

Department of Human Services OAR Descriptions for the 2013-15 Biennium

As of December 5, 2012

Row	Cabinet Priority	Cabinet Category	Short Description (In Order by Reporting Level)	Narrative
1	01	Optional 3% Savings Plan	Optional 3% Savings	This is the 3% optional savings per budget instructions. This adjustment includes a 4.65% rate reduction for Medical Services and Long-Term Care providers.
2	02	Affordable Care Act	Previously Eligible "Woodwork Effect"	This is the group of individuals that are eligible for Medicaid today, but for various reasons, they have not come forward for coverage. There is widespread agreement that many in this group will apply for coverage in SFY 2014; regardless of whether the state chooses to opt into the Medicaid expansion that is part of the Affordable Care Act. The Department is estimating the "woodwork effect" will result in 1,300 additional individuals being eligible for Medicaid.
3	03	Compensation Study	Staff Retention - 90% of Market	The Hay Study allowed many employees to be increased to the minimum of their pay grade; however, there was no mechanism in place to address long-term staff salaries. As a result, the Department has an inordinate number of employees with many years of service, who are being paid at the same rate as a new employee. DHS has developed a salary model that addresses these inequities and will help the Department retain quality staff. This OAR will allow the Department to bring all staff to 90% of the market, as well as address the compression issues that exist.
4	04	Oil Patch Add-On for Staff	Oil Patch Add-On for Staff of the Williston, Minot and Dickinson Regions	The oil industry in North Dakota has affected recruitment and retention of staff in the Department of Human Services. In order to retain existing staff, the Department implemented an oil-patch add-on for Williston (Region I) staff of \$500 each month beginning in April 2012. The Minot (Region II) and Dickinson (Region VIII) areas are beginning to see increased turnover as well. The cost of living in these regions has increased, and in order to keep the existing staff, there is a need to implement the oil-patch add-on in these areas as well. This OAR requests funds to continue the oil-patch add-on for DHS staff in Williston and to implement the oil-patch add-on for DHS staff in Minot and Dickinson.
5	05	Street Reconstruction	Street Reconstruction - State Hospital	A large section of the street on the State Hospital campus is in need of major work. The street in question stretches from Circle Drive, past New Horizons, GM and Tompkins buildings to the Transitional Living houses. The work will include removing the cracked and deteriorating pavement, subgrade preparation and installation of new pavement. There are large sections of curb and gutter that also need to be replaced. Estimated cost is \$864,714.
6	06	Capacity	Children's ICF/ID	Enhancement to provide 2 children's homes serving behaviorally challenging individuals. Each home would consist of 4 beds, and would provide services under the Intermediate Care Facilities for the Intellectually Disabled - Children.
7	06	Capacity	Community Based Sex Offender High Risk Treatment	DOCR anticipates increased referrals to this high risk sex offender treatment. Current budget is 70 referrals from DOCR and 6 from North Dakota State Hospital (NDSH) for the 11-13 biennium. Requested referral numbers reflect a 14 slot increase for a total of 84 referrals for the 2013-2015 Budget. Increased costs for the provider Rule CPC for group therapy, individual therapy, polygraphs, penile plethysmographs, ABEL screenings, family sessions, and training conferences, case management rates, and intake rates. Based on the increased referrals and the average cost per slot of \$22,420 the budget would be \$1,776,864 per biennium, which is \$313,883 more than the 2011-2013 budget.

