
AGENCY OVERVIEW**325 Department of Human Services****Date:** 12/23/2014**Time:** 12:43:33

Statutory Authority

North Dakota Century Code Chapters 6-09.16, 12.1-01, 14-08.1, 14-09, 14-10, 14-12.2, 14-13, 14-15, 14-15.1, 14-19, 14-20, 19-03.1, 23-02.1, 25-01, 25-01.1, 25-01.2, 25-02, 25-03.1, 25-03.2, 25-03.3, 25-04, 25-10, 25-11, 25-16, 25-16.1, 25-16.2, 25-17, 25-18, 26.1-36, 26.1-45, 27-20, 27-21, 28-21, 34-15, 50-01, 50-01.1, 50-01.2, 50-03, 50-06, 50-06.1, 50-06.2, 50-06.3, 50-06.4, 50-06.5, 50-08.1, 50-09, 50-10.1, 50-10.2, 50-11, 50-11.1, 50-11.2, 50-11.3, 50-12, 50-19, 50-24.1, 50-24.3, 50-24.4, 50-24.5, 50-24.6, 50-24.7, 50-25.1, 50-25.2, 50-27, 50-28, 50-29, 50-30, 50-31, 50-32, 50-33, 54-38, 54-44.8 and 57-15.

Agency Description

The DHS is an umbrella agency headed by an executive director appointed by the Governor. The DHS Senior Management Team is comprised of nine directors reporting to the executive director. The executive director and the management team oversee the operations of ten organizational components consisting of Program and Policy, Economic Assistance, Child Support, Medical Services, Field Services, Vocational Rehabilitation/Disability Determination Services and Administration. The appropriation bill itself consists of three major areas consisting of Management, Program/Policy Management and Field Services.

Management includes Fiscal Administration, Human Resources, Information Technology Services, Legal Advisory Unit, Risk Management, Executive Office and Public Information.

Program/Policy Management is comprised of nine major programs: Economic Assistance Policy (including TANF, SNAP, Low Income Heating Assistance Program, Child Care Assistance), Medical Services (including Traditional Medicaid and Medicaid Expansion, Children's Health Insurance Program and Long-Term Care Continuum Services), Child Support, Aging Services (Older Americans Act programs), Children and Family Services, Mental Health/Substance Abuse, Vocational Rehabilitation/Disability Determination Services, the Developmental Disabilities Division and Autism Services. North Dakota's assistance programs are supervised by the state but are directed and administered by the 47 county social service boards. Additionally, many aging and children's services are provided through County Social Service Boards.

Field Services is comprised of eight Human Service Centers located in each of the Governor's designated planning regions providing direct delivery of services to individuals and families, the State Hospital located in Jamestown and the Life Skills and Transition Center located in Grafton. The Human Service Centers provide a comprehensive array of outpatient clinical and community services including vocational rehabilitation, mental health services, developmental disabilities services, social services, addiction counseling, and emergency and outreach services. The centers provide supervision and direction to county agencies delivering social services. The State Hospital is a component of the treatment continuum providing treatment for mental illness and substance abuse. The Life Skills and Transition Center is an educational and training facility for persons with developmental disabilities.

Agency Mission Statement

The mission of the Department of Human Services is to provide quality, efficient and effective human services to improve the lives of people.

Agency Performance Measures

- Overall Administrative Costs for the Department will be under 10.0 percent of budget.
- Information requests, service requests, and payment timelines will meet established timeframes.
- The specific measures are established in each budget (program) level.
- Customer Satisfaction goals as they relate to the value of the service received, availability or amount will be attained.
- The specific measures are established in each budget (program) level.

Major Accomplishments

1. Implemented the Medicaid Expansion providing coverage to thousands of previously uninsured low-income North Dakotans.
2. Secured a \$300,000 federal System of Care Expansion Planning Grant to develop a statewide Trauma-Informed System of Care for children and youth with serious emotional disturbances and their families.
3. Implemented Mandatory Reporting of Vulnerable Adult Abuse and Neglect developing policy, conducting outreach, providing training, adopting an online reporting system, and contracting for and providing adult protective services.

