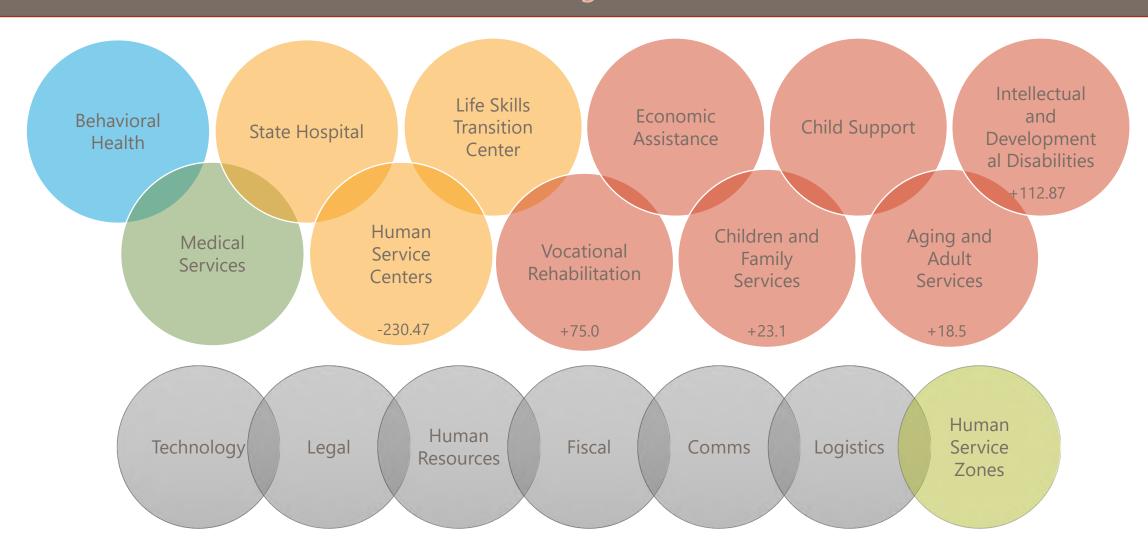


House Bill 1012 | Program & Policy Budget Overview

Senate Appropriations
Senator Ray Holmberg, Chairman

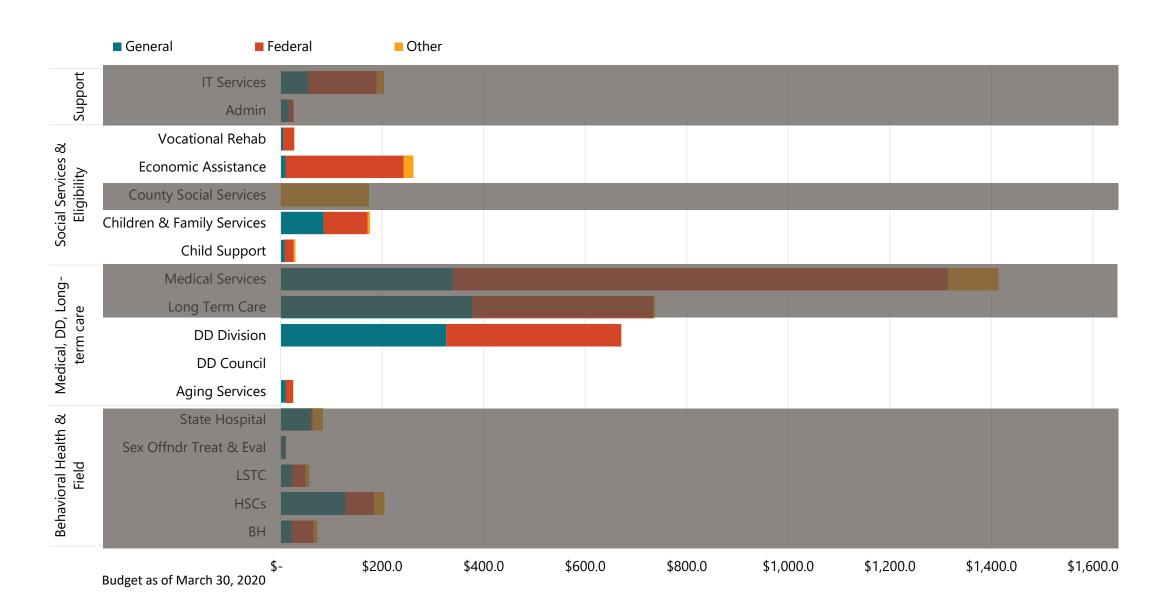
ND DEPARTMENT OF HUMAN SERVICES

Helping North Dakotans realize their potential through targeted, evidence-based interventions that deliver meaningful results



2019-2021 LEGISLATIVELY APPROVED BUDGET

Total budget (millions) by division



Helping people realize their potential Who We Serve



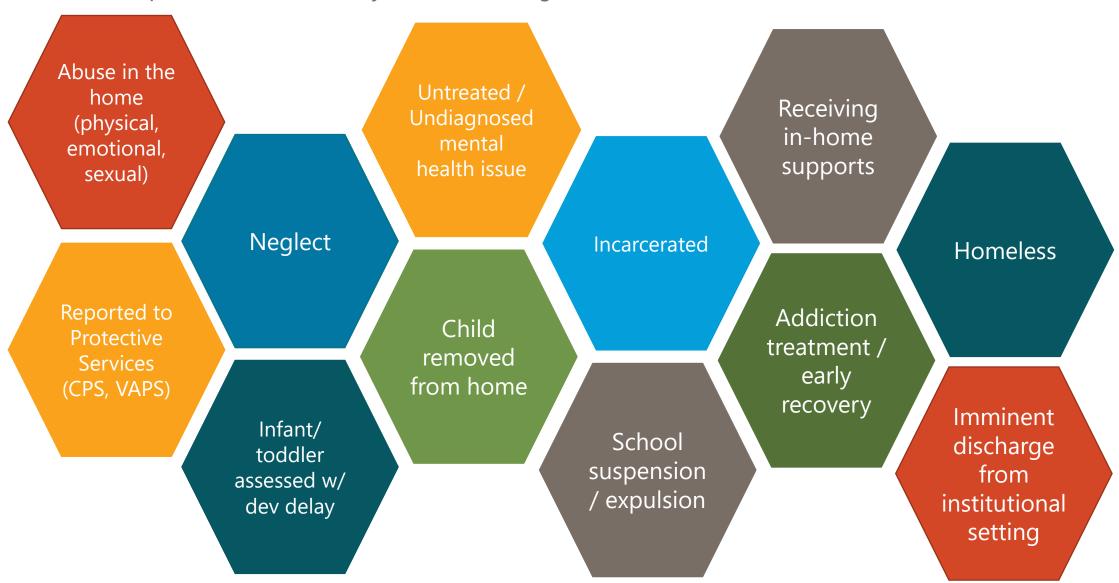
Who we serve: Who's At risk of disruption/instability?

Individuals who have not previously engaged with a human service provider or who may be experiencing an instability-triggering event



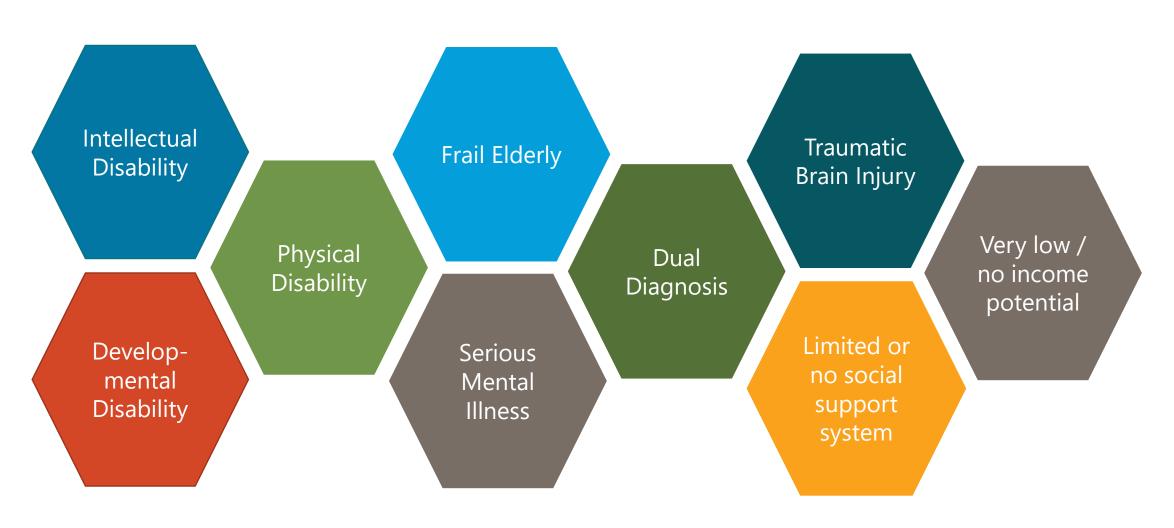
Who we serve: Who needs help restoring stability?

Individuals who have engaged with services provided by the Zones, DHS and/or private providers or contracted partners, but who may not have a long-term need



Who we serve: Who needs supportive services to live as independently as possible?

Individuals who have a chronic health and/or disabling condition that will indicate long-term service needs



Human Services is the infrastructure for wellbeing

Prevention | Early Intervention | Crisis Intervention | Long term supports



Building Stability by Avoiding Crisis

Helping people navigate difficult times

DISRUPTION

When families experience disruption, their ability to be a fully engaged, productive member of the community and the workforce is compromised.

...CAN LEAD TO CRISIS

In helping families avoid the escalation of instability to crisis, we are also avoiding unnecessary spending in the deepest, and often most expensive, components of the existing human service system.

SERVICES SUPPORT STABILITY

Intervening early will both save money and strengthen families. It will allow us to reserve deep end services for the times when they are truly needed, and help people avoid deepening their journey into crisis by diverting from institutions, keeping families together, and helping and sure that people have a place to call home.



What do we need to do to help someone find their way through a situation that threatens to push them into crisis, and instead help them find their way to stability.



DHS 2021-2025 KEY PRIORITIES



Strong Stable Families

- Maintain family connections
- Improve stability and prevent crises
- Promote and support recovery and well-being



Early Childhood Experiences

- Support workforce needs with improved access to childcare
- Help kids realize their potential with top quality early experiences
- Align programs for maximum return on investment



Services Closer to Home

- Create pathways that help people access the right service at the right time
- Engage proactively with providers to expand access to services



Efficiency Through Redesign

- Embrace process redesign to find efficiencies in our work
- Leverage technology to support greater efficiency, quality and customer service



High-Performing Team

- Develop a One DHS Team culture
- Engage team with opportunities for learning and development
- Implement fiscal scorecard to drive efficiency and effectiveness

Reinforce the Foundations of Well-being

Economic Health

Behavioral Health

Physical Health

Foundations of Wellbeing are Interconnected



The stability that comes from good **economic** health can **improve behavioral** health. The stability that comes from good **physical** and **behavioral** health **enables economic** health.

What do we need to do to help someone make an informed choice about how they may want to access services in the most integrated setting that is right for them?



KEY CONCEPTS

Most Integrated Setting

Informed Choice

Diversion

Transition

Level of Care

Stability

Evidence Based

Redesign

Quality

Person-centered

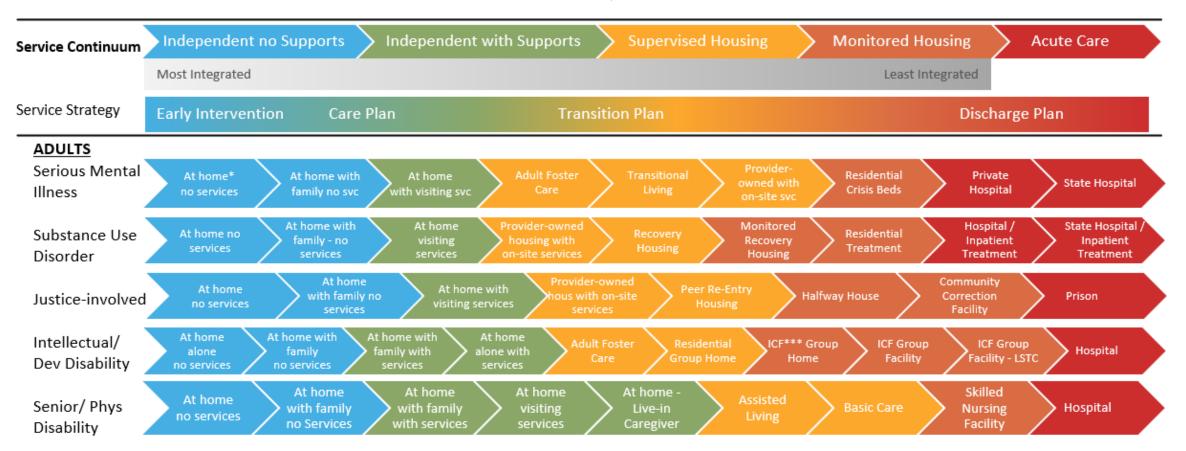


What do we need to do to make sure we are delivering the right service in the right place at the right time?



The Service Continuum - Adults

A critical concept defined



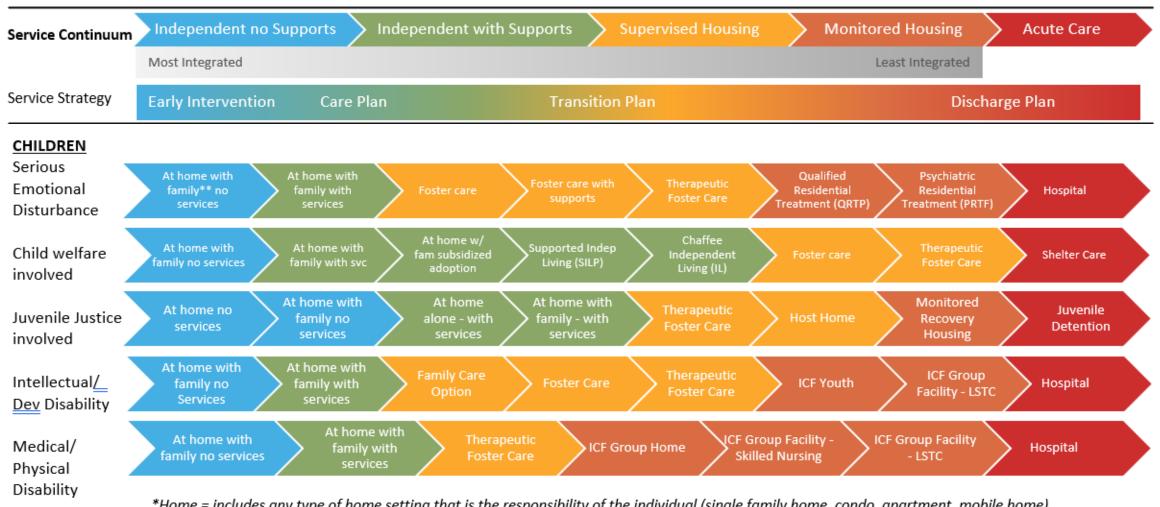
^{*}Home = includes any type of home setting that is the responsibility of the individual (single family home, condo, apartment, mobile home)

^{**}Family = includes birth family, kin-caregiver, adopted family

^{***}ICF = Intermediate Care Facility. ICF Group Home (less than 8 people); ICF Group Facility (8 or more people); ICF LSTC (Life Skills Transition Center)

