Chairman Delzer, members of the committee, I am JoAnne Hoesel, Program and Policy Cabinet Lead for the Department of Human Services, I appear before you to provide information regarding Section 9 of Senate Bill No. 2012.

The Department has been addressing many issues regarding Early Intervention services in North Dakota, and this study provides an opportunity to build on those efforts.

The number of families served has been expanding. Although the criteria for eligibility has not changed; increased childfind activities, new federal requirements regarding children less than three years of age involved in a protective services investigation, and medical advances have all had an impact on the child needing services. The Department would suggest consideration be given to study the percentage of children being served. Although the criterion is the same across the state, the percentage served by region varies from approximately two percent to over six percent. To adequately serve these families we also need to determine if the current staffing levels for Developmental Disabilities Case Management and Infant Development are sufficient.

In the last Part C Application for funding that North Dakota submitted to the federal Department of Education, funding for a consultant to assist the Department to study the funding structure for Infant Development programs was requested. The current retrospective rate setting system was designed for providers that serve consumers in facility based
environments whereas the current system supports families and children in an individualized manner in communities. The Department has had meetings with Infant Development providers to explore alternate funding structures.

Because a Medicaid Home and Community-Based Waiver is the major funding source for early intervention and Part C is currently utilized to fund a very small portion of those services, the Department would like the consultant to examine North Dakota’s method of determining our maintenance of effort level, to determine if additional Part C funds could be used to support direct services. On July 10, 2007 the Department learned that North Dakota’s Part C Application was approved including $30,000 for a consultant to review Part C fiscal management procedures and recommend refinements. We have been in contact with federal funded early intervention technical assistance centers to identify consultants with the appropriate expertise.

In order for early intervention services to meet the needs of families across North Dakota, the Department must work collaboratively with a number of other agencies. The Governor appointed advisory committee for early intervention (North Dakota Interagency Coordinating Council) recently reviewed the current Memorandums of Understanding and charged the Department of Human Services and the Department of Public Instruction to meet with potential partners for an expanded Memorandum of Understanding and present a work plan to the advisory committee at their September 2007 meeting.

We look forward to working with this committee to address the issues identified. This concludes my testimony.