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4. Managed the Order of Selection in the Vocational Rehabilitation Program ultimately eliminating the wait list for services.
5. Reached a record-low resident population of 64 adults at the Life Skills and Transition Center in Grafton and continued working with providers, advocates, residents, family members, guardians, and other stakeholders to transition residents to appropriate community settings of their choice and to provide behavioral health specialist services to help maintain people in the community.
6. Worked with partners and applied for and received a Money Follows the Person (MFP) Tribal initiative grant from the Centers for Medicare and Medicaid Services (CMS) to focus on transitions and services in Tribal areas to serve people with disabilities in their homes and communities.
7. Participated in a Substance Abuse Mental Health Services Administration (SAMHSA)-funded Olmstead Virtual Policy Academy that focused on housing with supports for people with disabilities, supported employment services, and peer support services.
8. Increased qualifying income levels and reduced family co-payments for the Child Care Assistance Program to help more qualifying low-to-moderate income parents pay for child care while they work or attend school or training.
9. Hosted biennial stakeholder meetings in the state's eight largest communities to gather input about local and regional human service needs and priorities which are utilized in strategic planning and the development of the agency budget proposal.
10. Implemented the \$9.5 million Strategic Prevention Framework, State Incentive Grant making funds available to local public health units and Tribes to help communities implement effective prevention programs, policies, and practices to reduce substance abuse and its related problems.
11. Implemented a new Autism Voucher program to help pay for assistive technology, training, and other approved support services for children ages three through 17 diagnosed with an autism spectrum disorder who meet income requirements and do not qualify for the autism waiver.
12. Received recognition from USDA – Food and Nutrition Services for North Dakota's application timeliness rate for the Supplemental Nutrition Assistance Program.
13. Participated in the NIATx process improvement project to improve admissions processes, reduce appointment no-shows, and retain consumers at the regional human service centers.
14. Expanded the voluntary Bright and Early North Dakota early childhood quality rating and improvement initiative beyond the Fargo region to include the Williston, Minot, and Jamestown regions.
15. Received recognition by the Joint Commission as a Top Performer on Key Quality Measures for the North Dakota State Hospital's work providing evidence-based clinical measures shown to improve patient care for hospital-based inpatient psychiatric services.
16. Agreed to a referral procedure after the Standing Rock Sioux Tribe Child Support Program notified DHS Child Support Division that they are ready to take referrals.
17. Implemented a new case management and payment system, AWAREND, in the Division of Vocational Rehabilitation on time and under budget. The system will enhance the ability to monitor client progress so they can achieve their employment goals.
18. Achieved a Fiscal Year 2013 work participation rate of 74 percent for the families served in the Temporary Assistance to Needy Families (TANF) program.
19. Placed third among state Child Support programs in overall performance on the five federal performance measures, including second place on the "collection of current support" performance measure.
20. Implemented sub-acute detox services in the Cass County region through a contract with Clay County.
21. Implemented a mobile crisis service pilot project in the Southeast region with Solutions, Inc. that provides phone and in-person support to people experiencing a mental health crisis to diffuse the crisis, connect people to services, and avoid unnecessary emergency room visits and interactions with law enforcement. In its first year of operation, the program responded to 231 crisis calls involving 57 individuals, including 10 children, and diverted 97 percent from inpatient hospitalizations.
22. Drafted transition plans for six Medicaid waivers and invited public comment on the plans to comply with the federal CMS Home and Community Based Services rule that covers HCBS settings, conflict-free case management, and person-centered planning.
23. Worked to address behavioral health needs, especially addiction service needs, in western North Dakota by contracting with private providers, and utilizing current and retired DHS treatment professionals from other regions to provide services onsite and via telehealth technology.
24. Celebrated the 25th anniversary of DHS' Ruth Meiers Adolescent Treatment Center in Grand Forks, which provides therapeutic residential care to about 500 youth with serious mental illness and their families.
25. Recognized by the PbS Learning Institute, the Ruth Meiers Adolescent Treatment Center was selected as the winner of the 2014 PbS Barbara Allen-Hagen Award for community-based program.

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Future Critical Issues

- The need to continue to improve community-based service options to meet the needs of the elderly and individuals with mental illness, chemical dependency, and developmental or physical disabilities to assure conformance with Olmstead decision.
- The need to continue to work with the counties as we deliver services to the citizens of North Dakota through a state-supervised, county-administered delivery system.
- The need to sustain services to the State's most vulnerable citizens at a 50 percent/50 percent Federal Medical Assistance Percentage (FMAP) while provider costs continue to increase.
- The need to address the capacity issues within various systems including the state's mental health system, the substance abuse treatment system, and the children and youth transitioning into adult services.
- The ability to retain the providers that serve vulnerable populations by ensuring payments for services provide reasonable coverage of providers' costs.
- Managing the delivery of services in the changing demographic environment in collaboration with public and private partners.
- The ability to hire and retain qualified staff and provide for succession planning.
- The need to address the increasing need for general funds to pay the Medicare Part D Phase-Down Contribution (Clawback).
- The need to address provider and Department staffing challenges and service delivery in oil-impact areas.