The Service Continuum - Children

Illustrating the work of transition and diversion



^{*}Home = includes any type of home setting that is the responsibility of the individual (single family home, condo, apartment, mobile home)

^{**}Family = includes birth family, kin-caregiver, adopted family

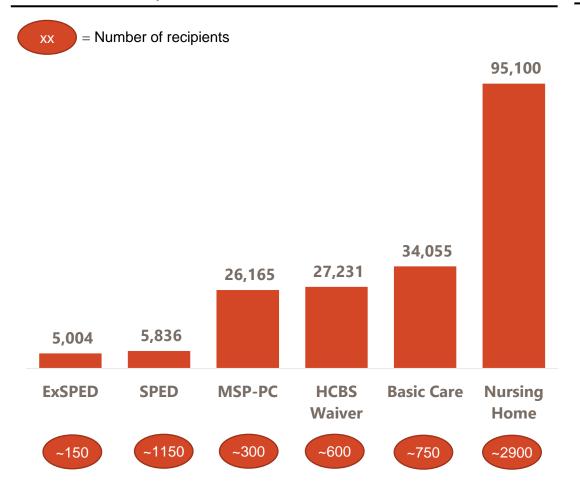
^{***}ICF = Intermediate Care Facility. ICF Group Home (less than 8 people); ICF Group Facility (8 or more people); ICF LSTC (Life Skills Transition Center)

DHS FUNDED LONG TERM CARE AND HCBS SERVICES

Total cost by type of service

Cost Per Recipient Per Year

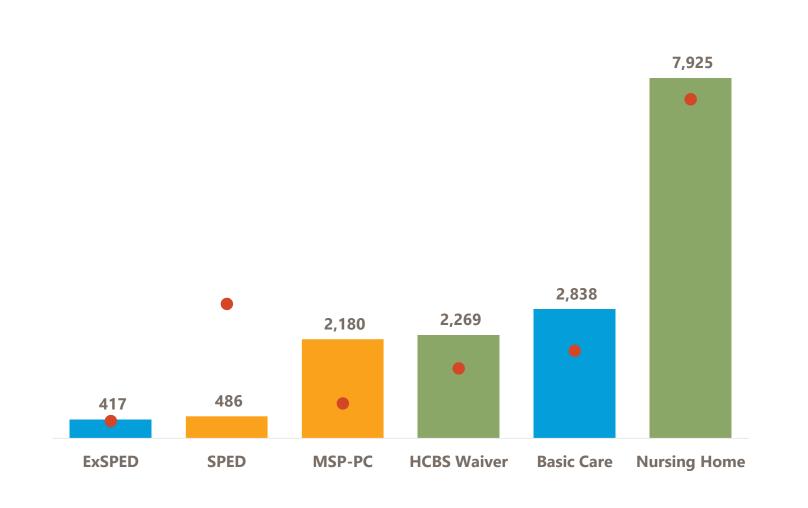
Cost paid by state by service in \$ in State Fiscal Year 2020



Program Descriptions / Detail

- Service Payments for the Elderly and Disabled (SPED): Provides services for people who are older or physically disabled, have limited assets, and who have difficulty completing tasks that enable them to live independently at home.
- Expanded SPED (Ex-SPED): Pays for inhome and community-based services for people who would otherwise receive care in a licensed basic care facility.
- Home and community-based services (HCBS) waiver: This waiver from the federal government allows the state to use Medicaid funds to provide services enabling eligible individuals who would otherwise require nursing home services to remain in their homes or communities.
- Medicaid State Plan personal care (MSP-PC): Personal care services available under the Medicaid state plan and enable persons with disabilities or chronic conditions accomplish tasks they would normally do for themselves if they did not have a disability.
- Basic Care: Room and board and personal care services for persons eligible for Medicaid.

AGING & ADULT SERVICES Cost per month per person per type of service – SFY20



Types of Care with same criteria for eligibility (level of care, assets, income)

Expanded SPED = Basic Care

\$417 / mo v \$2,838 / mo

DIFFERENCE IN COST: \$2,421

DIFFERENCE IN SVC:

Rent, Meals, Supervision, Medication Administration

HCBS Waiver = Nursing Home

\$2,269 / mo v \$7,925 / mo

DIFFERENCE IN COST: \$5,656

DIFFERENCE IN SVC:

Rent, Meals, Supervision, 24/7 Nursing

DEVELOPMENTAL DISABILITIES Cost per month per person per type of service – SFY20

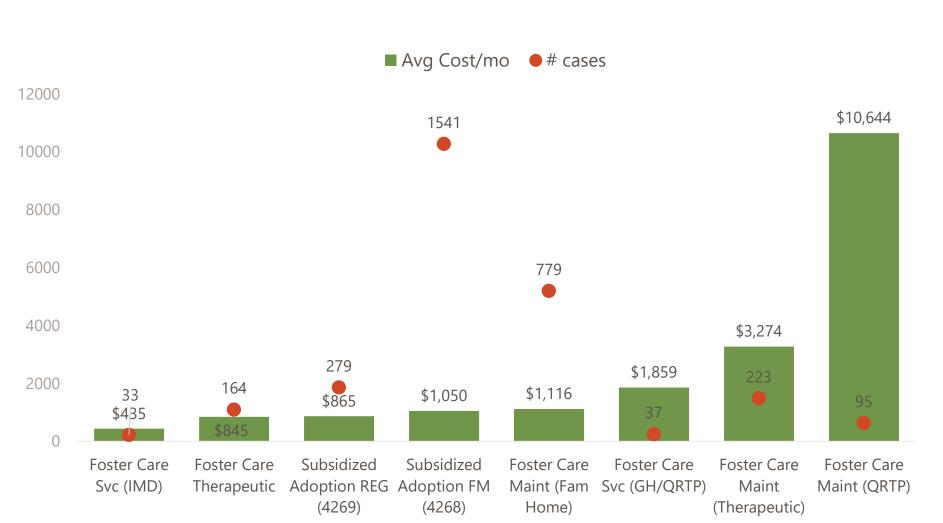








CHILDREN & FAMILY SERVICES Cost per month per person per type of service – SFY20









CHILDREN AND FAMILY SERVICES Program Purpose

The purpose of the Children and Family Services division is to help families who are struggling avoid disruption by having access to the help they need to build stability and well-being together.



CHILDREN AND FAMILY SERVICES What we do

Safety

- Child protective services
- Child fatality review panel
- State Child protection team
- Parent Resource Centers
- Alliance for Children's Justice

Permanency

- Foster Care
- Adoption
- Guardianships
- Interstate compacts for the placement of children
- Unaccompanied minor services
- Independent living services
- Licensing for QRTPs and LCPAs

Well-being

- Family preservation services
- Intensive In-home therapy
- Nurturing Parent programs
- Parent aides
- In-home case management
- Respite care
- Family centered engagement

Early Childhood

- Early childhood coaching and quality
- Child care licensing
- Home Visiting
- Early childhood inclusion supports

CHILDREN AND FAMILY SERVICES

In ND child welfare services are delivered by local, state, tribal and private providers using both federal and state funds

Dept of Human Services

- Human Service Centers
- Crisis teams
- Intensive In-home services (therapy & treatment, skills training, behavior mod)
- Targeted case management
- Children & Family Services
- Training and coaching of field staff
- Oversee quality service delivery
- Administration of policy

Private Human Service Providers

- Safe shelter for crisis
- Human trafficking supports and safe beds
- Unaccompanied minor services
- Foster homes, including therapeutic
- Targeted case management

Tribal Social Services

- FRAME entry and foster eligibility determinations
- Joint practice model and ICWA training
- Native American Training Institute supports (training, billing, svc delivery)
- New FMAP service contracting
- IV-E agreements boost access to funding

Human Service Zones

- Assess present and impending danger
- Safety planning
- Case management
- Assess and build parent capacities
- Provide safe supports for children and families
- Refer and broker services needed for families
- In home supports
- Parent aides
- License foster homes
- Intake for child abuse and neglect reports



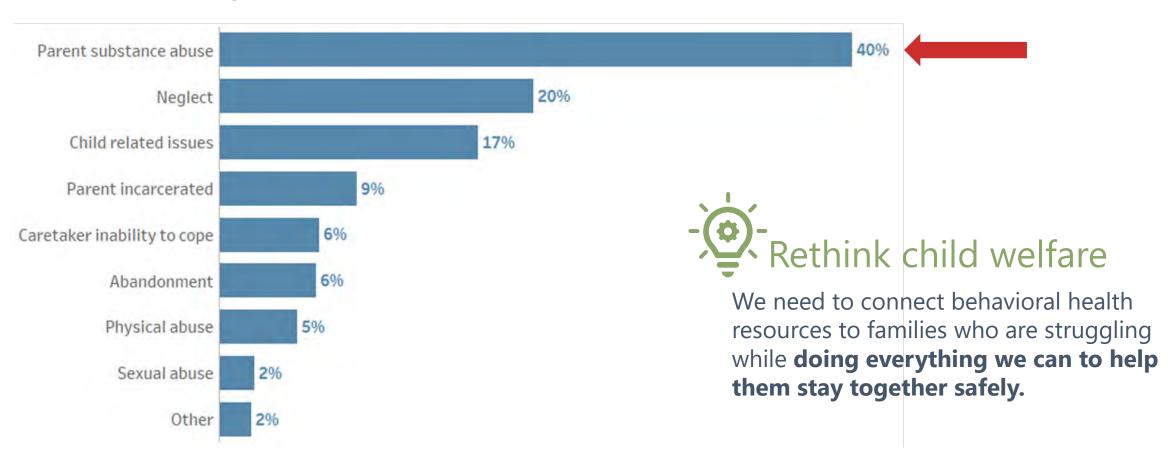
What's driving us

- Abuse and neglect related to substance abuse in families
- Increasing challenging behaviors in K-3
- Adolescent suicides
- Inconsistencies in child protection practices
- Delays in completion of child safety assessments
- Clear return on investments made early

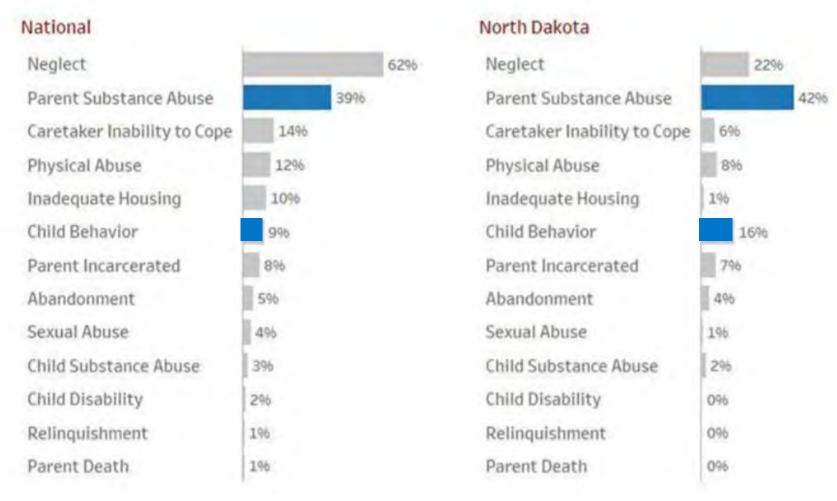
Substance abuse and unaddressed mental health needs are major de-stabilizing forces in families

Removal reasons

Percent of children entering care for each removal reason, FY2019

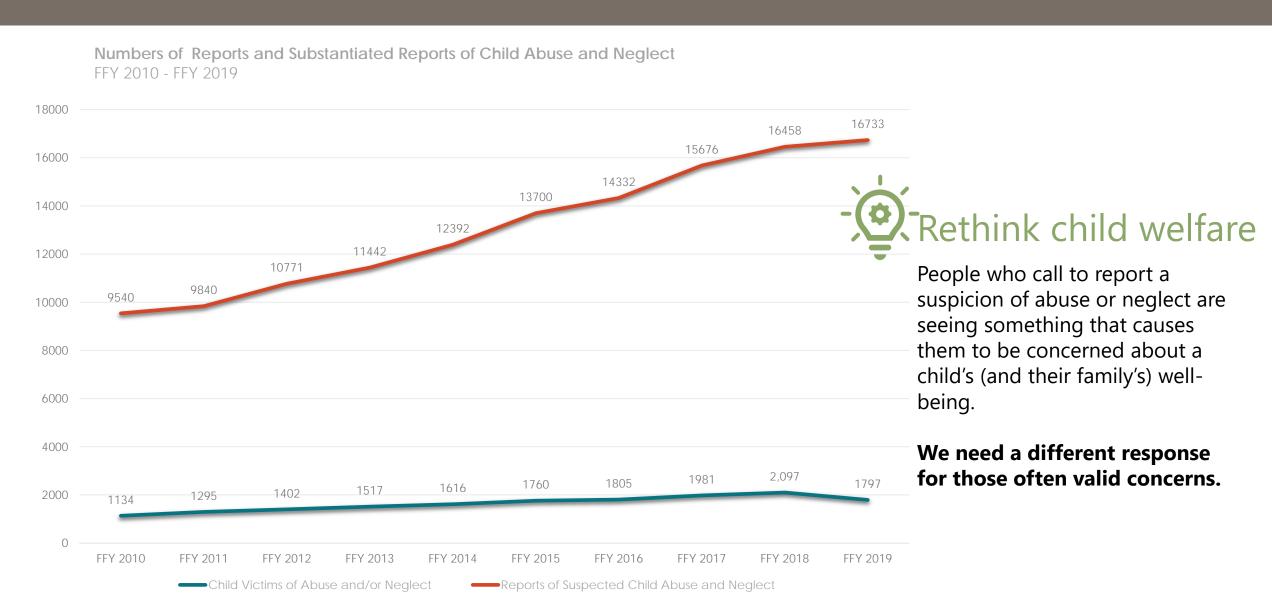


Parental Substance Abuse and Child Behavior are cited more often as reasons for removal in North Dakota than in the U.S.

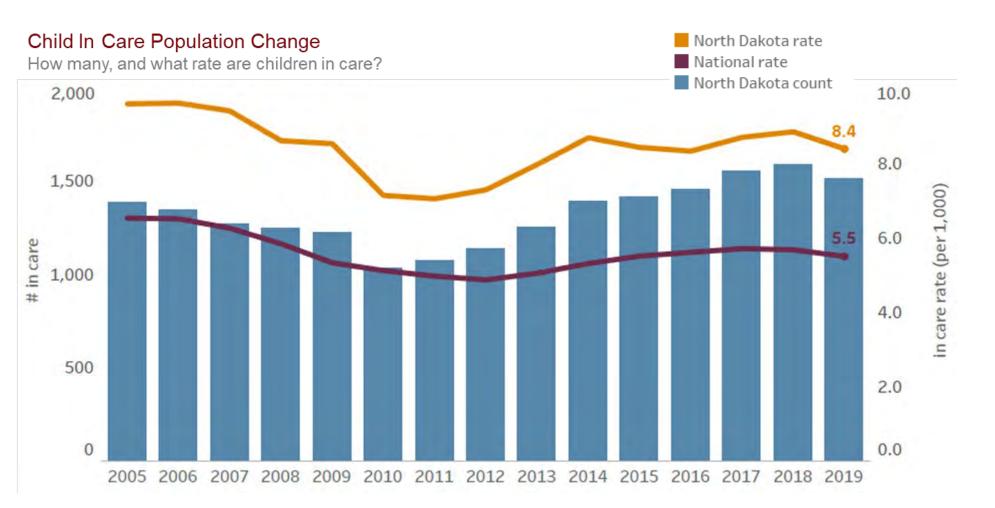


Data source: FFY 2017 state-submitted AFCARS data. Denotes percent of children entering foster care for each removal reason; multiple reasons may be selected for a single child.

