ages 14-18
- Implemented Peer Support in the region in 2008 with support from NWHSC, hired four Peer Support Specialists, and matched them with 10 individuals with serious mental illness to help them maintain stability in their community and reduce hospitalizations

### Northeast Human Service Center (NEHSC)

- Assisted Northwood residents by providing crisis mental health counseling, accompanying damage assessment teams door-to-door, and providing information and referral and other support to people impacted by the August 26, 2007 tornado
- Contracted with Prairie Harvest Foundation to provide eight additional community-based residential beds in the new Curt Siewart Home for adults with serious mental illness
  - Supports efforts to provide services for people with disabilities in the least restrictive, appropriate setting (Olmstead Decision) and serves some individuals who previously resided at the State Hospital or other restrictive settings

#### Northwest Human Service Center (NWHSC)

- Hired a Peer Support Coordinator and two Peer Support Specialists who were trained and matched with consumers with serious mental illness to help them maintain stability in their community and reduce hospitalizations
- Implemented trauma-focused cognitive behavioral therapy (an evidence-based practice) to serve adolescents who have suffered trauma in order to build coping and resiliency skills

### **Accomplishments** (continued)

#### South Central Human Service Center (SCHSC)

- Implemented Peer Support matching Peer Support Specialists with individuals with serious mental illness to help them maintain stability in their community and reduce hospitalizations
- Developed a new residential living facility, Bridgepoint, for individuals with severe mental illness

#### Southeast Human Service Center (SEHSC)

- Partnered to provide the Cass County Justice & Mental Health Collaborative Project to provide alternative sentencing options for people when mental illness contributed to commitment of crime
- Implemented the Integrated Dual Disorder Treatment (IDDT) program
- Contacted vulnerable clients about the flooding danger and assisted clients and other vulnerable persons to temporarily relocate to safer accommodations during the unprecedented spring flooding event in the Fargo region
- **Helped staff a shelter** in West Fargo that the Department established with help from the American Red Cross and FEMA to serve persons with special needs
- Served as a disaster mental health resource during the flood response and recovery for Fargo's emergency management team
- Continued to offer a doctoral level psychology internship program, which provided four doctoral-degree level students an opportunity to obtain experience working at Southeast's multidisciplinary community-based mental health clinic setting

#### West Central Human Service Center (WCHSC)

- Partnered with Pride, Inc., to open the **Pride Youth Residential Services**, a facility that can serve up to three adolescents with addiction issues, and also provides three safe beds for children and adolescents experiencing a mental health crisis
- Received special recognition from the Juvenile Drug Court (JDC) in Bismarck for the support and dedication West Central provided to the local JDC team
- Received a \$10,000 federal grant to develop an Elder Abuse Prevention Coalition within its 10-county service region to support training and expanded coordination with community partners who serve vulnerable adults
- Continued to participate in a pre-doctoral psychology internship program based at Standing Rock Sioux Reservation and provided interns with a rich, intensively supervised multidisciplinary clinical experience

### **Institutions**

The ND Department of Human Services remained committed to providing services in the least restrictive setting. While efforts to transition individuals from institutional to community settings began in the 1980s, those efforts continued. The Developmental Center Transition Task Force continued to work with community providers to address behavioral issues and prevent admissions and worked to develop a CARES team to support community providers. In August 2008, the Department's *Money Follows the Person initiative* began helping people transition from nursing facilities and intermediate

care facilities for people with developmental disabilities.

The State Hospital and the Developmental Center continued to serve as safety nets for individuals whose needs exceeded community resources. During the unprecedented 2009 spring flooding, both facilities provided safe, temporary shelter and care to people with disabilities and their caregivers who evacuated voluntarily.

### **State Hospital**

2605 Circle Drive, Jamestown, ND 58401-6905

Phone: 701.253.3650 TDD: 701.253.3800 Fax: 701.253.3999

www.nd.gov/dhs/locations/statehospital/

Alex Schweitzer Superintendent State Hospital and Developmental Center

Andrew McLean, M.D. Medical Director

The State Hospital provided specialized mental health and substance abuse treatment services for adults, adolescents, and children whose needs exceeded community resources.

Services were provided on an in-patient or residential level to adult psychiatric, chemically dependent, and child/adolescent populations.