REQUEST SUMMARY325 Department of Human Services
Biennium: 2015-2017

Bill#: SB2012

Date: 12/23/2014

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Description	Expenditures 2011-2013 Biennium	Present Budget 2013-2015	Budget Request Change	Requested Budget 2015-2017 Biennium	Optional Budget Request
By Major Program					
Management	88,296,948	173,841,721	(51,992,817)	121,848,904	56,901,307
Program and Policy	2,026,738,310	2,537,785,886	441,700,193	2,979,486,079	111,021,463
Human Service Centers	154,426,310	181,778,944	5,746,629	187,525,573	7,741,533
Institutions	122,490,341	131,386,083	5,916,128	137,302,211	6,457,131
Total Major Program	2,391,951,909	3,024,792,634	401,370,133	3,426,162,767	182,121,434
By Line Item					
Salaries and Wages	65,601,871	78,183,550	3,004,435	81,187,985	14,355,358
Operating Expenses	135,151,341	176,772,009	23,257,970	200,029,979	6,068,880
Capital Assets	168,780	26,000	10,000	36,000	0
MMIS Carryover	13,877,240	77,151,465	(77,151,465)	0	43,231,631
Capital Construction Carryover	57,577	0	0	0	0
Grants	391,845,094	459,420,321	(3,390,355)	456,029,966	11,013,038
Human Service Centers / Institutions	276,859,074	313,165,027	11,662,757	324,827,784	14,198,664
Grants-Medical Assistance	1,508,390,932	1,920,074,262	443,976,791	2,364,051,053	93,253,863
Total Line Items	2,391,951,909	3,024,792,634	401,370,133	3,426,162,767	182,121,434
By Funding Source					
General Fund	936,210,800	1,181,372,441	65,230,955	1,246,603,396	102,583,399
Federal Funds	1,342,591,335	1,707,065,723	343,487,679	2,050,553,402	78,167,626
Special Funds	113,149,774	136,354,470	(7,348,501)	129,005,969	1,370,409
Total Funding Source	2,391,951,909	3,024,792,634	401,370,133	3,426,162,767	182,121,434
Total FTE	2,199.90	2,200.08	0.00	2,200.08	25.50

REQUEST DETAIL325 Department of Human Services
Biennium: 2015-2017

Bill#: SB2012

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Description	Expenditures 2011-2013 Biennium	Present Budget 2013-2015	Budget Request Change	Requested Budget 2015-2017 Biennium	Optional Budget Request
Salaries and Wages					
Salaries - Permanent	45,122,066	53,675,632	1,556,045	55,231,677	457,254
Salaries - Other	2,293	0	0	0	13,669,676
Temporary Salaries	1,725,112	1,419,604	822,585	2,242,189	0
Overtime	569,931	563,655	(108,494)	455,161	0
Fringe Benefits	18,182,469	22,524,659	734,299	23,258,958	228,428
Total	65,601,871	78,183,550	3,004,435	81,187,985	14,355,358

Salaries and Wages

General Fund	25,428,143	31,873,437	884,194	32,757,631	10,458,469
Federal Funds	37,760,244	43,504,269	2,474,902	45,979,171	3,896,889
Special Funds	2,413,484	2,805,844	(354,661)	2,451,183	0
Total	65,601,871	78,183,550	3,004,435	81,187,985	14,355,358

Operating Expenses

Travel	1,569,357	2,810,228	(21,550)	2,788,678	12,910
Supplies - IT Software	283,881	2,747,870	(2,165,226)	582,644	0
Supply/Material-Professional	221,453	260,332	78,534	338,866	0
Miscellaneous Supplies	0	700,000	(700,000)	0	0
Office Supplies	230,274	236,964	(36,621)	200,343	0
Postage	1,673,111	2,027,811	(85,941)	1,941,870	0
Printing	1,045,057	1,267,856	(165,414)	1,102,442	0
IT Equip Under \$5,000	1,152,609	1,112,427	9,718	1,122,145	0
Office Equip & Furn Supplies	166,028	116,110	20,142	136,252	23,233
Utilities	1,683	1,984	316	2,300	0
Insurance	150,133	92,503	(957)	91,546	0
Rentals/Leases-Equip & Other	158,907	194,862	(6,996)	187,866	0
Rentals/Leases - Bldg/Land	2,449,936	2,757,541	379,207	3,136,748	12,924
Repairs	196,118	210,934	(18,267)	192,667	0
IT - Data Processing	39,429,203	41,887,270	2,921,953	44,809,223	4,854
IT - Communications	914,221	920,113	(4,120)	915,993	4,458
IT Contractual Svcs and Rprs	4,493,787	16,808,096	23,342,284	40,150,380	8,400
Professional Development	753,581	944,840	379,991	1,324,831	0
Operating Fees and Services	78,351,200	99,164,850	(1,065,646)	98,099,204	6,002,101
Fees - Professional Services	1,910,802	2,509,418	396,563	2,905,981	0
Total	135,151,341	176,772,009	23,257,970	200,029,979	6,068,880

Operating Expenses

General Fund	60,179,254	78,188,792	9,173,556	87,362,348	5,819,621
Federal Funds	68,299,044	88,758,158	14,617,818	103,375,976	249,259