10-12 percent of child abuse/neglect calls are ultimately substantiated as abuse/neglect



The rates at which children are placed in foster care is 52 percent higher in North Dakota than in the U.S. overall



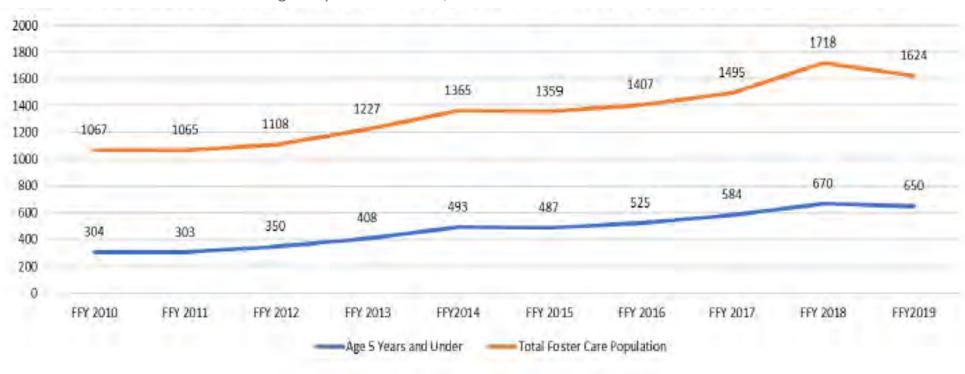
Rethink child welfare - - -

We need to shift resources from removal to family strengthening and preservation.

The percentage of children in foster care under age 5 has risen steadily from 28% to 40% since 2010

The number of children in foster care in ND has risen by 52% over the last 10 years

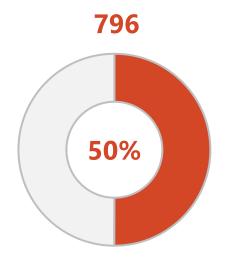
ND Foster Care census and those age 54 years and under, FFY 2010-2019



Rethink child welfare

Early interventions with young families are they key to reducing foster care placement for the youngest children.

CHILDREN & FAMILY SERVICES Foster Care in ND – 2020 Snapshot

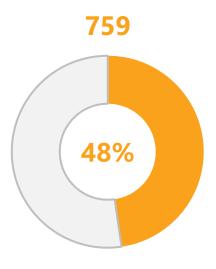


1 in 2 age 0-7

Half of the 1,591 children in foster care in North Dakota are age 7 or younger. (2020) 34%

Intense level of care

Of the 189 kids receiving therapeutic foster care in 2020, 65 (34%) were younger than 7 years old.



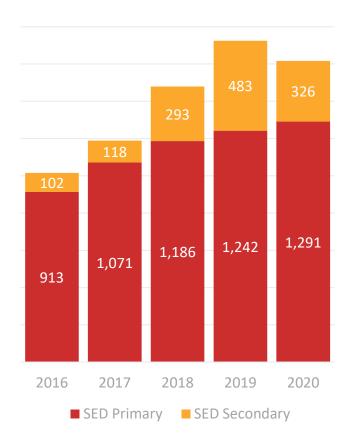
5x more likely

Native American children make up 48% of the total number of children in foster care in ND (759 of 1,591).

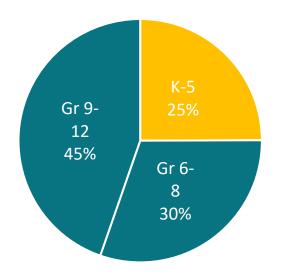
Native American children make up 8.7% of kids under age 18 in ND.

Trends in services for emotional disturbance, age of incidents and rates of chronic absence point to increasing behavioral health needs for kids and families

Students receiving services for "emotional disturbance" in Grades K-12



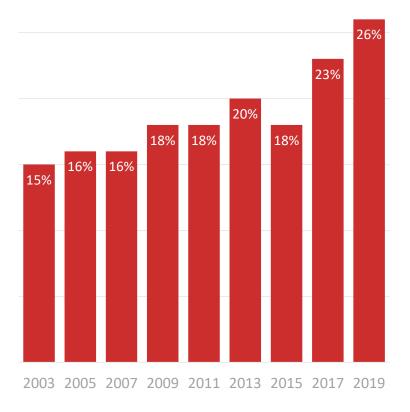
"Incidents" in school setting by grade level (2019-20 school year)

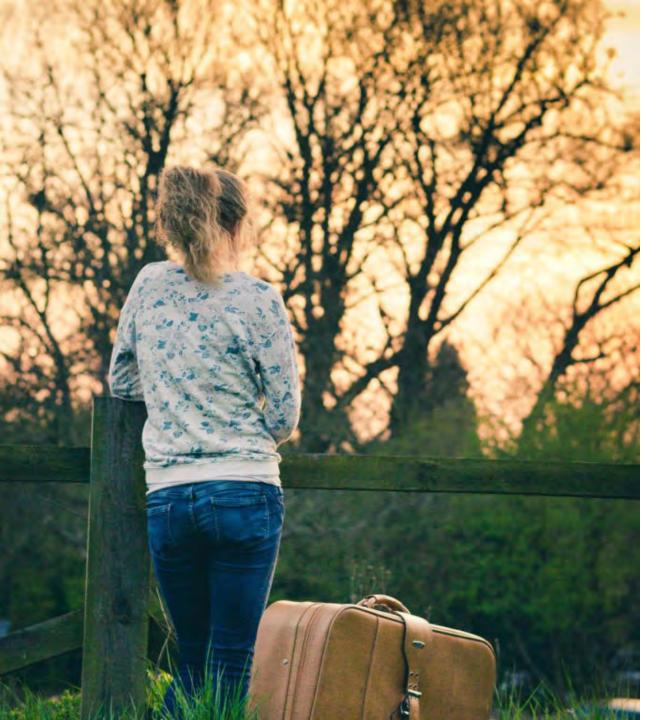


Rethink child welfare
Supporting behavioral health

Supporting behavioral health needs in families can prevent disruptions at home <u>and</u> in school.

4th graders counted as chronically absent by academic year





"Everyone would agree that children should not be exposed to abuse or neglect.

"The process of being removed from one's home and placed in foster care has consequences as well and can have negative effects that last a lifetime."

Building Stability by Avoiding Crisis

Helping people navigate difficult times

DISRUPTION

When families experience disruption, their ability to be a fully engaged, productive member of the community and the workforce is compromised.

...CAN LEAD TO CRISIS

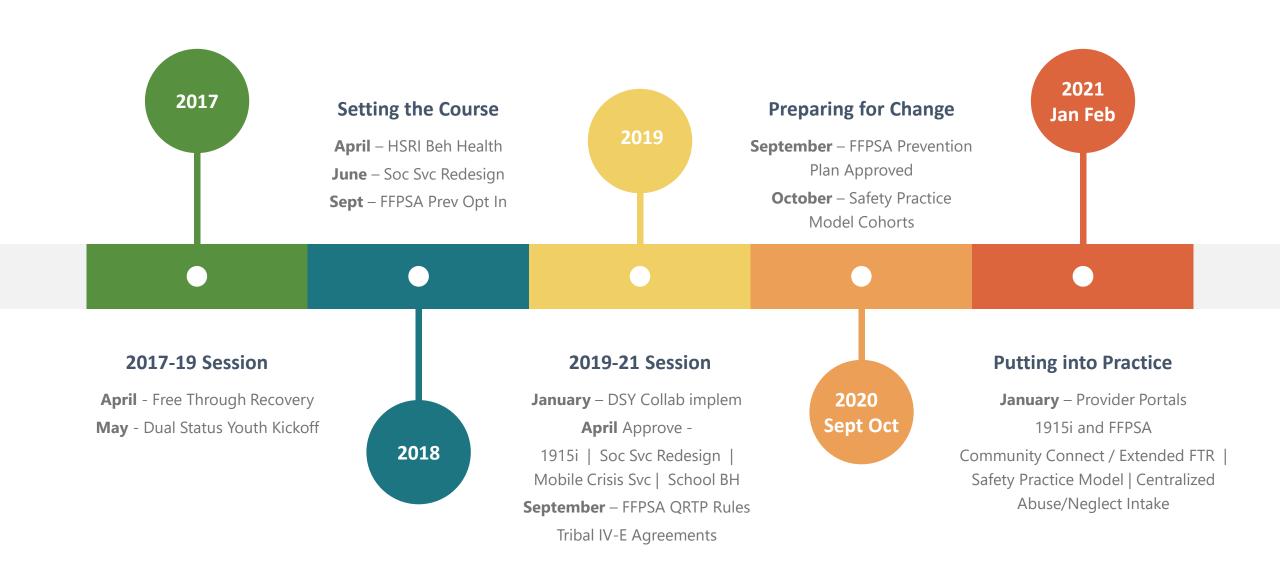
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Intervening early will both save money and strengthen families. It will allow us to reserve deep end services for the times when they are truly needed, and help people avoid deepening their journey into crisis by diverting from institutions, keeping families together, and helping and sure that people have a place to call home.

Our Journey Toward Building Stronger Families

Redefining Child Safety and Wellbeing through a Two-Gen Lens





"North Dakota's Child Welfare
System is focusing on efforts to
ensure availability and access
to a broad, flexible array of
effective community-based
services and supports

for children and their families

that address their emotional, social, educational and physical needs,

including traditional and nontraditional services as well as natural and informal supports."

> ND 2020-2024 Title IV-E Prevention Services and Programs Plan

Children considered a "Candidate for Foster Care"

Have access to



Under 18 years of age

Significant interference or limitations of the child's functioning in home, school or community

Child is pregnant or parenting a child(ren)

Siblings in foster care

Inadequate supervision based on family and youth circumstances

Currently involved in 2 or more community services or agencies

DSM diagnosis for emotional, behavioral, or mental health disorder

Child whose adoption or guardianship arrangement is at risk of disruption

Prior out of home placement

Reunification has occurred

Difficulties are interfering or limiting achievement or maintenance in 1 or more developmentally appropriate skills

Parent/custodian/guardian has limited capacity to meet educational, medical, safety or basic needs of child due to parental need* In home parent skill-based programs

Mental health programs

Substance abuse prevention and treatment

Evidence-based Prevention Services

^{*}Parental inability to meet needs of child could be due to parent(s)' behavioral health, incarceration, physical or intellectual disability, debilitating or life-threatening medical needs, homelessness or substandard living conditions, verbalization of no longer wanting their child, or substance exposed newborns.

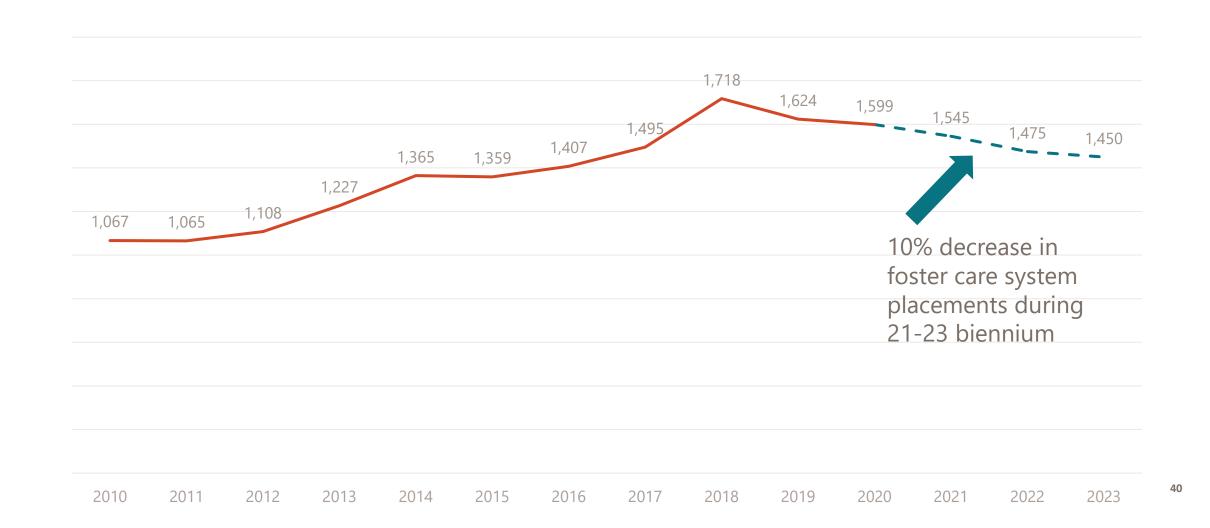


Our goals

- Reduce Foster Care Numbers
- Reduce Institutional Placements
- Reduce Out of State Placements
- Reduce Substance Abuse as Abuse/Neglect factor
- Increase Kids receiving evidencebased supports
- Reduce severity of school-based behaviors

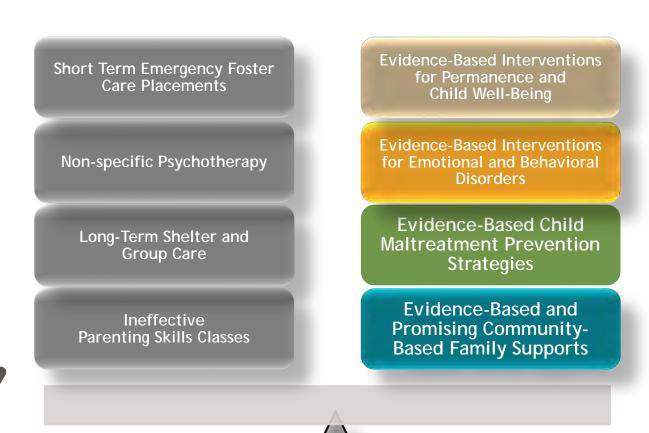
CHILDREN AND FAMILY SERVICES

The 21-23 budget anticipates a modest but steady reduction in foster care and residential placements



SHIFTING RESOURCES TO SUPPORT WHAT RESEARCH INDICATES WILL WORK FOR CHILDREN AND FAMILIES

De-scale investment in approaches that are not proven effective







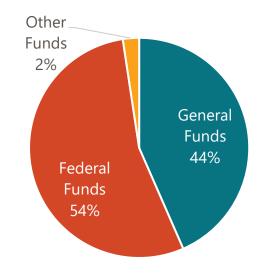
Children & Family Services Budget Summary

19-21 Budget \$181,171,041 41.6 FTE 21-23 Budget (exec) \$165,637,720 41.6 FTE 21-23 Budget (House) \$171,815,985 48.3 FTE

+6.7 FTE and \$6.2 million related to early childhood policy bills (HB1416 and HB1466)

21-23 EBR proposed \$15.5 million decrease in total budget (7% of reduction is from federal funds)

- Reduce foster care and residential placements, accomplished in part by investing in evidence-based parent skill building and mental health services to families
- Implement equity in payments for services to families (QRTP, subsidized adoption, targeted case mgmt)
- Technology infrastructure investments in early childhood integrated data system and replacement of child welfare technology platform



DEVELOPMENTAL DISABILITIES Program Purpose

Maximize community inclusion, independence and self-sufficiency to prevent institutionalization, and to enable individuals to transition from institutions to community living.