The facility had 132 beds for this traditional patient population and **operated at full capacity** most of the biennium due to the need to serve uninsured people transferred from private hospitals or people referred for acute care needs from the regional human service centers. The State Hospital served as the **inpatient mental health provider for the Devils Lake**, **Dickinson**, **and Jamestown regions** (a 23-county area) as those regions do not have private hospitals that provide inpatient psychiatric services.

The State Hospital also provided **inpatient treatment services** to civilly committed sexually dangerous individuals in an 85-bed secure unit, and maintained a contract with the Department of Corrections and Rehabilitation (DOCR) to provide addiction services in the 90-bed Tompkins Program. In addition, the hospital provided psychiatric services to DOCR's James River Correctional Center, co-located on the grounds.

# **State Hospital**

#### Services

#### Adult Traditional Services

- Provided therapeutic and supportive services for adults with serious mental illness or substance addictions
- Had the capacity to serve 307 inpatients (adults and children) per day during the biennium
  - Dedicated 90 of those treatment beds for James River Correctional Center inmates and parolees under the hospital's contract with the Department of Corrections

#### Child and Adolescent Services

 Provided inpatient and residential services for an average of six children/adolescents per day who had serious emotional disorders and/or serious substance abuse problems  Operated eight beds for this purpose and continued to subcontract with the Jamestown School District for educational services

#### Secure Unit

- Continued to provide pre-trial competency evaluations and evaluation and treatment services for mentally ill and dangerous individuals from jails and other units of the State Hospital
- Provided treatment to civilly committed sexually dangerous individuals in the secure unit, which is comparable to a medium security prison
- Increased the secure unit's capacity by 23 beds to a total of 85 beds. The sex offender population at the hospital stabilized in 2009 due to fewer referrals for evaluations, along with discharges

### **Accomplishments**

- Implemented the Psychiatric Emergency Response Team (PERT) model, which involves a multi-disciplinary approach to preventing violence and acting out behavior by patients
  - The model should reduce the use of seclusion and restraints, increase patient dignity, and reduce staff and patient injuries.
- Implemented the **community containment initiative** for sex offenders in the secure services program to include structured transitional housing, employment, and positive life style activities
  - Includes placing sex offenders in campus transitional housing, campus employment opportunities, and supervised community activities that prepare offenders for transition back to the community.
- Triaged and temporarily admitted 21 adults evacuated due to flooding concerns from Prairie St. John's, a private mental health and substance abuse treatment provider in Fargo
  - o Individuals were housed in a 25-bed unit, and hospital staff absorbed the workload

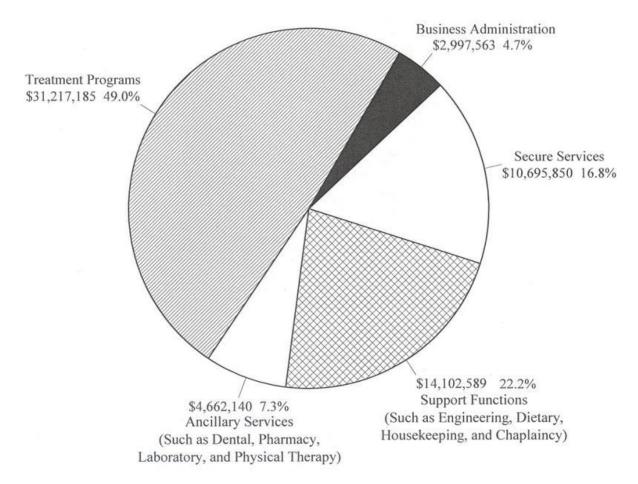
# **State Hospital**

### Accomplishments (continued)

 Responded to additional flood-related needs by admitting three Manor Care nursing facility residents from Fargo

# State Hospital Expenditures 2007-2009 Biennium

	Funding	Percent
General	\$45,613,547	71.6%
Federal	\$2,616,977	4.1%
Other	\$15,444,803	24.3%
Total	\$63,675,327	100.0%



# **Developmental Center**

701 W 6th Street Grafton, ND 58237-1399

Phone: 701.352.4200 Fax: 701.352.4376

N.D. Relay: 1.800.366.6888

http://www.nd.gov/dhs/locations/developmental/

The Developmental Center has fully integrated Personal Outcomes into organization practices.

- CQL Executive Summary

The Developmental Center provided structured residential services and other specialized services for people with developmental disabilities whose needs exceeded community resources. Some also have medical and mental health issues. Services were provided to meet the individualized needs and personal goals of consumers.