REQUEST DETAIL325 Department of Human Services
Biennium: 2015-2017

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Description	Expenditures 2011-2013 Biennium	Present Budget 2013-2015	Budget Request Change	Requested Budget 2015-2017 Biennium	Optional Budget Request
Special Funds	6,673,043	9,825,059	(533,404)	9,291,655	0
Total	135,151,341	176,772,009	23,257,970	200,029,979	6,068,880
Capital Assets					
Equipment Over \$5000	78,000	0	10,000	10,000	0
IT Equip/Sftware Over \$5000	90,780	26,000	0	26,000	0
Total	168,780	26,000	10,000	36,000	0
Capital Assets					
General Fund	11,095	12,122	878	13,000	0
Federal Funds	157,685	13,878	9,122	23,000	0
Special Funds	0	0	0	0	0
Total	168,780	26,000	10,000	36,000	0
MMIS Carryover					
Temporary Salaries	214,990	270,115	(270,115)	0	0
Overtime	8,831	70,555	(70,555)	0	0
Fringe Benefits	17,752	28,060	(28,060)	0	0
IT - Data Processing	1,147,277	41,713,645	(41,713,645)	0	43,231,631
IT Contractual Svcs and Rprs	12,488,390	31,720,917	(31,720,917)	0	0
Operating Fees and Services	0	3,348,173	(3,348,173)	0	0
Total	13,877,240	77,151,465	(77,151,465)	0	43,231,631
MMIS Carryover					
General Fund	1,812,239	11,479,964	(11,479,964)	0	18,427,988
Federal Funds	12,065,001	64,896,890	(64,896,890)	0	24,803,643
Special Funds	0	774,611	(774,611)	0	0
Total	13,877,240	77,151,465	(77,151,465)	0	43,231,631
Capital Construction Carryover					
Extraordinary Repairs	57,577	0	0	0	0
Total	57,577	0	0	0	0
Capital Construction Carryover					
General Fund	57,577	0	0	0	0
Federal Funds	0	0	0	0	0
Special Funds	0	0	0	0	0
Total	57,577	0	0	0	0

REQUEST DETAIL325 Department of Human Services
Biennium: 2015-2017

Bill#: SB2012

Date: 12/23/2014
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Description	Expenditures 2011-2013 Biennium	Present Budget 2013-2015	Budget Request Change	Requested Budget 2015-2017 Biennium	Optional Budget Request
Grants					
Grants, Benefits & Claims	391,845,094	459,420,321	(3,390,355)	456,029,966	11,013,038
Total	391,845,094	459,420,321	(3,390,355)	456,029,966	11,013,038
Grants					
General Fund	44,562,944	54,709,478	17,084,571	71,794,049	7,994,315
Federal Funds	311,385,142	365,575,597	(21,839,921)	343,735,676	1,841,446
Special Funds	35,897,008	39,135,246	1,364,995	40,500,241	1,177,277
Total	391,845,094	459,420,321	(3,390,355)	456,029,966	11,013,038
Human Service Centers / Institutions					
Salaries - Permanent	141,085,369	157,823,798	10,126,720	167,950,518	1,662,504
Salaries - Other	1,042,929	1,073,076	264,085	1,337,161	24,960
Temporary Salaries	4,351,752	4,857,907	(307,786)	4,550,121	113,040
Overtime	1,502,073	1,801,223	335,675	2,136,898	0
Fringe Benefits	60,758,068	72,136,797	2,666,729	74,803,526	830,472
Reduction In Salary Budget	0	0	(4,581,770)	(4,581,770)	0
Travel	3,567,642	3,901,355	675,420	4,576,775	24,697
Supplies - IT Software	209,744	220,968	(22,173)	198,795	0
Supply/Material-Professional	611,060	522,606	(26,345)	496,261	0
Food and Clothing	2,732,373	2,701,326	59,644	2,760,970	0
Bldg, Ground, Maintenance	1,259,678	1,171,614	16,775	1,188,389	0
Miscellaneous Supplies	573,992	570,413	(46,720)	523,693	138,215
Office Supplies	807,886	764,437	(55,596)	708,841	0
Postage	269,967	297,117	(7,617)	289,500	0
Printing	214,623	198,671	2,763	201,434	0
IT Equip Under \$5,000	594	854	(854)	0	0
Other Equip Under \$5,000	124,343	118,306	61,555	179,861	0
Office Equip & Furn Supplies	276,954	188,293	(34,250)	154,043	28,362
Utilities	4,295,369	4,217,777	(1,333,939)	2,883,838	0
Insurance	191,400	167,182	16,399	183,581	0
Rentals/Leases-Equip & Other	100,058	96,577	29,015	125,592	0
Rentals/Leases - Bldg/Land	6,574,418	6,652,095	312,322	6,964,417	0
Repairs	1,292,364	1,146,622	98,341	1,244,963	0
IT - Data Processing	3,771	3,885	0	3,885	8,496
IT - Communications	1,671,303	1,663,067	(150,814)	1,512,253	10,080
IT Contractual Svcs and Rprs	60	70	(20)	50	0
Professional Development	408,493	476,591	17,175	493,766	900
Operating Fees and Services	3,871,745	4,070,178	250,288	4,320,466	0
Fees - Professional Services	2,837,606	2,446,499	51,585	2,498,084	0

