

**Testimony**  
**Department of Human Services**  
**Human Services Interim Committee**  
**Representative Chuck Damschen, Chairman**  
**June 19, 2014**

Chairman Damschen, members of the Human Services Interim Committee, I am JoAnne Hoesel, Director, with the Department of Human Services (DHS), Division of Mental Health and Substance Abuse Services. I appear before you to provide information as requested by the committee.

**Pre-Vocational Skills**

Community Options currently provides pre-vocational skills services to 23 individuals. The total amount of the contract for the current biennium is \$58,334. There is a waiting list of five people in Region 5 (Fargo). Based on information from the current provider indicating a projected need to serve 50 people, funding to provide eight hours of service per month would total \$568,614. Increasing this service would prepare more individuals to work with Vocational Rehabilitation (VR) supported employment, obtain employment, and then move on to the Extended Services (ES) funding for ongoing support to sustain employment.

**Increasing Extended Services**

There are a total of six specific slots in ES for individuals with a traumatic brain injury (TBI). The ES program does serve additional people with TBI but accepts people with other disabilities. As of June 1, 2014, there are three individuals on the TBI ES wait list and 14 individuals with TBI were receiving ES services.

It is projected that approximately one half of the people in pre-vocational services continue on to ES. This equates to a need for an additional 25 ES slots plus the three on the wait list. At a rate of \$379 per month (after July1, 2014) for ES, the total cost for the 28 slots for the 2015-17 biennium would be \$254,688.

**Estimated Cost to Implement a Comprehensive System of Care as Proposed by Rebecca Quinn**

The comprehensive system of care proposed by Ms. Quinn includes the following components: 1) TBI Registry, 2) Regional Resource Facilitation, 3) Services to include Home and Community Based Services (HCBS), Day Supports, and Clubhouse, 4) Residential and supported living options.

1) **TBI registry:** The following information was reported at the April 2014 Committee meeting:

The following outlines anticipated costs to implement and maintain the registry within the Department of Health (DoH) for a total of \$251,083:

- \$60,000 registry model and license (one-time cost)
- \$20,000 annual maintenance of registry (estimate one year due to timing of start up)
- \$12,517 software and other computer related costs
- \$1,050 computer costs
- \$500 other equipment costs
- \$11,000 DoH staff travel to reporting sites to discuss and monitor data entry
- \$5,000 printing registry forms and manuals
- \$137,798/biennium (\$94,980 salary and \$42,818 fringe) for DoH staff, epidemiologist

- \$2,218 IT data processing and telephone
- \$1,000 professional development

Estimated costs related to DHS efforts totals \$20,000. It's possible DHS would contract with the North Dakota Brain Injury Network (NDBIN) for this work.

- \$20,000 marketing, training, and registry information (start-up cost, may need to consider the need to fund ongoing training efforts if revisions occur)

TOTAL BIENNIUM ESTIMATED COSTS for DoH and DHS: \$271,083 for the 2013-15 biennium

2) Single Point of Entry with regional resource facilitation:

The current contract with UND-Center for Rural Health (CRH) for the work of the NDBIN is \$533,494. This funding supports a project director, resource facilitation services provided by three staff, NDBIN website, peer mentoring, and education and public awareness.

The following details provide information to increase the current structure to that of a facilitator in each region and an education coordinator:

	Current	Increased funding for comprehensive coverage (includes current funding)
Salary & Fringe	\$445,275	\$1,250,000
Travel	\$18,200	\$45,000
Supplies	\$12,500	\$50,000
Training & Education	\$18,506	\$45,000
Evaluation		\$135,000
Administrative	\$39,519	\$180,000
<b>Biennium Total</b>	<b>\$534,000</b>	<b>1,705,000</b>

- Staff: 1 program director, 8 resource facilitators and an Education coordinator.
- Travel: Travel costs are based on state employee lodging and per diem rates and the use of state fleet vehicles.
- Supplies: cell phones, printers, computers, furniture and other office materials.
- Training and Education: website maintenance, conference planning, exhibiting, professional development, regional awareness events, and program promotion.
- Evaluation: Evaluation dollars to develop and implement an outcome based evaluation plan to determine the ongoing benefits of the program.
- Administrative cost: This cost includes 8% indirect rates and the cost of rental space for facilitators' offices.

### 3) **Community-based services: HCBS, Day Supports, and Clubhouse**

Here is a listing of services available but may not be accessible by those with TBI:

- **HCBS** – eligibility is based on nursing home level of care need. The current eligibility criteria for many services often excludes individuals with TBI because they do not meet the skilled nursing home level of care but are in need of services.
  - Transitional services - provision of training an individual to live with greater independence in the individual's home. This includes training, supervision, or assistance to the individual with self-care, communication skills, socialization, sensory/motor development, reduction/elimination of maladaptive behavior, community living, and mobility. The rate for this service is \$6.59/unit or \$26.36/hour for agency Qualified Service Providers (QSPs).
- **Medicaid State Plan** - Income-based eligibility - personal care up to 120 hours per month, durable medical equipment, therapies such as speech, occupational therapy, physical therapy, and psychological therapy services, medical services and homemaker services in their own homes
- **Service Payments for the Elderly and Disabled (SPED)** program if they meet the functional and financial eligibility requirements. The rate for this service is \$6.59/unit or \$26.36/hour for agency QSPs.
- **Expanded Service payments for the Elderly and Disabled (XSPED)** program may be an option too if the individual is Medicaid eligible. The rate for this service is \$6.59/unit or \$26.36/hour for agency QSPs.
- **Respite care** is available for the caregivers of individuals with TBI through all the programs mentioned above.