Staff at the Department's eight regional human service centers continued to handle referrals for **admission** to the center. Developmental Center staff continued **outreach** efforts to provide crisis evaluation and consultation in order to help people with disabilities remain in community placements and avoid admission.

Campus Utilization: During the biennium, the campus also housed private apartments, a Veterans Affairs Clinic, a Head Start Program, Special Education Program operated by the local school district, and Northeast Human Service Center's outreach office.

#### Services

- Adaptive equipment services
- Adolescent services
- Clinical and health services
- Community supports
- Consultation and evaluation
- Dual sensory impairment services
- Residential services
- Vocational services
- Work and day activity services

### **Accomplishments**

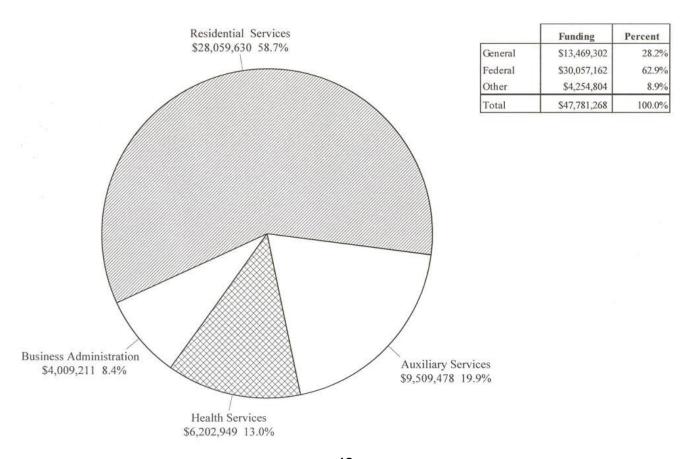
- Received accreditation from the Council on Quality and Leadership (CQL) for attaining a recognized level of quality of life in the provision of services to people with disabilities
- Provided structured residential and other supportive services to an average of 120 persons per day
- Opened a four-bed adolescent services unit on the campus to serve adolescents with developmental disabilities whose needs exceeded community providers' expertise or resources because of behavioral issues and who were not appropriate for admission to the State Hospital
- Continued efforts to expand the Clinical Assistance Resource and Evaluation Services (CARES) outreach program to provide supports where people live to help avoid admission

# **Developmental Center**

### **Accomplishments (continued)**

- Provided temporary shelter and support to 55 Friendship Inc. clients and 45 caregivers who evacuated from Fargo as a precaution in late March
- Sheltered about 36 veterans and 12-18 staff who evacuated from the Basic Care unit of the Veteran's Home in Lisbon, N.D. due to spring flooding
- Supported consumers to establish a Community Helpers Group to provide leadership and community involvement and volunteerism opportunities, while offering discussion on volunteering, civic responsibility, avoiding exploitation, developing and maintain social networks, and commitment to projects. Over 30 consumers participated regularly.

# Developmental Center Expenditures 2007-2009 Biennium



# **Appendices**

- Expenditures 2007-2009 Biennium
- American Recovery and Reinvestment Act (ARRA) funds for the 2007-2009 Biennium
- Legislative Summary