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8	06	Capacity	Extended Services	The Extended Services program provides on-going support to assist people to maintain the integrated, competitive, community-based employment achieved under Supported Employment. The division calculates it will require an additional \$18,800 to maintain the current number of individuals in the program. Additionally, the division currently has 24 individuals in the Supported Employment training and stabilization phase. In total, the division projects an additional \$201,600 for the program in the 2013-2015 biennium.
9	06	Capacity	Employment Benefits Planning	To support a statewide system of benefit planning services available to all clients of the Department of Human Services. Benefits planning is an effective method to encourage employment and self-sufficiency among clients with significant disabilities. This service was previously provided by other entities however, Federal funding from the Social Security Administration and the Medical Infrastructure Grant is no longer available.
10	06	Capacity	Developmental Disability Corporate Guardianship	Increased demand for corporate guardianships resulted in a wait list. Due to the wait list an increase in capacity from 414 to 444, plus additional petitioning costs of \$32,430 is being requested.
11	06	Capacity	8 Unit Transitional Living Program - LRHSC	\$729,740 for contract dollars to establish a 8 unit transitional living program in the Devils Lake Region.
12	06	Capacity	Temporary Staff Due to Client Service Demand - SEHSC	40 hours per week temp in the partnership program due to demand to maintain client to staff ratio (\$91,437). 20 hours per week temp nurse hours per week due to demand for nursing/med services (\$63,017). 25 hours per week temp support staff due to demands in service records and client registration (\$37,666). 40 hours per week temp MI case manager due to demand for services (\$91,437) 40 hours per week in counseling. 20 hours per week in case aide services for non smi and/or cd clients. 20 hours per week of psych testing and therapy services \$121,346).
13	06	Capacity	16 Unit Transitional Living Facility - SEHSC	\$1,300,000 for contract dollars to establish a 16 unit transitional living facility (TLF) in the SE Region to support individuals with SMI & chronic addiction who need an intensive level of care which provides 24/7 support for a 12-18 month period of time in the development of skills which allow for them to transition to less restrictive level of care and recovery.
14	06	Capacity	Developmental Disability Case Management - SEHSC	2 regular FTE's to meet licensure requirements for DD 1 to 60 caseload ratio. Analysis of growth of DD consumers in the region would indicate that at least two additional positions would be needed during the next biennium.
15	06	Capacity	Partnership and Mental Illness Case Management - SEHSC	Additional funding to convert existing temporary position who provides services to 15-20 transitional youth to a regular FTE position. \$26,293. 1 regular FTE for the partnership program. Cost of 1 FTE \$120,475. Additional funding to convert 2 existing temporary positions who provide MI Adult Case Management to regular FTE positions. \$75,881.
16	06	Capacity	Mental Illness/Chemical Dependency Transitional Employment - SCHSC	MI/CD Transitional Employment: Contract for transitional employment for 10-15 individuals per month to utilize employment as tool in recovery and stabilization. This program would continue the transitional employment into the community that starts at the NDSH as part of the treatment and stabilization process as well as to provide that level of care to individuals needing that service within the region. This is a short term placement where consumers with exacerbated MH or SA symptoms are stabilized while developing work skills and daily structure with eventual goal for job placement in community or transfer to Vocational Rehabilitation for continued job development skills.

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17	06	Capacity	15 Bed Long Term Housing for SMI/CD - SCHSC	\$312,000 to partner with Other Community Providers to develop a 15 Unit Long Term Supported Housing Model for Homeless Individuals with SMI or Chronic Substance Abuse Diagnoses in Region VI. These would be contract dollars to provide partial funding for 24/7 staffing of the facility to assist individuals in completion of daily living skills, transportation to needed services, structuring activities to promote continued recovery, providing safe environment for all residents, etc.
18	06	Capacity	Mental Illness/Chemical Dependency Crisis Residential - WCHSC	As a result of increased need for MI/CD short-term crisis residential, four additional beds are being requested. This would increase our capacity from 10 beds to 14 beds. Our average occupancy rate over the past year has been 86% with the most recent months averaging over 90%. We have an average of two to four clients on the waiting list at any given time.
19	06	Capacity	Mental Illness Long Term Residential - WCHSC	West Central's current, 8 bed, MI long term residential facility has been at 100% occupancy for many years. There is typically a waiting list of 7 clients. Some clients have been on a wait list for multiple years and have had prolonged stays at our Transitional Living facility as there have been no other placement options. Our plans would be to contract for an additional facility with 10 beds.
20	06	Capacity	Medical Detoxification - BLHSC	Expansion of the contract with St. Joseph's Hospital for Medical Detox services for individuals requiring acute medical treatment for severe withdrawal symptoms from alcohol or drug abuse. Reimbursement is on a per admission basis. This OAR would add an additional \$30,000 to the budget request based on projected expenditures in the 2011-2013 biennium.
21	07	Inflation - 4% / 4%	Medicaid Provider Inflation	Provides an inflationary increase of 4% to service providers for both of the years of the biennium.
22	07	Inflation - 4% / 4%	LTC Provider Inflation	Provides an inflationary increase of 4% to service providers for both of the years of the biennium.
23	07	Inflation - 4% / 4%	Program & Policy Other Inflation	Provides an inflationary increase of 4% to service providers for both of the years of the biennium.
24	07	Inflation - 4% / 4%	Child Welfare Provider Inflation	Provides an inflationary increase of 4% to service providers for both of the years of the biennium.
25	07	Inflation - 4% / 4%	HSC Inflation	Provides an inflationary increase of 4% to service providers for both of the years of the biennium.
26	08	Information Technology Projects	Field Services Electronic Health Records System Replacement (SITAC #3)	The One Center- State Hospital is currently using AIMS software for electronic patient care system and the HSCs are using MIS/eCET, known as ROAP, for the electronic health information system. Both systems are outdated and the vendor for the HSC system is only committing to support the system for the next 5 years and the AIMS system is minimally supported by the vendor. As a result the problems faced in the AIMS system to incorporate federal requirements may put the Hospital's Joint Commission accreditation at risk. We would like to replace the two outdated system with a modern comprehensive behavioral health focused and meaningful use compliant electronic health record information system. This new system would have an integrated case management system that encompasses the continuum of services, reduce redundant data collection, be useful and efficient tool for front line staff, streamline workflow, meet all stages of meaningful use, eliminate duplication, meet management and reporting needs of supervisors and administrators, and include appropriate security and foundational structure to accommodate the respective requirements of the agency divisions. This project was ranked #3 by the State Information Technology Advisory Committee (SITAC).