DEVELOPMENTAL DISABILITIES What we do

Case Management

- Case management provided by DD Program Managers to individuals and families
- Eligibility review
- Person centered planning
- Service authorization

Administration

- Provider licensing
- Training & TA
- PolicyDevelopment
- ContractManagement
- Provider Enrollment
- Part C and Infant Development

Program Integrity

- Regulatory compliance
- Provider Audits
- Case Reviews
- Federal & State
 Audits
- Quality Assurance

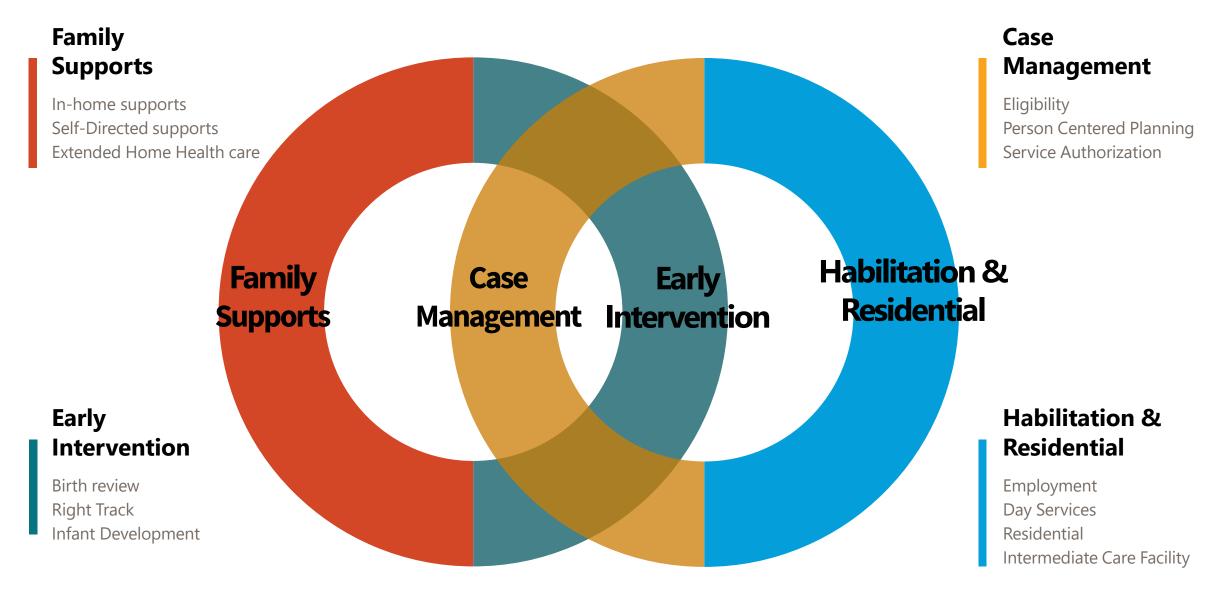
Partnerships

- North Dakota Interagency Coordinating Council
- StateRehabilitationCouncil
- Transition Task
 Force
- Money Follows the Person

DEVELOPMENTAL DISABILITIES Service Array by Funding Authority

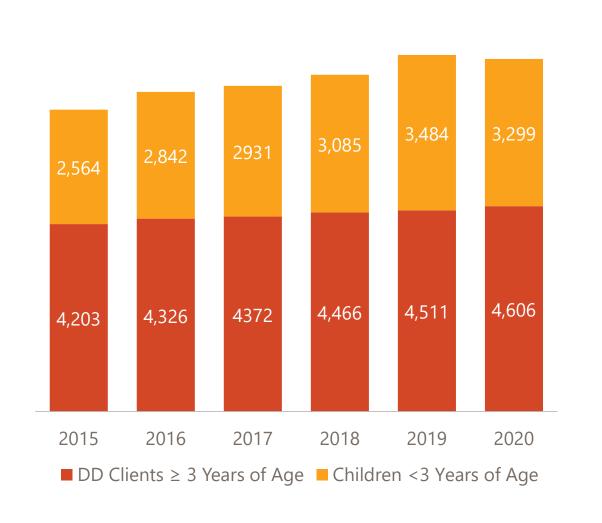


Case management and early intervention are a key intersection within the continuum of services available to people with Developmental Disabilities

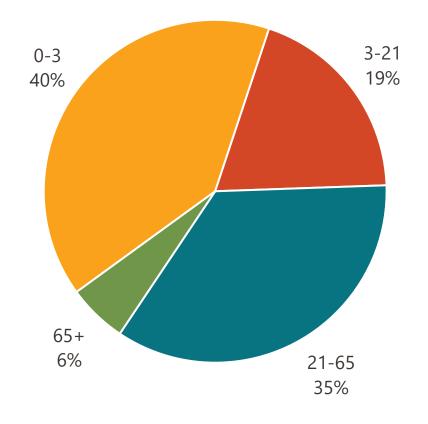


DEVELOPMENTAL DISABILITIES

The majority of individuals receiving case management services are under age 21

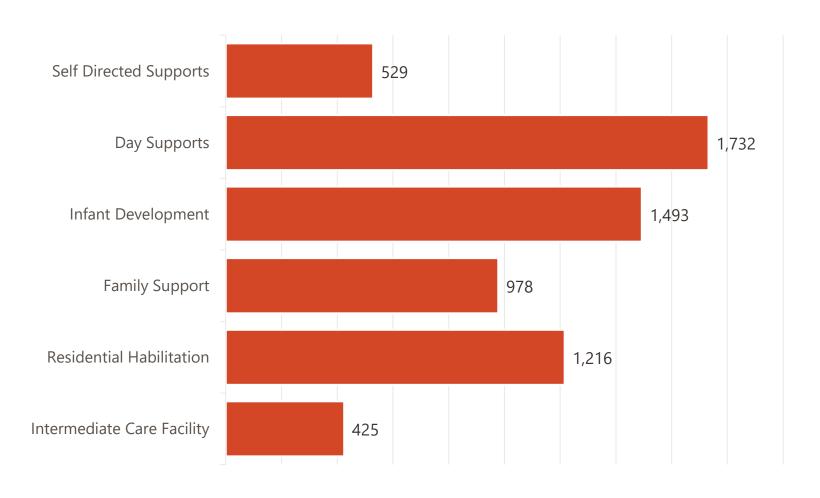


Age of DD clients receiving program management SFY20



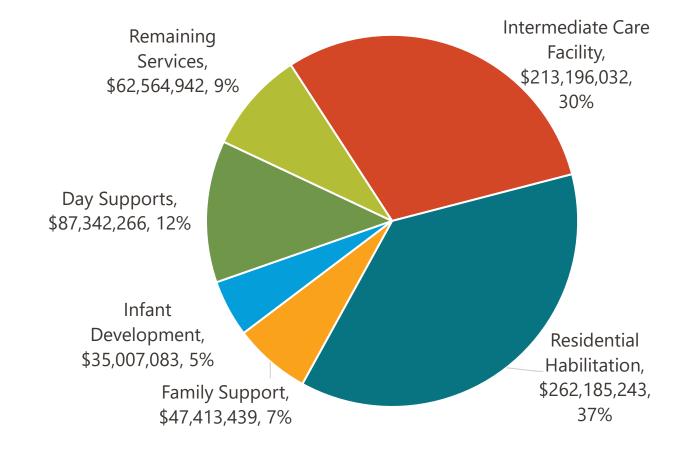
DEVELOPMENTAL DISABILITIES Individuals receiving 1915(c) waivered services

ND's 1915(c) waivered services for people with a range of developmental disabilities are coordinated by 120 DD program managers and delivered by 38 licensed providers who served 7,900 people ages 0-90+ in 2020



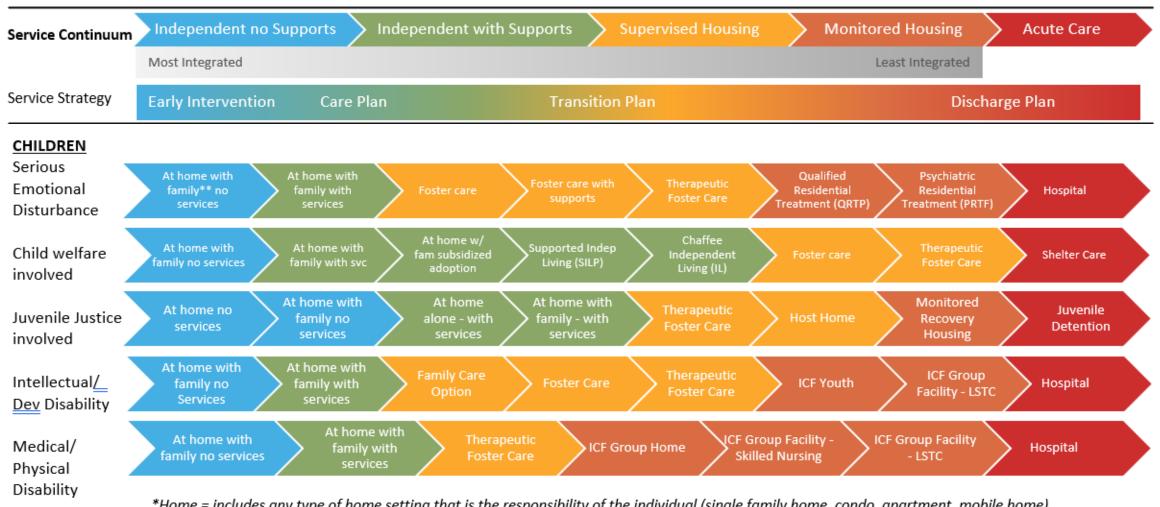
DEVELOPMENTAL DISABILITIES Proposed 21-23 budget by type of service

67% of the total proposed 21/23 budget for DD services will support residential care for people with developmental disabilities



The Service Continuum - Children

Illustrating the work of transition and diversion

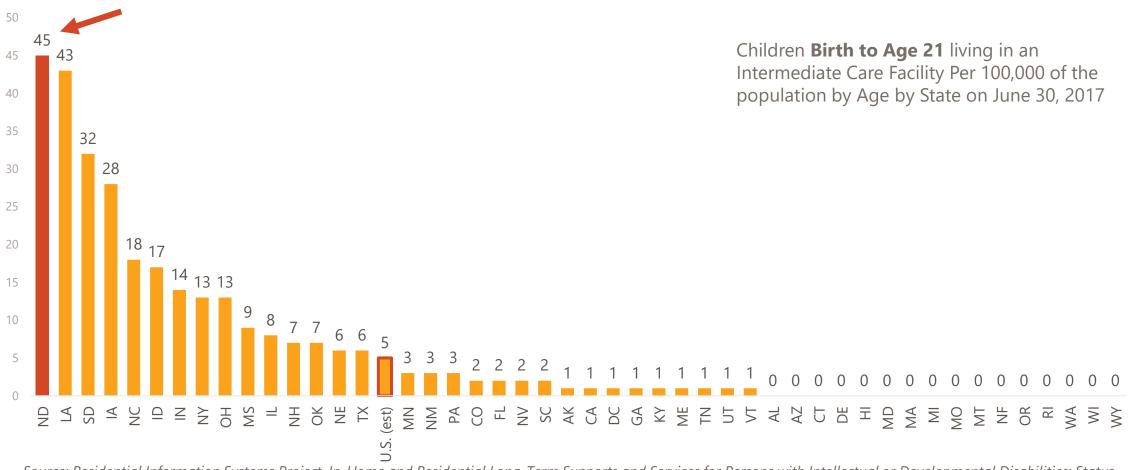


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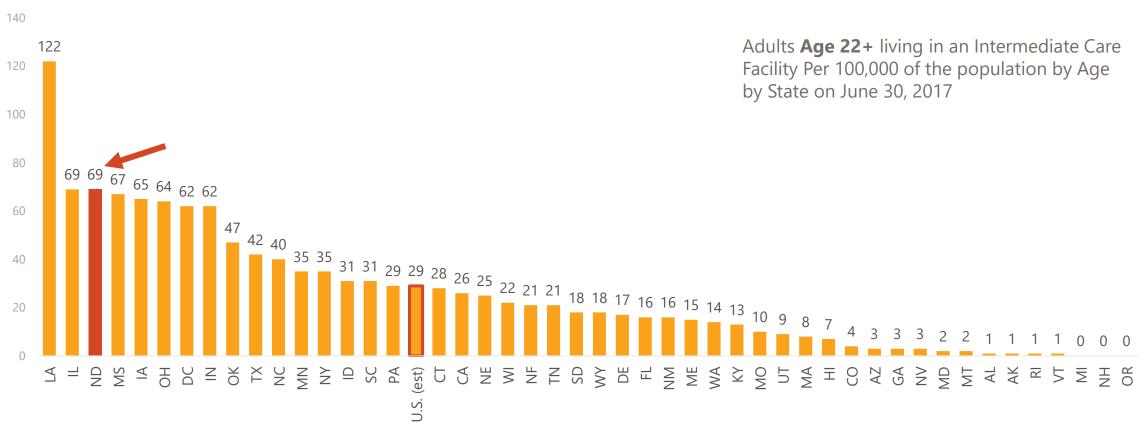
^{***}ICF = Intermediate Care Facility. ICF Group Home (less than 8 people); ICF Group Facility (8 or more people); ICF LSTC (Life Skills Transition Center)

ND HAS THE HIGHEST RATE OF CHILDREN LIVING IN AN INTERMEDIATE CARE FACILITY (ICF)



Source: Residential Information Systems Project. In-Home and Residential Long-Term Supports and Services for Persons with Intellectual or Developmental Disabilities: Status and Trends 2017. NOTE: Virginia, Kansas, Arkansas and West Virginia not reporting.

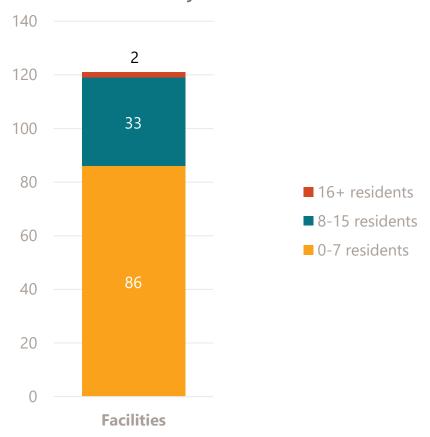
ND HAS THE 3RD HIGHEST RATE OF ADULTS LIVING IN AN INTERMEDIATE CARE FACILITY (ICF)



Source: Residential Information Systems Project. In-Home and Residential Long-Term Supports and Services for Persons with Intellectual or Developmental Disabilities: Status and Trends 2017. NOTE: Virginia, Kansas, Arkansas and West Virginia not reporting.