Department of Human Services Expenditures 2007 - 2009 Biennium

	Salaries and Wages	Operating	Capital	Capital Construction Carry Ovr	Grants	HSCs and Institutions	Grants-Medical Assistance	315	General	Federal	Other	101
MD Subdivision	32510	32530	32550	32551	32560	32570	32573	Total	32591	32592	32593	
100 100-15 ADMINISTRATION - SUPPORT	\$7,647,119	\$4,643,779						\$12,290,898	\$5,313,142	\$5,699,888	\$1,277,868	
100 100-20 INFORMATION TECHNOLOGY SRVCS	\$4,651,510	\$56,254,265	\$372,051					\$61,277,826	\$19,463,830	\$39,577,654	\$2,236,342	
100 MANAGEMENT Total	\$12,298,628	\$60,898,044	\$372,051			- 50		\$73,568,724	\$24,776,972	\$45,277,542	\$3,514,210	
300 300-01 ECONOMIC ASSISTANCE POLICY - GRANTS	\$4,278,139	\$10,288,428	\$197		\$211,174,326			\$225,741,090	\$4,621,879	\$198,752,063	\$22,367,148	
300 300-02 CHILD SUPPORT ENFORCEMENT	\$15,907,579	\$3,443,059			\$174,400			\$19,525,039	\$1,333,096	\$12,306,265	\$5,885,677	
300 300-03 MEDICAL SERVICES	\$7,000,410	\$22,140,688					\$389,963,728	\$419,104,826	\$116,991,936	\$280,052,228	\$22,060,662	
300 300-10 LONG TERM CARE							\$659,218,857	\$659,218,857	\$237,547,252	\$418,249,412	\$2,896,596	\$525,597
300 300-42 DD COUNCIL	\$161,255	\$53,070			\$709,574			\$923,899		\$923,899		
300 300-43 AGING SERVICES	\$1,174,662	\$12,212,853	\$187		\$2,434,317			\$15,822,018	\$1,546,900	\$13,825,055	\$450,064	
300 300-46 CHILDREN AND FAMILY SERVICES	\$2,112,701	\$5,141,549			\$104,389,734			\$111,643,984	\$21,685,975	\$76,004,542	\$13,953,467	-
300 300-47 MENTAL HEALTH AND SUBSTANCE ABUSE	\$2,085,691	\$6,447,835			\$2,021,012			\$10,554,538	\$4,472,700	\$5,653,819	\$428,018	
300 300-51 DISABILITY SERVICES	\$4,189,297	\$6,668,302			\$16,763,209			\$27,620,808	\$6,464,012	\$21,058,571	\$98,225	
300 PROGRAM AND POLICY Total	\$36,909,735	\$66,395,783	\$383		\$337,666,573		\$1,049,182,585	\$1,490,155,060	\$394,663,751	\$1,026,825,854	\$68,139,858	\$525,597
410 410-71 NORTHWEST HSC						\$7,329,714		\$7,329,714	\$4,123,162	\$2,840,758	\$365,795	
410 410-72 NORTH CENTRAL HSC						\$16,675,606		\$16,675,606	\$8,725,073	\$7,124,982	\$825,551	
410 410-73 LAKE REGION HSC						\$8,962,195		\$8,962,195	\$4,999,278	\$3,533,968	\$428,949	
410 410-74 NORTHEAST HSC						\$22,166,774		\$22,166,774	\$9,739,293	\$11,103,746	\$1,323,735	
410 410-75 SOUTHEAST HSC						\$26,063,319		\$26,063,319	\$11,490,333	\$13,210,375	\$1,362,611	
410 410-76 SOUTH CENTRAL HSC						\$13,279,561		\$13,279,561	\$6,928,293	\$5,533,646	\$817,623	
410 410-77 WEST CENTRAL HSC						\$20,880,166		\$20,880,166	\$9,647,776	\$10,199,678	\$1,032,711	
410 410-78 BADLANDS HSC						\$9,153,706		\$9,153,706	\$4,744,544	\$3,650,036	\$759,126	
410 HUMAN SERVICE CENTERS Total				1		\$124,511,040		\$124,511,040	\$60,397,752	\$57,197,189	\$6,916,099	
4xx 420-00 STATE HOSPITAL						\$52,979,477		\$52,979,477	\$34,948,657	\$2,616,977	\$15,413,843	
4xx 421-00 SH SECURED SERVICES				\$1,807,579		\$8,888,271		\$10,695,850	\$10,664,890		\$30,960	
4xx 430-00 DEVELOPMENTAL CENTER						\$47,781,268		\$47,781,268	\$13,469,302	\$30,057,162	\$4,254,804	
4xx INSTITUTIONS Total				\$1,807,579		\$109,649,015		\$111,456,594	\$59,082,849	\$32,674,139	\$19,699,607	
Grand Total	\$49,208,363	\$127,293,828	\$372,435	\$1,807,579	\$337,666,573	\$234,160,056	\$1,049,182,585	\$1,799,691,418	\$538,921,324	\$1,161,974,724	\$98,269,773	\$525,597

Continuing Appropriation: Child Support Collections Paid to Families

\$215,972,196

47

## American Recovery and Reinvestment Act (ARRA) of 2009

The N.D. Department of Human Services received \$37.7 million in federal ARRA monies during the 2007-2009 biennium. The majority of these funds, or \$31.9 million, was received by the Department based upon an increase in the Federal Medical Assistance Percentage (FMAP) effective October 1, 2008. The remaining \$5.8 million was received for the Supplemental Nutrition Assistance Program to increase the monthly client benefits (\$2.6 million), and additional Child Support Enforcement funding (\$3.2 million).