REQUEST DETAIL325 Department of Human Services
Biennium: 2015-2017

Bill#: SB2012

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Description	Expenditures 2011-2013 Biennium	Present Budget 2013-2015	Budget Request Change	Requested Budget 2015-2017 Biennium	Optional Budget Request
Medical, Dental and Optical	3,302,407	3,709,183	(122,085)	3,587,098	0
Extraordinary Repairs	3,809,219	2,631,008	349,813	2,980,821	3,436,762
Equipment Over \$5000	137,574	465,413	342,825	808,238	0
Grants, Benefits & Claims	28,974,240	37,070,119	2,675,597	39,745,716	7,920,176
Total	276,859,074	313,165,027	11,662,757	324,827,784	14,198,664
Human Service Centers / Institutions					
General Fund	160,176,702	187,517,800	6,617,611	194,135,411	12,989,954
Federal Funds	88,411,995	96,075,918	3,901,753	99,977,671	1,165,366
Special Funds	28,270,377	29,571,309	1,143,393	30,714,702	43,344
Total	276,859,074	313,165,027	11,662,757	324,827,784	14,198,664
Grants-Medical Assistance					
Grants, Benefits & Claims	1,508,390,932	1,920,074,262	443,976,791	2,364,051,053	93,253,863
Total	1,508,390,932	1,920,074,262	443,976,791	2,364,051,053	93,253,863
Grants-Medical Assistance					
General Fund	643,982,846	817,590,848	42,950,109	860,540,957	46,893,052
Federal Funds	824,512,224	1,048,241,013	409,220,895	1,457,461,908	46,211,023
Special Funds	39,895,862	54,242,401	(8,194,213)	46,048,188	149,788
Total	1,508,390,932	1,920,074,262	443,976,791	2,364,051,053	93,253,863
Funding Sources					
General Fund	936,210,800	1,181,372,441	65,230,955	1,246,603,396	102,583,399
Federal Funds	1,342,591,335	1,707,065,723	343,487,679	2,050,553,402	78,167,626
Special Funds	113,149,774	136,354,470	(7,348,501)	129,005,969	1,370,409
Total Funding Sources	2,391,951,909	3,024,792,634	401,370,133	3,426,162,767	182,121,434

CHANGE PACKAGE SUMMARY

325 Department of Human Services
Biennium: 2015-2017

Bill#: SB2012

Date: 12/23/2014

Time: 12:43:33

Description	Priority	FTE	General Fund	Federal Funds	Special Funds	Total Funds
Base Budget Changes						
One Time Budget Changes						
A-B 6 Add Extraordinary Repairs		0.00	2,980,821	0	0	2,980,821
A-B 7 Add Equipment over \$5,000		0.00	821,238	23,000	0	844,238
A-E 8 Remove One-Time Funding		0.00	(14,574,005)	(64,679,821)	(11,363,909)	(90,617,735)
Total One Time Budget Changes		0.00	(10,771,946)	(64,656,821)	(11,363,909)	(86,792,676)
Ongoing Budget Changes						
A-A 1 Continued Program Changes		0.00	12,428,521	11,341,084	2,724,707	26,494,312
A-A 2 Grant Cost Changes		0.00	22,592,894	217,305,889	1,009,426	240,908,209
A-A 3 Grant Caseload Changes		0.00	27,218,823	184,644,862	879,666	212,743,351
A-A 4 Federal Medical Assistance Percentage (FMAP) Cha		0.00	11,771,616	(11,807,288)	35,672	0
A-A 5 Funding Source Changes		0.00	546,786	0	(546,786)	0
A-F 9 Remove One-Time Capital Items		0.00	(3,108,543)	(13,878)	0	(3,122,421)
Base Payroll Change		0.00	4,552,804	6,673,831	(87,277)	11,139,358
Total Ongoing Budget Changes		0.00	76,002,901	408,144,500	4,015,408	488,162,809
Total Base Budget Changes		0.00	65,230,955	343,487,679	(7,348,501)	401,370,133
Optional Budget Changes						
One Time Optional Changes						
A-D 200 Oil Patch Add on - Williston, Minot and Dickin	2	0.00	2,856,811	512,865	0	3,369,676
A-D 501 Eligibility Modernization Project	5	0.00	18,427,988	24,803,643	0	43,231,631
A-D 701 Heating Plant Repairs and Upgrades for State H	7	0.00	1,509,156	0	0	1,509,156
A-D 702 Surveillance Cameras	7	0.00	390,000	0	0	390,000
A-D 703 Central Air for Tompkins Building	7	0.00	557,606	0	0	557,606
A-D 704 Heating Plant Repairs and Upgrades for LSTC	7	0.00	230,000	0	0	230,000
A-D 705 6 Living Area Kitchens	7	0.00	750,000	0	0	750,000
Total One Time Optional Changes		0.00	24,721,561	25,316,508	0	50,038,069
Ongoing Optional Changes						