- **Day supports** assist with acquisition, retention or improvement in self-help, socialization, and adaptive skills; provision of social, recreational, personal care, and community integration skills; development of non-job task oriented pre-vocational skills such as compliance, attendance, task completion, problem solving and safety; and supervision for health and safety. The services are provided in settings appropriate to the individuals' needs. The Developmental Disabilities system includes this service with interim rates for these services range from \$6.50 to \$44.60 per hour per individual.
- **Brain Injury Clubhouse**- a community that offers a safe environment where people focus on abilities rather than disabilities. Members work together to support each other in the pursuit of personal goals and develop skills and self-esteem needed to pursue meaningful and productive lives. Clubhouses encourage community re-entry, rebuilding of social relationships, and skills training needed to return to productive activity. Financial information on this concept was not readily available.

4) **Continuum of residential services/supported living arrangements:**

Individuals with a TBI have support needs in their living arrangements similar to those of individuals with an intellectual disability or mental illness. Information on the following options is taken from the developmental disability and mental health systems.

- **Supported Living Arrangement (SLA)** is a residential service that provides support to people living in their own homes or apartments. Supportive services include help with budgeting,

shopping, laundry, etc. and are provided on an intermittent basis, generally less than 8 hours per month. There is a fixed staff to client ratio. SLA rates range from \$8.19 to \$52.44 per day per individual. The costs vary per provider.

- **Individualized Supported Living Arrangement (ISLA)** – This residential service is provided to individuals in their own homes or apartments. The level of support provided is individualized to the person’s need for training and assistance with personal care, laundry, money management, etc. Individuals who receive ISLA typically need a higher level of support than people in SLA. ISLA contracts vary from \$30.66/day for eight hours per month of direct care staffing, administrative allotment, and program coordination allotment - \$650.26/day for 730 hours per month of direct care staffing administrative allotment, and program coordination allotment.
- **Group home or transitional living home care** - The interim rates for group homes for individuals with an intellectual disability range from \$114–\$467.79 per day per individual. Current rates for this type of living support for those with mental illness is split between a daily rate paid by the client, if they have an income, at \$15.50 per day and a therapeutic rate of approximately \$700 per month or a monthly rate split between rent paid by the client at \$250 per month and therapeutic rate of \$250 which is billed to Medicaid.
- **Nursing home** – There are two facilities in the state that work specifically with individuals with TBI.
  - o **Dakota Alpha** is a 20 bed skilled nursing facility, with nine of the 20 beds designated as long-term care beds. 19 of the 20 residents have a TBI. There is currently a waiting

list of 13 individuals with a wait time of two–three years; this may be low since oftentimes people will not make a referral or ask to be placed on the wait list once they are told the length of wait time. Only two residents left the facility in the past 18 months. The current daily rate at Dakota Alpha is \$381.26.

- **Dakota Pointe** - Individuals who do discharge from Dakota Alpha often move to Dakota Pointe if a bed is available. Dakota Pointe is a licensed basic care facility with capacity for 10 residents. There are six individuals on the wait list; Two individuals have left the facility in the past 18 months. The daily rate at Dakota Pointe is \$165 plus each resident pays their own room and board at a rate of \$460 per month.
- **North Dakota State Hospital** - three individuals reside at this institution. All three individuals present challenges beyond what current facilities or current community living arrangements can manage.

### **Access Points for TBI Services and Behavioral Health Services**

The NDBIN was established August 1, 2013, by the University of North Dakota – Center for Rural Health to serve as a hub of information about TBI in North Dakota. Its purpose is to provide information and support to individuals with brain injury and family members, assist them with navigating the service system, and provide peer support and resource facilitation services; and provide ongoing public awareness and education about TBI.

Marketing is critical to assure people know where to turn when they need this type of services. Marketing is currently being done across the state

with behavioral health and primary care providers. The NDBIN partners with providers of TBI services to streamline the referral process and lessen the number of calls and inquiries an individual and or family member need to make in order to get connected to services. NDBIN is an appropriate key access point not only for the dissemination of information but also the logical point for referrals and service coordination on behalf of individuals with TBI and family members. Easy access to the NDBIN can be found at the established website, [www.ndbin.com](http://www.ndbin.com) and a toll-free number, 1-855-866-1884.

### **Number of Individuals Being Cared for in Basic Care Nursing Facilities**

According to the results of a survey conducted by the Long-Term Care Association and email responses from the HCBS county case managers from the number that responded (48), 14 individuals with TBI are being cared for in basic care facilities across the state. This is in addition to those who are cared for at Dakota Pointe in Mandan and High Soaring Eagle Ranch in Valley City. It should be noted that there was low response to the survey which will affect this information.

This concludes my testimony. I am happy to answer any questions you might have.