# 2009 Legislative Summary

#### Legislation passed by the 2009 N.D. Legislature relating to human services

#### NOTES:

- This list **may not be inclusive** of all bills passed during the 2009 Legislative Session that relate to Department of Human Services (DHS) programs and services.
- \* Denotes legislation proposed by the N.D. Department of Human Services or the Office of Management and Budget.
- HB indicates House Bill
- SB indicates a Senate Bill

#### \*HB 1012 - Appropriation for the N.D. Department of Human Services

HB 1012 and other bills included a general fund increase of \$58.8 million, a 9.87% increase. The total budget is \$2.3 billion (with general fund of \$654.6 million).

#### Overall

- Includes an inflationary increase of 6% for providers each year of the biennium (For those being rebased Hospitals, Physicians, Chiropractors, Ambulance, the inflation was for year 2 only. Dentists will receive 6% in year 2 only.)
- Includes \$8.5 million from the Bank of North Dakota loan along with the federal funds that can be accessed – total of \$23 million in the event the utilization/caseload changes were too deep
  - Also adds language regarding a deficiency if the Bank of North Dakota loan is not sufficient
- Home and Community Based Care Services is increased \$22.6 million in total (a 55% increase over the 2007 2009 appropriation)

#### **Medical Services**

- Raises the qualifying income eligibility and funds the Children's Health Insurance Program at 160% of poverty (using net income) with an average monthly premium of \$228.70
  - Estimated increase of 439 children
  - o 3,941 average children covered per month
- Includes funding to rebase Hospitals at 100% of rebasing report, Physicians at 75% of rebasing report, Chiropractors at 75% of rebasing report, Ambulance Providers at the Medicare level of reimbursement, and Dentists fees increased to pay at an average of 75% of average billed charges
- Increases the Medically Needy Income levels to 83% of poverty; a household size of one will retain \$720 and a household size of two will retain \$969 each month

#### Long Term Care – Non Developmental Disabilities (DD)

- Includes funding to add 4 additional home-delivered meals to those on the Medicaid Waiver (was previously at 3 meals)
- Includes adding nonmedical transportation to Home and Community Based Service (HCBS)
  Programs [Service Payments for the Elderly and Disabled (SPED) program and the
  Expanded-SPED program]
- Expands the PACE program in the budget to \$7.4 million (currently at \$1.4 million)

- Includes funding for increasing the SPED sliding fee scale, removing the HCBS cap for family foster care, and adds a third tier to Personal Care
- Includes funding to increase the Personal Needs Allowance for SSI only individuals (increased from \$30 to \$50 per month); and from \$60 to \$85 per month for Basic Care
- Includes funding for the Community of Care program: \$120,000
- Includes funding for a Hospice for Children Medicaid Waiver

#### Long Term Care - DD

- Includes an increase to the administrative reimbursement (pay based on functioning level of clients) to the Individualized Supported Living Arrangement and Family Care Option III providers
- Includes funding to decouple the allowance for Intermediate Care Facilities for people with developmental disabilities (ICF/MRs) from Nursing Homes and increases it to \$85 per month (was at \$50 per month)
- Includes funding for Intense Medical Needs for adults in residential facilities and for children with intense medical needs being cared for in their homes
  - o Includes additional funding of \$1.6 million general fund; \$4.2 million total for severely medically fragile and behaviorally challenged individuals
- Includes funding for an Autism Spectrum Disorder Waiver for children under 5 years of age

#### **Aging Services**

- Includes an increase to the Qualified Service Provider training contract from \$30,000 to \$60,000
- Includes additional funding of \$900,000 for Senior Meals programs

#### Mental Health / Substance Abuse

- Includes a study of the impact of individuals with Traumatic Brain Injury including veterans returning from war and the impact on the state human services system
- Continues the Governor's Prevention Advisory Council on Drugs and Alcohol with an \$100,000 appropriation
- Increases by \$250,000, funding for Compulsive Gambling Treatment Services for a total of \$650,000
- Continues funding for Robinson Recovery Center which prioritizes services to individuals
  with primary diagnosis of methamphetamine or other controlled substances in a residential
  setting
- Continues funding for the community based high risk sex offender treatment program

#### **Developmental Disabilities (DD)**

• Includes funding the need for services to keep those with DD in the community (\$297,358)