45% OF ND LICENSED DD RESIDENTIAL BEDS ARE IN FACILITIES THAT SERVE 8 OR MORE PEOPLE

of Licensed Residential DD Facilities by # of Residents



of Licensed Residential Beds by Size of facility





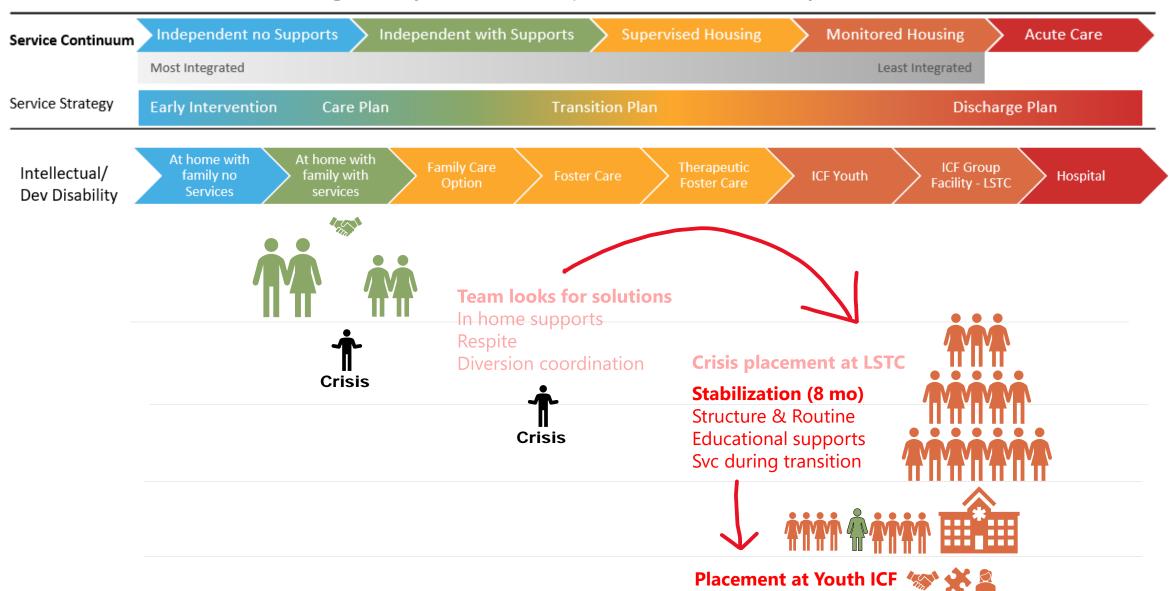
What's Driving Us?

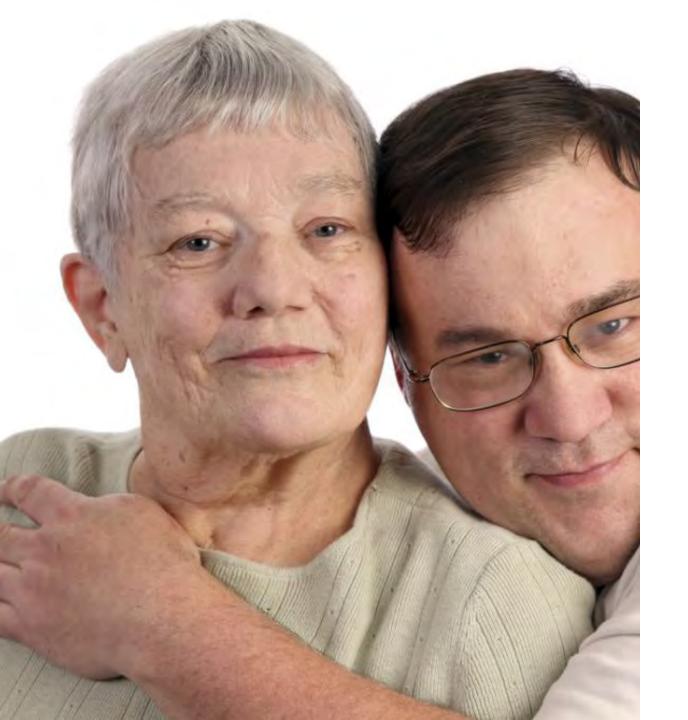
In North Dakota, people have the opportunity to learn about their options and make an informed choice about the most integrated setting that is right for them.

Our system partners work together to create robust options for non-institutional living, optimizing autonomy, choice, self-direction and community integration.

A young girl is struggling. So is her family. What do we do?

Understanding how systems can help families find stability amidst crisis



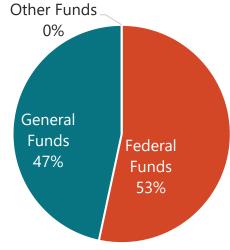


Developmental Disabilities Budget Summary

19-21 Budget \$689,016,522 125.87 FTE 21-23 Budget (exec) \$739,269,819 125.87 FTE 21-23 Budget (House)\$739,217,501 125.87 FTE

21-23 EBR proposed \$50.3 million increase in total budget

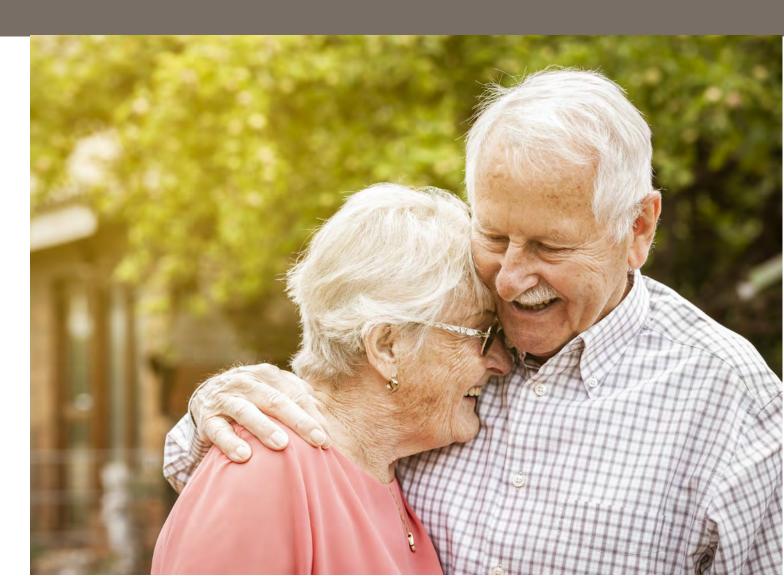
- Cost to continue services
- Diversion/Transition initiative with LSTC
- Provider inflation
- Payment system adjustments for ICF and Residential Group Homes
- Elimination of supplemental recreational and Section 11 grants
- Transitioning accreditation to provider program cost
- Operating efficiencies related to travel and occupancy



AGING & ADULT SERVICES Program Purpose

Help older adults and individuals with physical disabilities to remain in their own homes and communities.

Protect the health, safety, welfare and rights of residents of long-term care settings and vulnerable adults in the community.



AGING & ADULT SERVICES What we do

Aging & Disability Resource Link (ADRL)

- Toll free resource line for people with questions about how to access services
- Centralized intake for HCBS services
- Proactive in-reach and out-reach to build awareness of HCBS options

HCBS Case Management

- HCBS case management provided to consumers
- Eligibility review
- Care Team planning
- Service authorization

Protective Services

- Vulnerable Adult
 Protective
 Services delivered
 statewide
- Ombudsman services for long term care residents

Senior Nutrition & Community Supports

- Administration of Older Americans Act
- Senior nutrition program
- Support for Family Caregivers
- Lifespan Respite grant

Administration HCBS and Partnerships

- HCBS 1915(c)
 Medicaid waiver
- Medicaid State
 Plan Personal
 Care
- SPED / Expanded SPED
- Money Follows the Person

AGING & ADULT SERVICES Aging & Disability Resource Link (ADRL)

Top 5 Information Requests

- In-home assistance
- Adult protective services
- Medicaid information
- Family caregiver support program (FCSP)
- Older adults/aging Issues

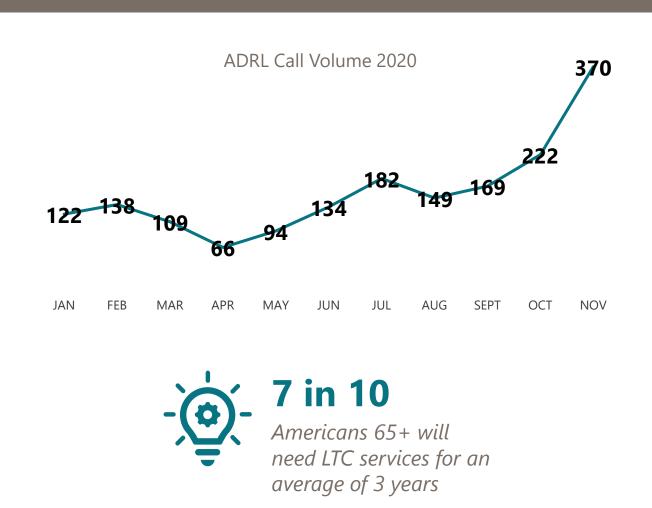
Web 6147

Phone 2,776



AGING & ADULT SERVICES ADRL Centralized Intake

- Process to receive HCBS referrals
- Based on no wrong door (NWD) approach
- Network built to support individuals needing LTC services by simplifying and streamlining access to information and services
- 6 FTE dedicated to centralized intake
- Fully implemented January 2021

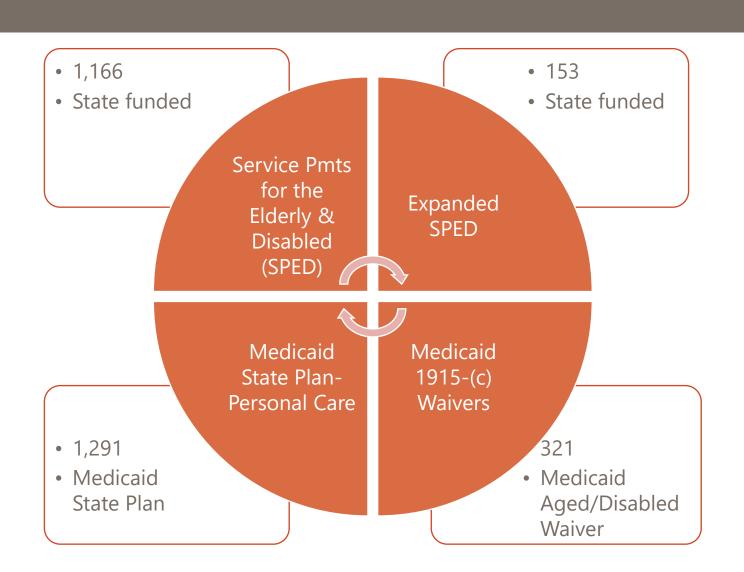


AGING & ADULT SERVICES Home and Community Based Services

2,300

HCBS supported 2,300 unduplicated recipients

- Primarily serves older adults and individuals with physical disabilities
- Recipients must be both functionally and financially eligible
- May have client cost share based on income
- Federal and state funds



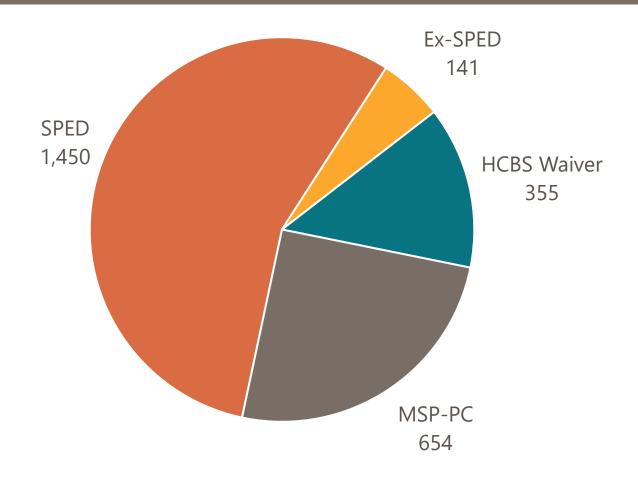
AGING & ADULT SERVICES Types of Support Services available via HCBS

- Adult Day Care
- Adult Foster Care
- Adult Residential Care
- Attendant Care
- Case Management
- Chore Service
- Community Support Services / Residential Habilitation
- Community Transition Services
- Companionship
- Emergency Response System
- Environmental Modification
- Extended Personal Care

- Emergency Response System
- Environmental Modification
- Family Home Care & Family Personal Care
- Home Delivered Meals
- Homemaker Services
- Non-Medical Transportation
- Personal Care Services
- Respite Care
- Specialized Equipment
- Supervision
- Supported Employment
- Transitional Care

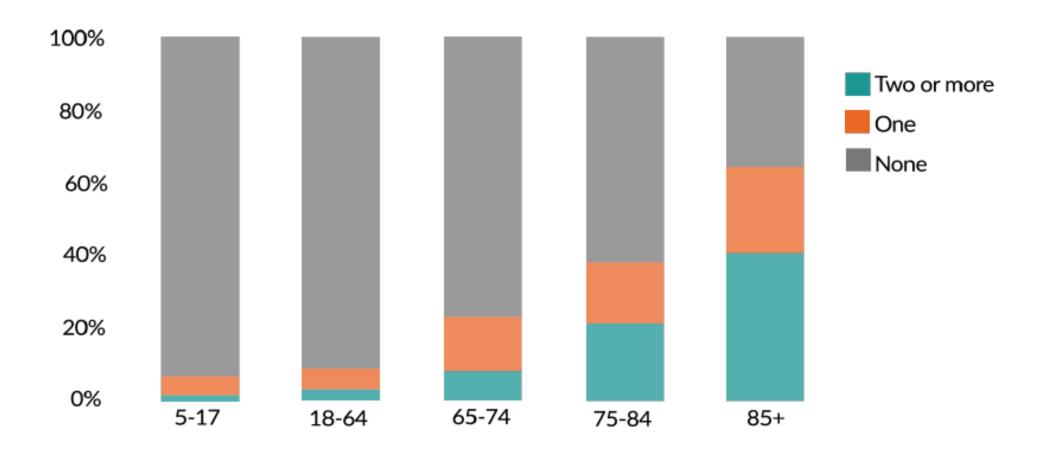
AGING & ADULT SERVICES Individuals receiving HCBS services (Nov 2020)

ND's HCBS for older adults and people with physical disabilities are coordinated by 64 HCBS case managers and delivered by 1,149 **Qualified Service** Providers (QSPs) who served 2,300 people ages 18-104 in 2020



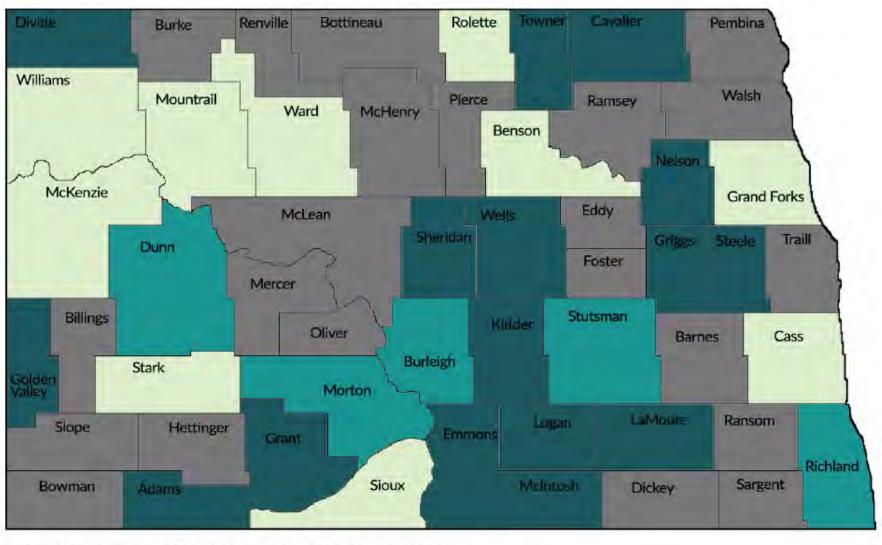
Source: DHS HCBS Caseload Data Nov 2020

Individuals by Detailed Age and Number of Disabilities 18



Source: "The Current State of Housing in North Dakota", 2020, p.18

Percent of Population Age 65+ 19



Less than 15.0% 15.0 to 19.9% 20.0% to 24.9% 25.0% or more

AGING & ADULT SERVICES HCBS Case Managers

64

HCBS case managers who work in 19 Human Service Zones across ND

3,057

Individuals served by HCBS case managers (Nov 2020)

283 & 54

On average, 283 new referrals and 54 new cases opened for HCBS each month



AGING & ADULT SERVICES Vulnerable Adult Protective Service (VAPS)

The program addresses the safety of vulnerable adults who are at-risk of harm due to the presence or threat of abuse, neglect, or exploitation.