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27	08	Information Technology Projects	Mainframe Migration (SITAC #6)	Analyze the feasibility of removing the remaining DHS systems that run on the mainframe to a new application and/or a new operating environment. This includes five applications: 1) the Fully Automated Child Support Enforcement System (FACSES); 2) the Comprehensive Child Welfare Information Payment System (CCWIPS); 3) the Children & Family Services system's database; 4) Fiscal Administration's contract management system; and 5) Human Resource's Personnel Management Information System (PMIS). This project was ranked #6 by the State Information Technology Advisory Committee (SITAC).
28	09	Enhancement of Services	Expand Home Delivered Meals to SPED & ExSPED	Currently no meals are offered in SPED and ExSPED. The Home and Community Based Services waiver currently offers seven hot or frozen meals per week. Adding home delivered meals to SPED and ExSPED program seven days a week would allow individuals under 60 that are impaired in Meal Preparation to receive a nutritious meal each day to assure they are receiving adequate nutrition. The dollars associated with this service are for 18 months. The change would have a January 2014 effective date.
29	09	Enhancement of Services	Extend Personal Care Service for SPED	Adding extended personal care services (EPCS) to the SPED program to allow for a nurse educator to train an extended personal care provider to administer medications and do other medical tasks as allowed through the delegation by a nurse through the North Dakota Board of Nursing Policies. This will allow more individuals to be served in their home when their needs exceed the competencies allowed by the traditional Qualified Service Provider (QSP) program. The dollars associated with this service are for 18 months. The change would have a January 2014 effective date. This service is currently available in the Home and Community Based Services Waiver.
30	09	Enhancement of Services	Personal Care with Supervision	Adding the service of Personal Care with Supervision to the HCBS Waiver will allow individuals with a Primary diagnosis of Dementia or Traumatic Brain Injury (TBI) to receive 24 hour supervision within a daily rate. The setting for this service can be an individual home or apartment. All tasks, including personal care are included within the daily rate. This would allow individuals the choice of living in the least restrictive environment while continuing to have their needs met. The dollars associated with this service are for 12 months. The change would have a July 2014 effective date.
31	09	Enhancement of Services	QSP Oversight Pilot Project	The HCBS Qualified Service Provider (QSP) Oversight pilot would allow additional support and monitoring for the individual QSPs who enroll through the Department of Human Services. Through the current auditing and complaint log, it is apparent that QSPs could benefit by having a trained professional visit with them in the client's home as they are providing care. This would be an opportunity to determine if the care being given is appropriate and meets the Health, Welfare, and Safety expectations of CMS and the Department of Human Services. This pilot project will be in Region 3 due to the highest number of QSPs located in that region that are currently billing for services. (Region 3 includes Devils Lake, Belcourt, Cando, Dunseith, Fort Totten, Langdon and Rolla.) The dollars associated with this pilot are for 12 months. The change would have a July 2014 effective date.
32	09	Enhancement of Services	Post Adoption Services	Enhancement to provide services to adoptive families to maintain adoptive placements and permanence; thus avoiding adoption disruptions and subsequent re-placement of children in foster care.
33	09	Enhancement of Services	Peer Support	This program is a key part of the recovery effort and an integral part of the tiered case-management in play. In order for this program to be effective and fulfill the plan, there is a need for more resources for this program. This OAR doubles the current funding in each region. Currently small centers received 25,000 and large centers received 50,000.

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34	09	Enhancement of Services	Robinson Recovery Center - Sharehouse	Robinson is a forty bed (thirty male and ten female) long-term residential treatment facility for the treatment of those addicted to meth or other controlled substances. Nearly 60% of patients are taking a prescribed psychotropic medication. 60-70% of the residents also have a mental illness. Due to changes in clientele, a psychiatric nurse and family therapy are needed in addition to funding for medications. The request is for \$148,342 per year.
35	10	Building Demolition	Demolish Refectory Building - Developmental Center	The Refectory Building should be taken down before it collapses.
36	10	Building Demolition	Demolish Pleasant View Building - Developmental Center	The Pleasant View building is one of the older buildings on campus. It would need major repairs to be usable and therefore it is more appropriate to demolish the building.