#### Vocational Rehabilitation

 Includes \$400,000 of additional funding for Centers for Independent Living to further expand their services statewide (currently \$1,3 million and this will increase the amount to a total of \$1.7 million)

#### **Developmental Center**

 Includes funding in the base budget to establish a CARES team to keep clients with DD in the community

#### American Recovery and Reinvestment Act of 2009 (ARRA or Stimulus Funding)

\$66,500,000 FMAP (federal match) to be used in Medicaid funded services

\$9,874,747 to increase food stamp payments per month

\$3,200,000 to access additional Child Support funds

\$2,140,000 for Part C (individuals up to 3 years of age with a disability)

\$1,800,000 for the Vocational Rehabilitation program

\$243,000 for the Independent Living programs

\$3,170 for the Older Blind program

\$485,000 for Senior Meals programs

\$143,288 for the Senior Employment program

\$84,389,205 Total Stimulus Funding

#### HB 1038 - Drivers license suspensions and child support enforcement

(At the request of the Interim Judicial Process Committee)

Clarifies that the Department of Human Services' authority to restrict a driver license
includes the authority to authorize the Department of Transportation to issue a restricted
license that allows an obligor to drive during the obligor's normal working hours

#### HB 1040 – Relating to Missing Persons Investigations

• Provides a procedure for missing person investigations

#### HB 1043 – Dementia Care Services Program

Provides \$1.2 million for the development of a dementia care services program in each area
of the state served by a regional human service center

#### HB 1044 - Program for services to transition-aged youth at risk

- Authorizes DHS to develop a program for transition-age youth using the wraparound planning process
- Authorizes DHS to develop rules to establish eligibility, services, and a distinct statewide representation with regional subcommittees
- Contains no funding allocation

#### \*HB 1090 – Relating to child care assistance; and to provide a penalty.

- Creates and enacts a new chapter to Title 50 of the North Dakota Century Code
- Authorizes DHS to develop administrative rules related to the child care assistance program

#### \*HB 1094 - Sibling placements and relative notifications

- Creates a provision requiring the court to make reasonable efforts finding that efforts have been made to place siblings together in foster care and a visitation plan be addressed for these siblings
- Requires that relatives (parents and grandparents) be notified of a related child placed in out-of-home care within 30 days of removal/placement

#### \*HB 1095 - Criminal history background checks

 Adds "licensed child placing agencies" to the list of entities authorized for fingerprint-based background checks

#### \*HB 1157 – Estate recovery from full-benefit dual-eligible medical assistance recipients

• Changes language in the Century Code related to Medicaid estate recovery

#### \*HB 1159 - Destruction of Juvenile Court records

 Provides an exemption to DHS and county social services regarding the destruction of Juvenile Court records

#### \*HB 1175 – Child support enforcement practices

- Authorizes insurance companies and government self-insurance pools to exchange claimant information with the child support enforcement program and provides immunity for insurers who choose to exchange the information
- Requires gaming operators to report certain winnings to the child support enforcement program (delayed effective date of July 1, 2010)
- Creates a task force to study the interaction of the business community and the child support enforcement program
- Makes other changes to child support enforcement procedures and the operations of the state disbursement unit

#### HB 1209 – Long Term Care Partnership Insurance tax credit

- Allows individuals who purchase a qualifying Long Term Care Partnership policy to qualify for a North Dakota Individual Income Tax Credit of up to \$250 per year
- Long Term Care Partnership policies allow individuals receiving nursing home care to protect assets from Medicaid eligibility and estate recovery

#### HB 1263 - Duties of assisted living facilities

- Requires assisted living facilities to have tenancy criteria that is fully disclosed to all tenants before the tenancy agreement is signed
- Requires the administrator of the assisted living facilities to complete 12 hours of continuing education per year
- Requires all direct care staff to receive annual education on specified topics
- Requires assisted living facilities to maintain a record for each tenant
- Requires facilities to check references, previous employment, and applicable registries of each job applicant prior to hiring
- Requires each assisted living facility to conduct a consumer satisfaction survey at least every 24 months and shall provide a copy of the survey results to each tenant

#### HB 1280 – Legislative Council study related to administrative rules

• Studies application by administrative agencies of standards from other than state or federal law which have not been adopted as administrative rules

#### HB 1300 – Regarding irrevocable trusts

- Allows irrevocable trusts that are modified by a court to continue to be considered as an irrevocable trust
- Makes the principle in an irrevocable trust unavailable as a countable asset for Medicaid, except as permitted by the trust (The entire principle in a revocable trust is counted as an available asset.)