CHANGE PACKAGE SUMMARY

**325 Department of Human Services
Biennium: 2015-2017**

Bill#: SB2012

Date: 12/23/2014

Time: 12:43:33

Description	Priority	FTE	General Fund	Federal Funds	Special Funds	Total Funds
A-C 100 Staff Equity Increase	1	0.00	7,116,270	3,183,730	0	10,300,000
A-C 301 Increase Child Care Provider Rates	3	0.00	2,022,099	0	0	2,022,099
A-C 302 Ambulance Rate Increase	3	0.00	1,904,746	1,904,746	0	3,809,492
A-C 303 Physical Therapy/Occupational Therapy/SpeechTh	3	0.00	2,775,371	2,775,371	0	5,550,742
A-C 304 Spousal Impoverishment	3	0.00	617,544	617,544	0	1,235,088
A-C 305 ND State Council on Developmental Disabilities	3	1.00	0	34,018	0	34,018
A-C 306 Vulnerable Adult Protective Services	3	0.00	1,080,073	0	0	1,080,073
A-C 307 Guardianship Establishment (Vulnerable Adults)	3	0.00	130,000	0	0	130,000
A-C 308 Chafee Independent Living	3	0.00	178,361	0	0	178,361
A-C 309 Change in Federal Child Care Laws	3	1.50	172,459	118,681	0	291,140
A-C 310 Severely Mentally Ill Extended Services	3	0.00	554,989	0	0	554,989
A-C 311 Supported Employment for Integrated Dual Disor	3	0.00	928,248	0	0	928,248
A-C 312 TBI Prevocational Skills	3	0.00	422,000	0	0	422,000
A-C 313 Other Extended Services Slots	3	0.00	122,796	0	0	122,796
A-C 314 TBI Extended Services	3	0.00	180,783	0	0	180,783
A-C 315 Developmental Disabilities Nurse FTE	3	1.00	91,454	91,455	0	182,909
A-C 316 Increase in Wards for DD Guardianship	3	0.00	155,919	0	0	155,919
A-C 317 Autism Administrative Staff Officer	3	1.00	114,829	59,249	0	174,078
A-C 318 Increase in Current Autism Waiver Slots	3	0.00	880,800	880,800	0	1,761,600
A-C 319 Additional Autism Voucher Slots	3	0.00	500,002	0	0	500,002
A-C 320 Child Welfare Regional Supervisors	3	3.00	437,771	52,273	0	490,044
A-C 321 10 Bed Crisis Residential/Transitional Living	3	0.00	685,895	174,744	43,344	903,983
A-C 322 DD Case Managers	3	3.00	249,669	188,349	0	438,018
A-C 323 4 Additional Beds for Alternative Care Service	3	0.00	283,500	0	0	283,500
A-C 324 IDDT Programming - 3 FTE	3	3.00	393,295	0	0	393,295
A-C 325 10 Bed Residential Addiction	3	0.00	601,699	0	0	601,699
A-C 326 15 Bed Unit for Tompkins Program	3	11.00	1,520,369	0	0	1,520,369
A-C 400 Inflation	4	0.00	48,060,897	40,736,005	1,327,065	90,123,967

CHANGE PACKAGE SUMMARY

325 Department of Human Services
Biennium: 2015-2017

Bill#: SB2012

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Description	Priority	FTE	General Fund	Federal Funds	Special Funds	Total Funds
A-C 601 Assisted Living	6	1.00	146,234	0	0	146,234
A-C 602 Long Term Care Consultant for Pay for Performa	6	0.00	40,000	10,000	0	50,000
A-C 603 Personal Care with Supervision	6	0.00	649,118	649,118	0	1,298,236
A-C 604 Companionship Services	6	0.00	123,020	123,020	0	246,040
A-C 605 Post Adoption Services	6	0.00	169,140	91,195	0	260,335
A-C 606 Family Team Decision Making	6	0.00	300,000	0	0	300,000
A-C 607 Parents LEAD	6	0.00	420,000	0	0	420,000
A-C 608 Trauma-Informed System of Care	6	0.00	229,130	58,500	0	287,630
A-C 609 NDCARES	6	0.00	130,000	0	0	130,000
A-C 610 Increase Age Limit of Autism Waiver to 9 Years	6	0.00	352,320	352,320	0	704,640
A-C 611 Mobile On-Call Crisis Services	6	0.00	1,000,000	0	0	1,000,000
A-C 612 Peer Support Specialists	6	0.00	1,294,238	0	0	1,294,238
A-C 613 DD Crisis Beds	6	0.00	76,800	0	0	76,800
A-C 614 Medically Fragile ICF in Grafton, ND	6	0.00	750,000	750,000	0	1,500,000
Total Ongoing Optional Changes		25.50	77,861,838	52,851,118	1,370,409	132,083,365
Total Optional Budget Changes		25.50	102,583,399	78,167,626	1,370,409	182,121,434

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Change Group: A	Change Type: A	Change No: 1	Priority:
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Continued Program Changes

This change package is used for entering the cost of continued programs such as changes in contracts, purchases of services, utilities, and other operating cost changes.

Change Group: A	Change Type: A	Change No: 2	Priority:
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Grant Cost Changes

This change package is used to enter grant cost changes associated with factors other than caseload changes and FMAP changes for individuals served by the Department's programs.

Change Group: A	Change Type: A	Change No: 3	Priority:
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Grant Caseload Changes

This change package is used to enter grant caseload changes associated with factors other than costs changes and FMAP changes for individuals served by the Department's programs.