AGING & ADULT SERVICES Vulnerable Adult Protective Service (VAPS)

1,695 allegations

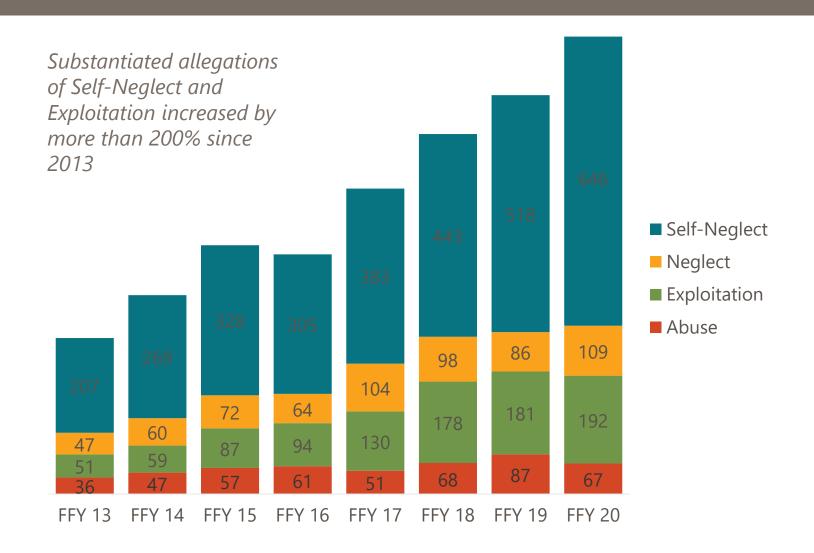


1,418 investigations



1,014 substantiated

Most common allegation: Self Neglect



AGING & ADULT SERVICES Long Term Care Ombudsman

Long-Term Care Ombudsmen are advocates for resident rights. They help protect the quality of life and quality of care of anybody who lives in a nursing home, basic care or an assisted living facility.



AGING & ADULT SERVICES Long Term Care Ombudsman

ND Long Term Care System

5,635 Nursing Facility Beds*
676 Swing Beds
2,054 Basic Care Beds
3,066 Assisted Living Units

*In 252 facilities located in 79 communities

Most Common Complaints

Nursing Homes/Swing Bed

- Autonomy, Choice, Preference, Exercise of Rights, Privacy
- Care
- Systems/Others

Basic Care & Assisted Living

- Autonomy, Choice, Preference, Exercise of Rights, Privacy
- Admission, Transfer, Discharge, Eviction
- Financial, Property (Not due to Financial Exploitation)

1,267
Information and Consultations

Complaints Received 305 Cases opened

AGING & ADULT SERVICES Older Americans Act (OAA)

24,600

Older adults served in FFY2019

Serves people age 60+ No income limits

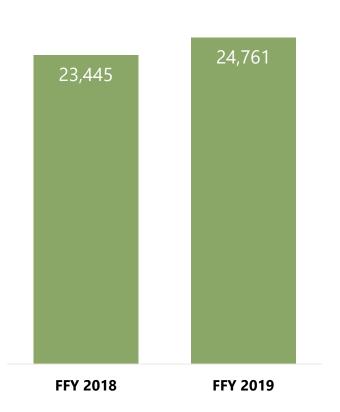
Voluntary contribution
Cannot deny service due to unwillingness or inability to contribute

Federal, state, and local funds



AGING & ADULT SERVICES Older Adults served with Older American Act Funds





3,919

Clients with household income at or below **poverty** level (increase of 5% over FFY2018)

4,457

Clients **over age 85** (increase of 2% over FFY2018)

11,882

Clients who lived in **rural** areas (increase of 2% over FFY2018)

AGING & ADULT SERVICES Senior Nutrition Services

Nutrition services **reduce** hunger, **food insecurity**, malnutrition, and **promote socialization** of older adults.

Seniors with food insecurity can have many negative health consequences:

- Prolonged hospital stays
- Unintentional weight loss that can increase need for physical assistance



AGING & ADULT SERVICES Older American Act Funds Nutrition Services

In 2019 people utilized home delivered and congregate meals in roughly equal rates

541,475 546,066

Congregate Meals

Home Delivered Meals

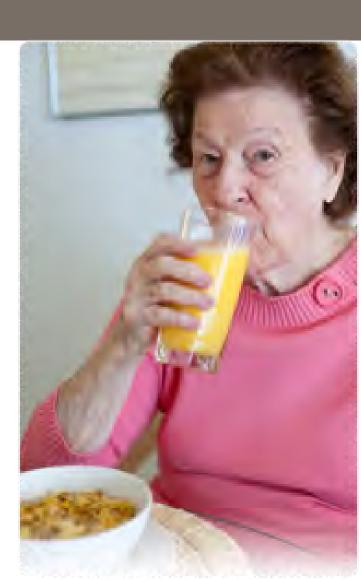
23%

Seniors receiving home delivered meals who are "high nutrition risk" (1,113 of 4,801 individuals served)

9.5% of the 14,311 individuals who received congregate meals in 2019 were "high nutrition risk"

23%

of Seniors receiving homedelivered meals have 2 or more ADL limitations (1,124 of 4,801 individuals served)



AGING & ADULT SERVICES Key Changes due to COVID: Nutrition Services

The pandemic changed the way meals are delivered to older adults.

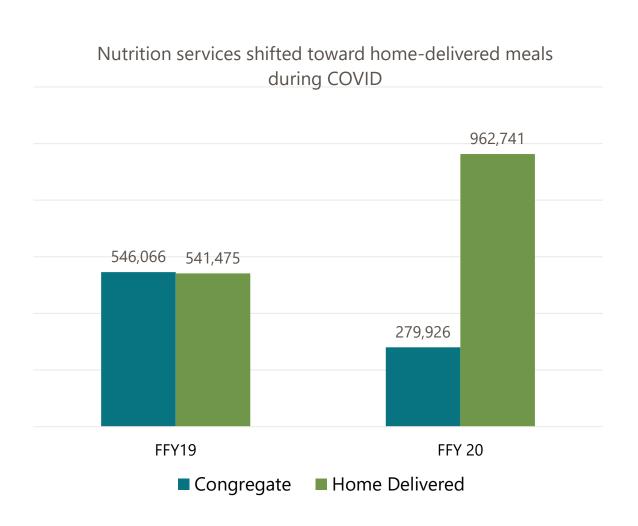
Meals options:

- Home delivered
- Pre-packaged grab-and-go
- Curbside pickup
- Frozen meal options

1,242,667

Meals served FFY2020 increased by 14% over FFY2019

9,362Consumers served



AGING & ADULT SERVICES Key Changes due to COVID: Nutrition Services

Home-Delivered Meals

Increased per meal rate from \$4.60 to \$7.00 to account for increased administrative costs

Funding

FFCRA \$1.2 M CARES \$2.4 M ND CARES \$1.1 M



NORTH DAKOTA OLDER AMERICANS ACT NUTRITION SITES

MAP LEGEND:

- Congregate Nutrition Sites Only
- Home Delivered Meals (HDM) Only
- Both Congregate and HDM Options
- Café 60 Nutrition Sites

STATE TOTAL:

219

51

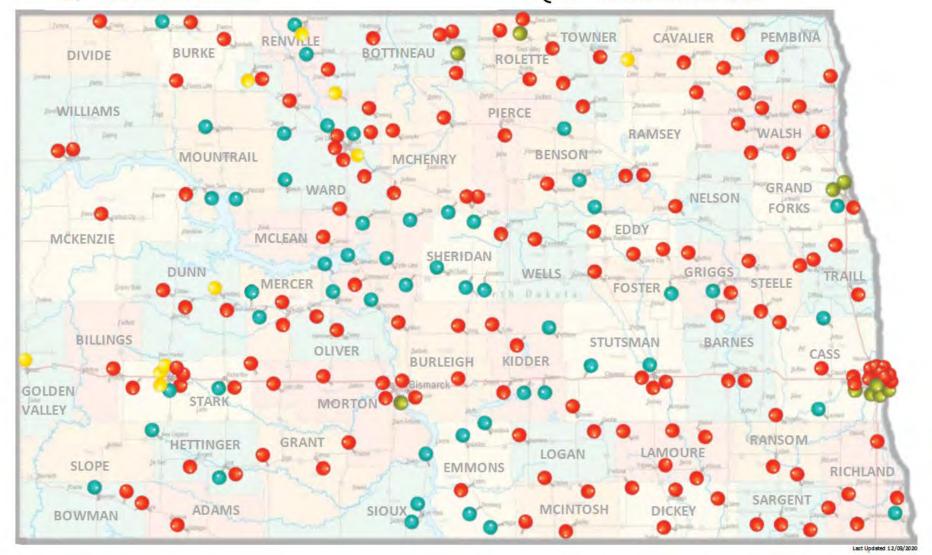
149

Congregate Nutrition Sites Only

Home Delivered Meals (HDM) Only

Both Congregate and HDM Options

10 Café 60 Nutrition Sites





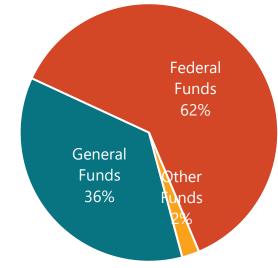
Aging & Adult Services Budget Summary

19-21 Budget	\$31,214,295	44.0 FTE
21-23 Budget (exec)	\$34,452,766	44.0 FTE
21-23 Budget (House)	\$35,738,774	45.0 FTE

+1 FTE for DOJ data/reporting support plus funds for DOJ-related rental assistance and senior employment innovation grant

Implementation of in-reach and out-reach and centralized intake for home and community-based services

- Continuation of Money Follows the Person
- Various programmatic and operating efficiencies



ND STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Purpose / Mission

The Council advocates for policy changes that promote choice, independence, productivity and inclusion for all North Dakotans with developmental disabilities. The Council provides funding for and supports projects and activities that maximize opportunities in these areas for consumers and families.

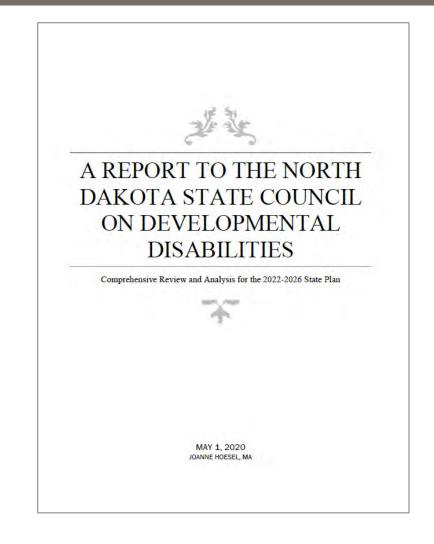


ND STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

Key Findings: 2022-26 State Plan Comprehensive Review and Analysis

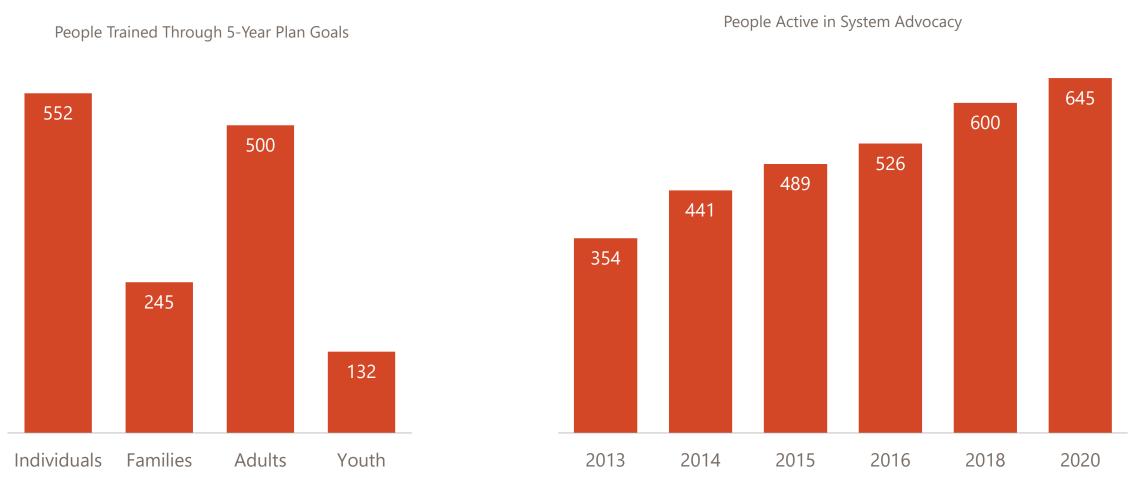
The following recommendations are offered as a roadmap for system improvement and present a range of possible options for consideration.

- 1. Fetal Alcohol Syndrome
- 2. Immunizations
- 3. Telehealth for IDD
- 4. Money Follows the Person
- 5. Culturally appropriate services
- 6. Infant Development services
- 7. Rental Assistance
- 8. Supported Decision-Making
- 9. Special Needs child care



DEVELOPMENTAL DISABILITIES COUNCIL

Individuals Engaged in Training and Advocacy



DISABILITY DETERMINATION SERVICES

Purpose / Mission

The Council advocates for policy changes that promote choice, independence, productivity and inclusion for all North Dakotans with developmental disabilities. The Council provides funding for and supports projects and activities that maximize opportunities in these areas for consumers and families.