#### HB 1303 – Allowable Bad Debt expenses for Nursing Home Rate Setting

- Increases the number of days of allowable bad debt expense to 180 days per year not to exceed a total of 360 days for any one individual
- Includes allowable bad debt expense in the property cost category on the cost report when the bad debt is determined to be uncollectible with no likelihood of future recovery

 Is contingent upon approval of the Medicaid State Plan by the federal Centers for Medicare and Medicaid Services

#### HB 1307 – Education Expense for Nursing Home Rate Setting

- Increases the amount of education expense that may be claimed for an individual to \$3,750 annually not to exceed a total of \$15,000 per individual
- Requires an individual who received education assistance to commit to work a minimum of 1,664 hours of employment for each year that education assistance was provided by the facility

#### HB 1327 – Appropriation for remodeling of a Nursing Facility and a pilot project

- Provides \$150,000 grant funds to remodel nursing facility infrastructure to meet basic care and assisted living licensure requirements
- Provides \$50,000 for a rent subsidy pilot program for at least four assisted living residents

#### HB 1329 - Duties and liabilities of an income payer and child support guidelines

- Clarifies responsibility for an income payer's error in submitting funds on behalf of an obligor to the state child support disbursement unit
- Directs that the child support guidelines disregard atypical overtime wages or nonrecurring bonuses in determining the amount of child support an obligor should pay
- Requires DHS, as part of its next rulemaking regarding the child support guidelines, to adopt new criteria authorizing a deviation from the child support guidelines based on the increased ability of an obligor to provide support when the obligor's income is decreased based on depreciation

#### HB 1385 - Medicaid Prior Authorization Program

- Permanently removes authority to prior authorize:
  - o Antipsychotic medications
  - Antidepressant medications
  - Anticonvulsant medications
  - Antiretrovirals, for the treatment of HIV
  - o Antineoplastic agents, for the treatment of cancer
  - Stimulant medication used for the treatment of ADD/ADHD
- Adds a Generic Pharmaceutical Association representative to the Drug Utilization Review Board as a non-voting member

#### HB 1418 – Early Childhood workforce development

- Creates the Quality Improvement Rating System (QRIS) initiative to address quality of child care services and workforce capacity and development
  - o Provides training opportunities leading to credentials

#### HB 1433 – Nursing Facility Rates

- Provides for a Medicaid supplemental payment for small, rural, at-risk nursing facilities that are city or county owned
  - The bill was sponsored by local legislators who were working to help assure that Dickinson could receive critical access hospital designation; and the only way for that to occur was to afford the "to-be-established" Richardton nursing facility a Medicaid supplemental payment.

#### HB 1458 - Uniform Trust Code

- Requires a trustee to inform a person who has been identified as a qualified beneficiary of a
  revocable trust of what the trust may provide that beneficiary if the qualified beneficiary is
  required to provide that information for a determination of benefits for Medicaid, Temporary
  Assistance for Needy Families, supplemental nutrition assistance, home and communitybased services, or service payments for the elderly and disabled
- Reestablishes the presumption against a trustee in a transaction between a trustee and the trust's beneficiary that the transaction is presumed to be entered into by the trust beneficiary without sufficient consideration and under undue influence

#### HB 1472 - Early Childhood Services Advisory Board

• Creates a board to advise DHS on childcare rules and regulations

#### HB 1477 - Increase in Medicaid Burial Allowance

- Increases the burial exclusion for Medicaid from \$5,000 to \$6,000
  - Assets designated for burial are excluded from the Medicaid asset test up to the burial allowance

# HB 1573 – Study of voucher use and provider choice for clients in various human services and other state programs

 Involves Vocational Rehabilitation, Developmental Disabilities, Mental Health & Substance Abuse Services, Economic Assistance, and Child Welfare, and relates to Medicaid due to the funding of state human service programs

#### SB 2044 – Basic Care and Nursing Home Moratorium

 Extends the Basic Care and Nursing Home bed capacity expansion moratoria to July 31, 2011

#### SB 2045 - Notification Requirements for Discharge from a Care Facility

 Requires a 30-day written advance notice of any transfer or discharge of a resident from a nursing home, swing-bed hospital, basic care facility, or assisted living facility