Change Group: A	Change Type: A	Change No: 4	Priority:
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Federal Medical Assistance Percentage (FMAP) Changes

This change package is used to enter estimated grant FMAP changes associated with factors other than caseload changes and cost changes for individuals served by the Department's programs. FMAPs for the years affected by the 2015-2017 biennium are 50%.

Change Group: A	Change Type: A	Change No: 5	Priority:
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Funding Source Changes

This change package is used to enter funding source changes.

Change Group: A	Change Type: B	Change No: 6	Priority:
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Add Extraordinary Repairs

This change package includes the following extraordinary repair projects at the Human Service Centers, State Hospital, and Life Skills and Transition Center:

HSC's:

- Replace exterior windows - \$8,120
- Repair stucco - \$29,425

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- Replace carpet - \$12,411

State Hospital:

- Resurface streets & parking lots - \$100,000
- Replace sanitary sewer system - \$63,500
- Asbestos and Lead Based Paint Abatement - \$275,000
- Roof repair maintenance - \$100,000
- Repair heating plant roof - \$206,600
- Replace vehicle garage roof - \$135,405
- Replace flooring - \$100,000
- Repair sidewalks - \$25,000
- Water main improvements - \$40,000
- Paint Ash Tower - \$30,000
- HVAC for Pharmacy - \$119,000
- Electrical Outlets to Bedrooms - \$95,000
- Replace water shutoff valves - \$70,000

Life Skills & Transition Center:

- Card Access Project - \$6,000
- Asbestos Abatement - \$60,000
- Chapel Steeple - \$43,200
- Cottage Repairs - \$15,000
- Demolish Pleasant View and Refectory - \$695,570
- Fire Alarms in Maplewood & Cedar Grove - \$60,000
- Fixing chill water piping system - \$50,000
- Flooring replacement - \$61,590
- Front doors at Maplewood & Cedar Grove - \$53,000
- New windows at Maplewood & Cedar Grove - \$100,000
- Concrete repairs - \$25 000
- Paint - \$15,000
- Preventative maintenance and repairs - \$50,000
- Repair cracks/eliminate water leaks - \$25,000
- Repair heating system components - \$15,000
- Repair duck work, air handlers - \$30,000
- Repair pools and Collette - \$12,000
- Repair skylights - \$140,000
- Replace/repair doors - \$20,000
- Shop overhead door - \$10,000
- Stream distribution system - \$50,000

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- Update/Replace fire alarm panel - \$35,000

Change Group: A	Change Type: B	Change No: 7	Priority:
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Add Equipment over \$5,000

This change package includes the following equipment over \$5,000 For DD and at the Human Service Centers, State Hospital, and Life Skills and Transition Center:

DD

- Tymp machines - \$10,000

HSC's

- Copier - \$15,000
- Utility tractor - \$19,000

State Hospital:

- 4WD Loader - \$140,000
- Diesel mower - \$17,900
- Rake attachment for skidsteer - \$8,000
- Tugs - \$17,966
- Documed - \$50,000
- Unit dose packaging system - \$21,372
- X-ray machine - \$80,000
- Nustep exercise equipment - \$6,000
- Bariatric Exam Table - \$8,000

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- High low exam tables - \$12,000
- Whirlpool - \$28,000
- Blanket warmer - \$5,000
- High low stretcher - \$5,000

Life Skills and Transition Center:

- Computerized radiography x-ray system - \$40,000
- Hematology Analyzer - \$40,000
- Plate heater for aladdin dishes - \$5,000
- Cafeteria Frost top on hot wells - \$50,000
- Combination Oven - \$71,000
- Dryers - \$17,900
- VFD on Central Vac - \$82,000
- Scissor Lift - \$25,000
- Mower - \$39,000
- Table saw - \$5,100

Change Group: A	Change Type: C	Change No: 100	Priority: 1
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Staff Equity Increase

The Department has a number of long-term staff who have significant program and policy experience. This experience is critical in an agency that is so diverse and is responsible for interpreting and following a significantly large number of federal and state statutes, laws, policies, etc. The Department also has a large portion of the workforce that is eligible for retirement over the next several years. It is critical that we retain the expertise and knowledge, or the level of service we are able to provide to our customers may diminish. Because of the positive economic conditions in North Dakota, we often need to hire new staff at a rate that equals or sometimes exceeds that of existing staff. Depending on the position(s) in question, sometimes the demand for the position is so great that we have no choice but to offer a higher salary. This has

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caused great compression within the Department, where we have long-term, experienced staff being paid at the same rate, or sometimes even lower, than newly-hired staff with the same amount of overall experience.

This OAR will allow the Department to address some of its most problematic equity and compression issues.

Change Group: A	Change Type: C	Change No: 300	Priority: 3
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Capacity

Change Group: A	Change Type: C	Change No: 301	Priority: 3
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Increase Child Care Provider Rates

Child Care federal regulations suggest payments should be at least at the 75th percentile of the market. Child Care provider rates have not been increased since October 2012. The last market rate survey in May 2013, revealed North Dakota was slightly above the 50th percentile for centers and slightly below the 50th percentile for licensed group/family providers. The Department is requesting to increase provider rates for centers and groups to the 75th percentile of the May 2013 market rate survey.