SSDI DETERMINATIONS AND PAYMENTS Disability Determination Services

\$17.5 million

monthly SSDI payments (Sept 2020)

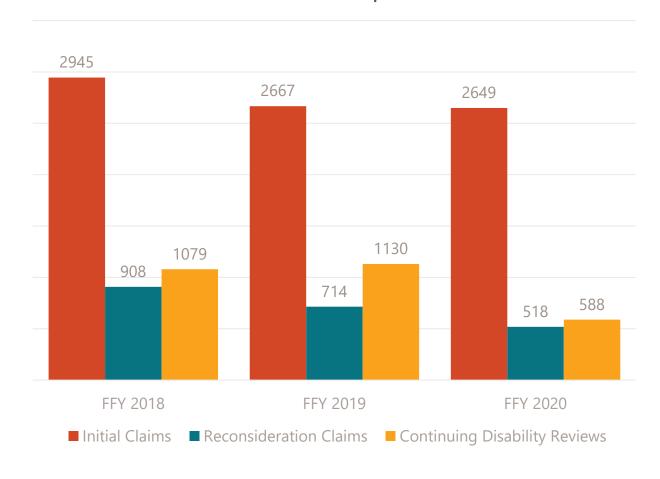
Social Security Disability Payments

\$4.1 million

Monthly SSI payments to blind/disabled residents (Sept 2020)

Supplemental Security Income





VOCATIONAL REHABILITATION DIVISION Program Purpose

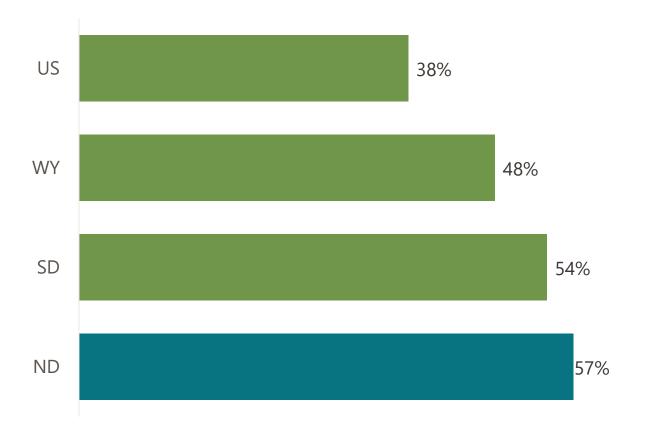
Assists North Dakotans with disabilities to enter or reenter the workforce through individualized services

- Assess skills and abilities
- Identify a vocational goal
- Develop an individualized plan to achieve employment
- Provide services that result in competitive integrated employment



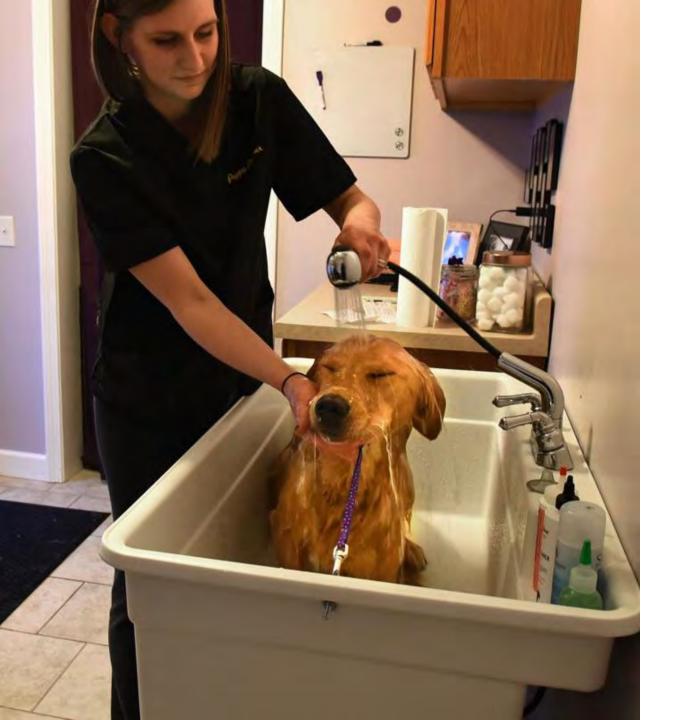
VOCATIONAL REHABILITATION DIVISION What's driving us

ND is 1st in the US in terms of % of people with disabilities who are employed



Average Weekly Wage of VR Clients at Application vs. Placement

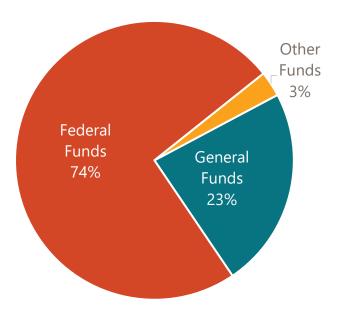




Vocational Rehab Budget Summary

19-21 Budget	\$31,853,039	85.0 FTE
21-23 Budget (exec)	\$30,528,323	85.0 FTE
21-23 Budget (House)	\$32,420,755	85.0 FTE

- Restoration of grant to recreational facility and to Centers for Independent Living
- Operating efficiencies related to travel and occupancy



CHILD SUPPORT Program Purpose

The purpose of the Child Support program is to help parents meet the needs of their children by securing appropriate and sustainable child support.



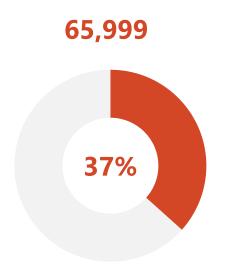
CHILD SUPPORT Return on Investment

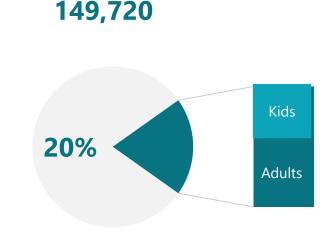
Every \$1.00 spent on Child Support generated \$6.58 for family recipients

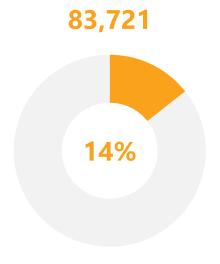
Funds spent on Child
Support generates \$20.00 in
support for family
recipients



CHILD SUPPORT Who we serve







1 in 3 ND kids

In 2020, 65,999 children received child support services. That is more than 1 of every 3 children under age 18 in the state.

1 in 5 North Dakotans

149,720 people received child support services in North Dakota in 2020.

1 in 7 ND adults

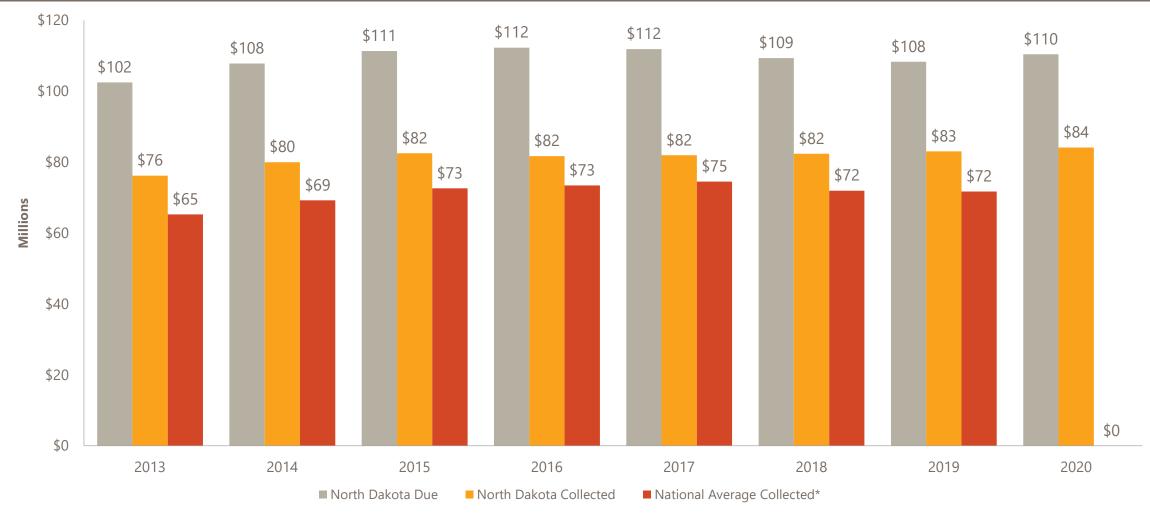
In 2020, 83,721 parents received child support services. That means 1 of every 7 adults (age 18+) in the state has a connection to the child support division.

CHILD SUPPORT DIVISION Supporting Family Stability & Economic Health

When child support is received, a child is able to grow up in a more secure and stable environment.



ND CHILD SUPPORT COLLECTIONS TYPICALLY EXCEED NATIONAL AVERAGES BY ABOUT 10%



	2013	2014	2015	2016	2017	2018	2019	2020
North Dakota	74.3%	74.2%	74.1%	72.8%	73.2%	75.3%	76.7%	76.2%
National Average	63.7%	64.2%	65.2%	65.4%	66.6%	65.8%	66.2%	N/A

*National average performance applied to North Dakota's current support due.

CHILD SUPPORT Supporting Family Stability & Economic Health

18,000

More than 18,000 families who are owed child support are not receiving the program's services

\$25 million

More than \$25 million in child support per year is not received in the month when it is due

\$250 million

More than \$250 million is owed in past-due support in full-service cases and nearly \$400 million total in all cases



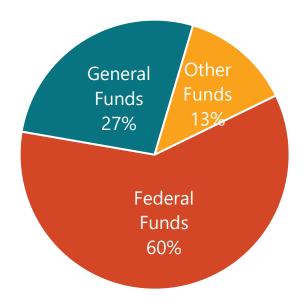
Child Support Budget Summary

19-21 Budget	\$29,805,507	157.7 FTE
21-23 Budget (exec)	\$30,539,102	157.7 FTE
21-23 Budget (House)	\$30,477,361	157.7 FTE

Operating efficiencies related to travel and occupancy

NOTE:

SB2002 includes shift in responsibility for entry of various child support information into the shared computer system from Clerks of Court to Child Support. Requesting consideration of DHS need for resources to accept responsibility for the work.



ECONOMIC ASSISTANCE Program Purpose

Assistance team helps
lower income North
Dakotans when they
are struggling to
make ends meet
by connecting them to
resources that can
help meet their basic
needs, preventing
greater and more
damaging crises.



Federal Programs



Child Care Assistance Program (CCAP)



Low-Income Home Energy Assistance Program (LIHEAP)



Supplemental Nutrition Assistance Program (SNAP)



Temporary Assistance for Needy Families (TANF) Program

ECONOMIC ASSISTANCE What We Do

Program Administration

- Federal Compliance
- State Plan
- State Law & Administrative Rules
- Federal Reporting
- Federal & State
 Agreements

Eligibility System Support

- Program and Policy Support
- Training
- Benefit Issuance
- Integrated Eligibility
 System Development
 and Maintenance

Program Integrity and Performance

- Program Monitoring
- Federal and State
 Quality Reviews
- Federal and State Audits
- Performance Improvement

Connecting North Dakotans to economic assistance is a partnership

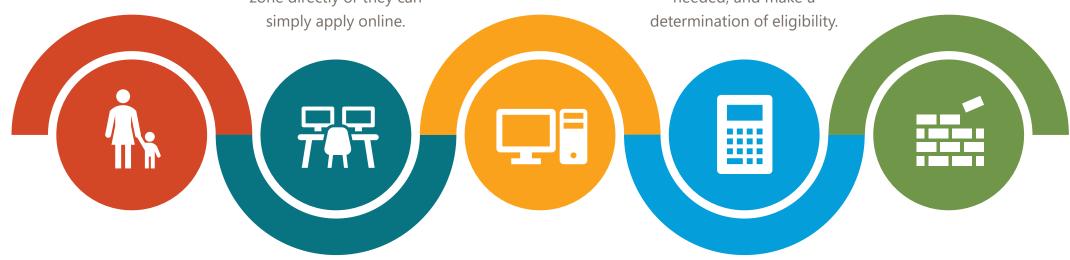
The state and Human Service Zones work together to deliver help to low and moderate-income families

Contact Human Service Zone

The local applicant can contact their human service zone directly or they can simply apply online.

Determine eligibility

An eligibility worker will review the information, reach out if needed, and make a determination of eligibility.



Person decides to apply

Making ends meet is getting more difficult every month so the applicant makes the decision to reach out for help.

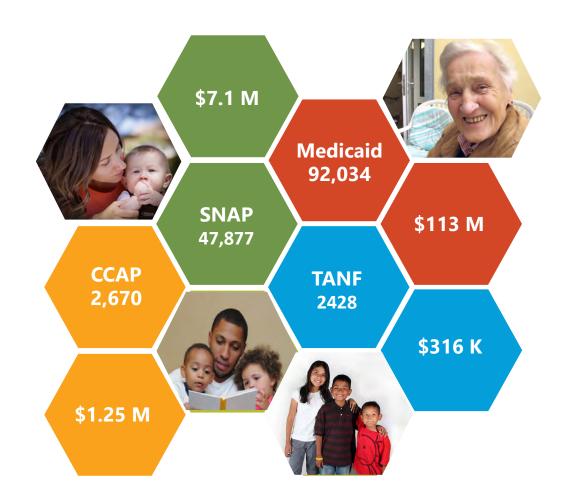
Gather information

The applicant can enter as much info as they can in the SPACES self-service portal.

Issue benefits

If the applicant is eligible to receive assistance, the state will issue the benefit in the appropriate manner.

140,000 - 150,000 North Dakotans utilize SPACES to access economic assistance in North Dakota each year



Average Monthly Individuals/Benefits (FY20)

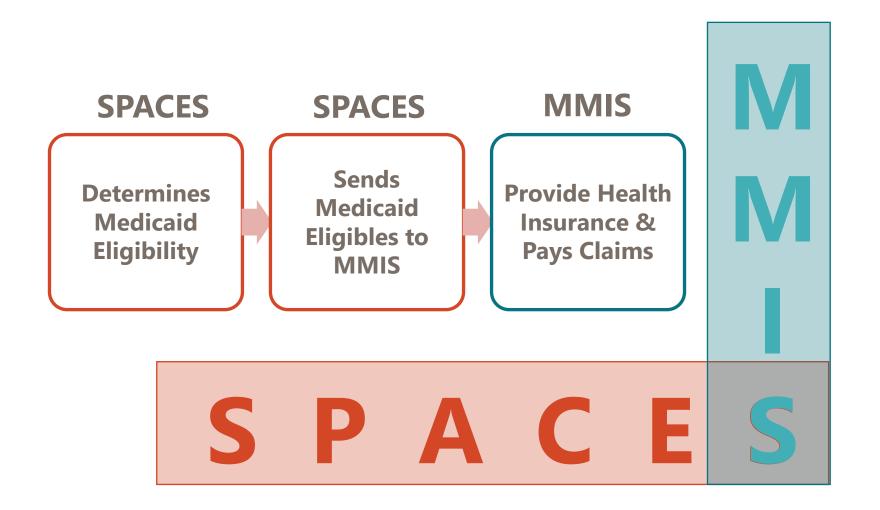
119,763 people in 68,287 households have a Medicaid record in SPACES

73,262 people in 34,795 households have a SNAP record in SPACES

5,124 people in 1,981 households have a TANF record in SPACES

4,946 people in 2,960 households have a CCAP record in SPACES

Two major technology platforms work together to connect low-income North Dakotans to resources



SPACES interfaces with more than 50 systems, including:

- Child Support
- Social Security
- Vital Records
- IRS
- EBT & EPC Systems
- ND PeopleSoft

145,000

North Dakotans

\$1,472,000,000 Economic Assistance

State Median Income for ND households 2020

Many federal assistance programs are designed to help individuals and families who earn less than 60% of State median income (SMI).

60% SMI is roughly equivalent to 200% of the federal poverty level.

	30% S	MI	60% SN	ΛI	100% SI	MI
Household	Annual	Hourly	Annual	Hourly	Annual	Hourly
Size	Income	Wage	Income	Wage	Income	Wage
1	\$ 15,720	\$ 7.56	\$ 31,440	\$ 15.12	\$ 52,400	\$ 25.19
2	\$ 20,562	\$ 9.89	\$ 41,124	\$ 19.77	\$ 68,540	\$ 32.95
3	\$ 25,398	\$ 12.21	\$ 50,796	\$ 24.42	\$ 84,660	\$ 40.70
4	\$ 30,234	\$ 14.54	\$ 60,468	\$ 29.07	\$ 100,780	\$ 48.45
5	\$ 35,070	\$ 16.86	\$ 70,140	\$ 33.72	\$ 116,900	\$ 56.20
6	\$ 39,912	\$ 19.19	\$ 79,824	\$ 38.38	\$ 133,040	\$ 63.96
7	\$ 40,818	\$ 19.62	\$ 81,636	\$ 39.25	\$ 136,060	\$ 65.41
8	\$ 41,724	\$ 20.06	\$ 83,448	\$ 40.12	\$ 139,080	\$ 66.87

Hourly wage based on assumption of 2,080 hours of work / year (full time equivalent)

EVERY OCCUPATION HAS A DIFFERENT EARNING PROFILE, WHICH HELPS US UNDERSTAND WHO MAY BE ELIGIBLE FOR ASSISTANCE Sampling of occupations by average wage (2019)







Less than \$12 / hr	\$12 - \$20 / hour	\$20 - \$28 / hour	\$28 - \$35 / hour
Waiter/Waitress Child care worker Dishwasher Bartender Cafeteria worker	Pharmacy tech Home health PT assistant Hair stylist Retail	Carpenter Loan processor Legal secretary Correctional officers Auto service tech	School counselor Rotary drill oper HR specialist Accountant Real Estate Sales
Short order cook Cashiers Clerical assistant Personal care aide	Farmworker Restaurant cook Data entry EMTs & paramedics Carpet installers Maintenance workers	Surgical tech Roofer Lic Practical Nurse Dental assistant Firefighter Surgical assistant	PR specialist Counselor Registered Nurse Computer network specialist Construction
	Nursing assistant Laborer Substitute teacher Office/accounting clerk Light truck driver Extraction helper	Clergy Social worker Police Hotel manager Roustabout Heavy truck driver	supervisor Dental hygienist Architecture occ Speech pathologist

Child Care Assistance Program (CCAP)

CCAP helps pay a portion of the **cost of childcare** for working families or families in training or education programs.