#### SB 2074 - Adult Guardianship and Protective Proceedings

 Enacts the Uniform Adult Guardianship and Protective Proceedings Jurisdiction Act that clarifies who has jurisdiction when the ward, guardian and property may all be in different states

#### \*SB 2097 - Child Abuse and Neglect

 Changes statutory language to address "person responsible for a child's welfare" and makes other minor language changes

#### \*SB 2123 - Background checks

• Grants comprehensive criminal background check authorization to allow fingerprint-based background checks of child care providers

# SB 2158 – Recognize Advanced Registered Nurse Practitioners as Primary Care Providers under the medical assistance program

 Will allow Advanced Registered Nurse Practitioners to enroll and be chosen by ND Medicaid recipients as Primary Care Providers with the Primary Care Case Management Program  The Primary Care Case Management Program is a managed care program within ND Medicaid in which recipients designate a primary care provider to provide medical services and referrals to specialty services as needed.

#### \*SB 2162 - Early Childhood Services

 Makes statutory changes regarding license categories in child care, and denials and revocations of child care licenses

# SB 2167 – State Agency to provide a policy for reuse, recycling, or resale of state-provided medical equipment

Requires state agencies that provide medical equipment to clients to develop a policy that
encourages and provides direction to families to donate medical equipment when that
equipment is no longer in use or medically necessary

#### SB 2174 – Autism Spectrum Disorder Task Force

- Creates an Autism Spectrum Disorder (ASD) Task Force
- Charges the Task Force with examining early intervention services, family support services, the costs of providing services and the extent of Federal resources that can be directed to individuals with ASD
- Charged the Task Force with developing a state plan for ASD and presenting the plan to the Governor and Legislative Council before July 1, 2010

#### SB 2195 – Updates and Revisions to the Uniform Anatomical Gift Act

 Provides process to resolve any discrepancy between a living will and the terms of a potential anatomical gift

#### SB 2198 – Traumatic Brain Injury (TBI)

- Identifies DHS as the lead agency for TBI and provides an appropriation of \$330,000 for.
  - A Head Injury Association to provide informal supports, information and referral, peer monitoring, training, facilitation of support groups, public awareness and advocacy efforts
  - Social and recreational services for 10 people
  - Vocational rehabilitation and consultation in the form of extended services after their supported employment services are exhausted
- Calls for outreach efforts by Medicaid so individuals with brain injuries become aware of Home and Community-Based Services available to individuals who have moderate or severe impairments in the existing HCBS waiver

#### SB2231 – Food Assistance Contracts

Provides \$350,000 via contract with DHS with a statewide charitable food recovery and
distribution organization (Great Plains Food Bank) to develop and implement new methods
of delivering charitable food assistance in underserved counties including a mobile food
pantry program, a prepackaged food basket program, and expansion of the recovery of
surplus food from the retail and wholesale food industry for distribution to charitable feeding
programs

#### SB 2237 - Health Care Record Registry

- Requires Secretary of State to implement a health care registry for individuals who have an advance directive
  - Travelers will have a wallet card with information that will allow them quick access to the advanced directive on a secured website

#### SB 2293\* - Assault on State Hospital Employees

 Provided for charging a patient with a Class C felony when an employee of the state hospital acting in their official capacity is assaulted by the patient

#### SB 2318 – Bond requirements for qualified programs of all-inclusive care of the elderly

- Allows private pay individuals to enroll in the Program of All-Inclusive Care of the Elderly (PACE) by maintaining a surety bond
  - PACE is a capitated program that allows the frail elderly to remain in their homes; it provides comprehensive health care services for those over age 55, who meet the state's nursing facility level of care and can remain in their homes safely

#### SB 2355 - Short-term care and pilot program for at-risk youth

 Provides funding for a pilot program to serve the needs of at-risk youth for short-term shelter services

#### \*SB 2391 – Relating to alternative-to-abortion program

- Authorizes DHS to provide services under the program
- Requires DHS to report on the program to Legislative Council
- Appropriates \$500,000 to fund the program (\$100,000 of that must be used for advertising)

#### SB 2396 – Family Impact Initiative

Provides an appropriation for identified early intervention programs for children and families

#### SB 2420 – Study of child support issues

 Requests Legislative Council to consider studying child support determination of income and support obligations, the feasibility and desirability of the establishment of an ombudsman program, and coordination of services and resources for parents

N.D. Department of Human Services 600 E Boulevard Avenue - Dept. 325 Bismarck ND 58505-0250 www.nd.gov/dhs