Families can earn up to 60% of state median income and be eligible for assistance.



Child Care Assistance Program (CCAP)

2,780

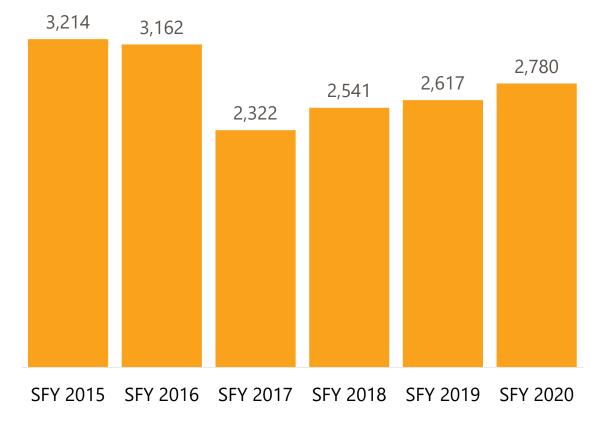
Average number of children served per month

\$1.3 millionSupport to families

\$466 Average payment per child per month

SFY2020

Average number of children served per month

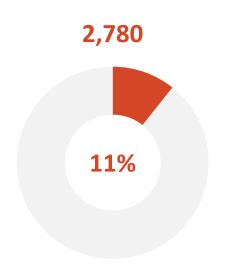


ECONOMIC ASSISTANCE Child Care Assistance

73%

Parents in workforce

73% of the 44,237 North Dakota households who have children younger than age 5 likely have at least some need for child care as all available parents are in the workforce



1 in 10 eligible children

26,000 ND children age 13 or younger live in households where parent earnings are less than 200% of the federal poverty level. 2,780 children (11% of potentially eligible) are currently served by CCAP in our state.

40,769

7% receive CCAP

1,500+ approved child care providers are licensed to serve 40,769 children each year. In 2020, an average of 2,780 of those licensed slots served children who received assistance

Low Income Home Energy Assistance Program (LIHEAP)

LIHEAP helps
households with home
heating costs by
paying a portion of their
heating bills, and with
improving their home's
overall energy
efficiency.

Families can earn up to 60% of state median income and be eligible for assistance.



Low Income Home Energy Assistance Program (LIHEAP)

12,785

Households served last heating season

\$12 million

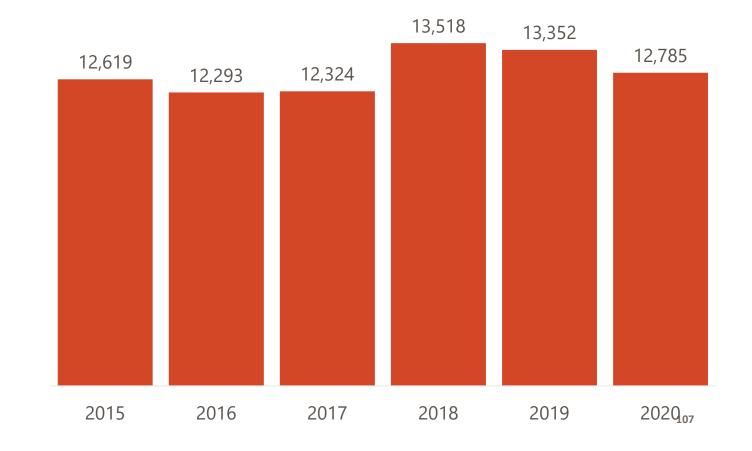
Support to households

\$930

Average payment per household per heating season

SFY2020

Average Households served per Heating Season (Oct-May)



Supplemental Nutrition Assistance Program (SNAP)

Provides nutrition
benefits to supplement
the food budget of
lower income families so
they can purchase
healthy food and move
towards self-sufficiency

Families can earn up to 60% of state median income and be eligible for assistance.



Supplemental Nutrition Assistance Program (SNAP)

520

SNAP is a partnership

520 retailers in North Dakota are authorized to accept SNAP payments from eligible households **\$1.00**→**\$1.54**

Local economies benefit

Beyond helping families gain access to nutritious food, SNAP offers local economic benefits as well. Each \$1.00 in SNAP generates \$1.54 in local economic activity.

1/3

Boosting family food budgets

SNAP provides nutrition assistance to people of all ages and circumstances.

36% - children under 18

35% - aged or disabled

35% - have earned income

Supplemental Nutrition Assistance Program (SNAP)

SFY 2015

SFY 2016

SFY 2017

SFY 2018

SFY 2019

48,323

Average number of individuals in served in 23,178 households

\$6.5 millionSupport to households

\$280

Average payment per household per month

Average households served per month 25,119 25,290 25,237 23,906 23,178

SFY 2020₁₁₀

Temporary Assistance to Needy Families (TANF)

TANF provides assistance to needy families with children who are deprived of parental support or care.

Which means that a parent is absent due to divorce, separation, death or one or both parents are aged or disabled.



Temporary Assistance to Needy Families (TANF)

945

Average number of families served per month

81%Of beneficiaries are children

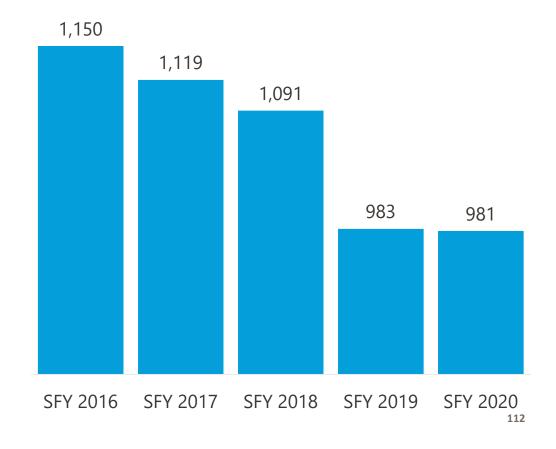
52%

Of ND TANF cases are child only cases (children in the care of a non legally responsible caretaker)

\$297

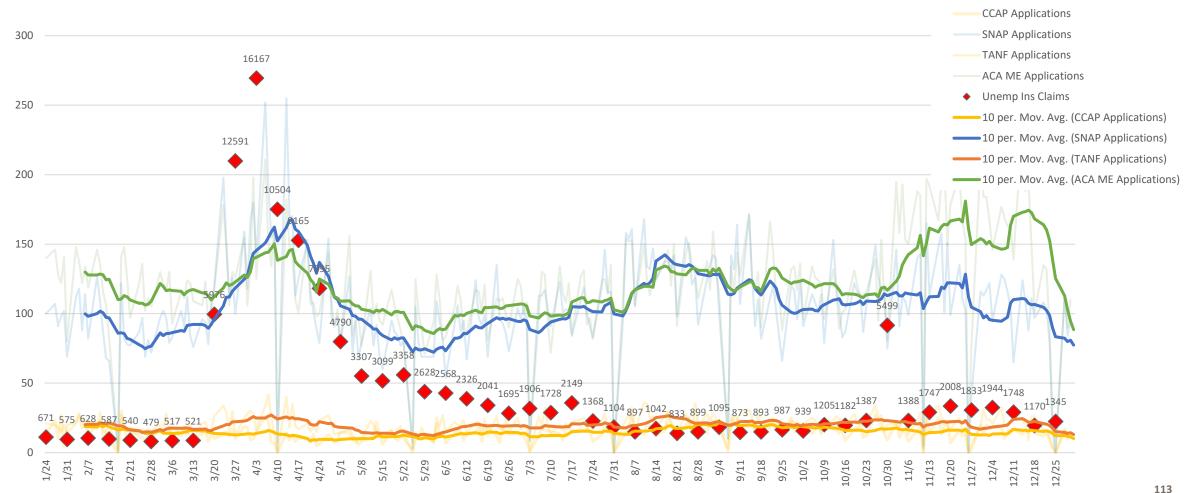
Average benefit per family per month

Average households served per month



ECONOMIC ASSISTANCE APPLICATIONS DURING 2020

Daily applications remained above pre-COVID levels throughout 2020 with peaks in April, August and November/December



ECONOMIC ASSISTANCE COVID 19 - Emergency Food and Energy Assistance

Pandemic EBT (P-EBT)

SNAP Emergency Assistance

Pandemic LIHEAP (P-LIHEAP)

- Issued SNAP benefits to children eligible for free or reduced-price school meals who did not receive those meals due to school closure.
- Delivered info to families in partnership with DPI.
- Approximately 36,750 children received \$9.5 million in SNAP benefits due to COVID school closure March-May 2020.

\$9.5 million

- Provides the maximum SNAP benefit to all SNAP eligible household starting in March 2020.
- An average of 15,000 households receive \$2.6 million in additional benefits per month.
- Optional program benefit is authorized each month by USDA FNS.

\$26 million

- Provided one-time help with the cost of electric utility bills for qualifying households.
- Payments were issued directly to participants' electric utility providers.
- Assistance available to households eligible in 2019-20 heating season
- Assisted 6,500 households as of 12-31-20

\$3 million

COVID 19 - Child Care Assistance Program (CCAP)

- Allowed for more than 40 absence hours per month due to illness, quarantine and provider closures
- Allowed families to maintain eligibility as they were seeking employment (both at application and rereview)
- Extended payment request deadlines and aligned with Child Care Emergency Operating Grant (CEOG)



ECONOMIC ASSISTANCE COVID 19 - SNAP Enhancement Grants

Grant program to help ND grocers update their point-of-sale systems and websites to enable online and by-phone ordering and delivery, improving access to food for both SNAP beneficiaries and community residents

Through Dec 2020 assisted grocery stores with system upgrades in:

- Minot
- Ruthville
- Mohall
- Newtown
- Michigan
- Scranton



COVID 19 - Emergency Rent Bridge (ERB)

1,410

Rental assistance to 1,500 households in 33 counties

\$520

Average amount of rental assistance per household per month

\$2.9 million

Total CRF funds distributed through 12-31 for ERB, paid to 486 housing providers



FEDERAL **CARES ACT** FUNDS AVAILABLE THROUGH DHS FOR COVID RESPONSE

Topical summary of emergency assistance to support basic needs (thru 12/21/20)

Family caregiver

Food Bank

\$430k (FEMA)

Child Care Child Care Em Op Grr Child Care Assistance	nt \$48.9 MM (CRF) \$6 MM (CCDBG-CV)	Housing ERB Homeless Coord Rent Assistance	\$2.9 MM (CRF) \$ \$6.5 MM (CDBG-CV)	Aging Services Fam Caregiver ADRL ACL Supportive svc Ombudsman Sr Employ	\$500k \$305k \$1 MM \$100k \$889k (SECEP)
Behavioral Health Mental Health Grant Crisis Counseling Community BH HSC/Rural	\$2 MM (SAMHSA) \$1.1MM (SAMHSA) \$1.7 MM (CRF) \$3.5 MM	Energy Assistance P-LIHEAP Child Welfare IV-E FMAP Violence Prev	\$5.2 MM (ACF) \$2.5 MM (ACF) \$80k	Ops & PPE Connect Karts QSP PPE SNAP Access	\$2.6 MM (CRF) \$100k (CRF) \$50k (CRF) \$250k (CRF) \$3.5 MM (CRF)
Food Assistance P-EBT P-SNAP Sr Meals Sr Meals	\$10 MM (USDA-CV) \$25.7 MM (USDA FNS) \$3.6 MM (OAA-CV) \$1.1 MM (CRF)	CW Svcs Medical Services FMAP	\$76k \$85 MM (CMS)	Total Available Total Spent	\$215,678,868 \$142,181,611

\$500k

(thru 12/21/20)

FEDERAL **CRRSA** FUNDS TO BECOME AVAILABLE FOR COVID -19 RESPONSE VIA HB1394

Federal Pandemic Relief Bill (CRRSA) signed 12-27-20

Child Care

 Child Care Assistance Program through (CCDBG via ACF/HHS) - \$19,448,230

Housing

- Rental Assistance (US Treasury) \$200,000,000
- Low Income Household Water Assistance (OCS/ACF/HHS) - \$

Food Assistance

- P-EBT (for families eligible for free or reduced lunch in school) (SNAP via FNS/USDA) - \$32,500,000
- Enhanced SNAP benefit eligibility (SNAP via FNS/USDA) - \$33,600,000
- P-SNAP Increased benefit (SNAP via FNS/USDA) -\$14,400,000

Aging Services

- Supportive services (OAA via ACL/HHS) -\$840,000
- Long term care Ombudsman (ACL/HHS) -\$20,000
- Adult Protective Services (ACL/HHS) -\$704,100

Child Welfare

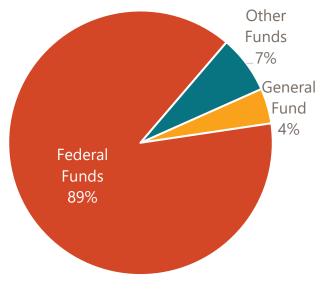
- Chafee Foster Care / Successful Transitions to Adulthood (ACF/HHS) - \$1,391,000
- Safe Stable Families (ACF/HHS) \$90,000
- + Behavioral Health
- + FMAP



Economic Assistance Budget Summary

19-21 Budget \$259,846,264 39.80 FTE 21-23 Budget (exec) \$274,998,084 39.80 FTE 21-23 Budget (House) \$274,960,587 39.80 FTE

- Administer federal COVID relief funds for low and moderate-income households
- Integrate department's housing assistance initiatives into the administration of economic assistance resources

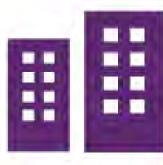


SOCIAL DETERMINANTS OF HEALTH

The social determinants of health are the conditions in which we are born, we grow and age, and in which we live and work. The factors below impact on our health and wellbeing.



Childhood experiences



Housing



Education



Social support



Family income



Employment



Our communities



Access to health services

Source: NHS Health Scotland

Building Stability by Avoiding Crisis

Helping people navigate difficult times

DISRUPTION

When families experience disruption, their ability to be a fully engaged, productive member of the community and the workforce is compromised.

...CAN LEAD TO CRISIS

In helping families avoid the escalation of instability to crisis, we are also avoiding unnecessary spending in the deepest, and often most expensive, components of the existing human service system.

SERVICES SUPPORT STABILITY

Intervening early will both save money and strengthen families. It will allow us to reserve deep end services for the times when they are truly needed, and help people avoid deepening their journey into crisis by diverting from institutions, keeping families together, and helping and sure that people have a place to call home.

Return On Investment





Contact Information

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