The shortage of child care providers was discussed during the last Legislative session and by an interim committee over the past year. Increasing provider rates provides a higher reimbursement rate for services provided and an incentive for providers to take advantage of the Child Care Assistance Program. Increasing the provider rates is an option that would assist with the child care capacity and bring the program up to the recommended federal percentile.

Change Group: A	Change Type: C	Change No: 302	Priority: 3
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Ambulance Rate Increase

Due to the increased operational costs, including erosion of volunteer labor, increased wages and increased health care coverage expenses, the Department is requesting to rebase the Medicaid ambulance services to 80% of the 2014 Workforce Safety and Insurance rates to ensure the ambulance services remain viable across the state; and to ensure services remain available for the ND Medicaid enrollees. Future year rate increases would be consistent with provider inflation authorized by the Legislature.

Change Group: A	Change Type: C	Change No: 303	Priority: 3
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Physical Therapy/Occupational Therapy/SpeechTherapy Rate Increase

The Department is proposing an increase to Occupational Therapy, Physical Therapy, and Speech Therapy service codes to 75% of the North Dakota Medicaid Medicare Resource-Based Relative Value Scale (RBRVS) calculation. The Department will use the RBRVS methodology as a benchmark for establishing the increase in order to maintain consistency with our standard North Dakota Medicaid-specific pricing methodology for most professional services. \$1,410,832 of the \$2,775,371 General Fund requested will need to be appropriated to the Department of Public Instruction for their portion of special education utilization of these therapies.

Change Group: A	Change Type: C	Change No: 304	Priority: 3
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Spousal Impoverishment

SSI Spousal Impoverishment Standards for 2014 set forth a maximum monthly maintenance needs allowance of \$2,931, while North Dakota's maximum monthly maintenance needs allowance has remained at \$2,267 since 2003. The United States congress enacted provisions to prevent what has come to be called "spousal

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impoverishment," leaving the spouse who is still living at home in the community with little or no income or resources. By raising North Dakota's maximum monthly maintenance needs allowance, North Dakota community spouses will be able to meet their needs in an environment where cost of living is increasing in a robust economy. Accordingly DHS seeks to rebase the monthly maintenance needs allowance to the SSI spousal impoverishment standard for 2016 (estimated at \$2,992) beginning January 1, 2016 with annual increases based on the current CPI-U every year thereafter.

Change Group: A	Change Type: C	Change No: 305	Priority: 3
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ND State Council on Developmental Disabilities FTE

The last two federal reviews recommended the North Dakota State Council on Developmental Disabilities hire additional staff and focus on in-house Council activities. Additional funding authority is requested to convert the existing temporary position to an FTE.

Change Group: A	Change Type: C	Change No: 306	Priority: 3
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Vulnerable Adult Protective Services

The implementation of mandatory reporting requires additional resources to provide needed vulnerable adult protective services throughout the state. Three additional contracted staff are needed to provide services across the state with an estimated cost of \$615,179.

Cass County has provided vulnerable adult protective services in the southeast region of the state for a number of years and has contributed approximately 51% of the cost. Based upon information received from the Cass County Board of Commissioners, \$663,087 is needed to fully fund vulnerable adult protective services in the southeast region of North Dakota. This OAR includes funds in the amount of \$464,894 which, when combined with the base budget of \$198,193, would support 100% of the costs in the southeast region of North Dakota for the 2015-2017 biennium.

Change Group: A	Change Type: C	Change No: 307	Priority: 3
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Guardianship Establishment (Vulnerable Adults)

During the first year of the 2013-2015 biennium, guardianship petitioning funds supported 77 requests. It is anticipated that requests will total 154 for the biennium. At a ceiling reimbursement rate of \$2,500, the current appropriation of \$255,000 will support 102 requests. There is no reason to believe estimated requests will decrease; therefore, the OAR requests the funds are needed to support an additional 52 requests for guardianship establishment. When combined with the base budget, the funding would support 154 guardianship establishments in 2015-2017. (52 x \$2,500 = \$130,000)

Change Group: A	Change Type: C	Change No: 308	Priority: 3
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Chafee Independent Living

The Chafee Independent Living program provides individual and group services to current and former foster youth. Services and support improve individual outcomes to enable a successful transition to adulthood. Youth receive assistance to meet the needs of their education, apply for employment, maintain home management skills, and develop an understanding of personal safety, positive decision making, and fiscal responsibility. Seven Chafee IL Coordinators served 252 current foster youth and 178 foster care alumni from May 2013 to April 2014; only 48% of eligible youth in foster care were served during the twelve month period. At this time, there is a waiting list for these services averaging 10 youth per region. The Department is requesting \$173,561 in additional funding to provide more eligible youth the opportunity to receive these services. Youth are no longer eligible for federal flex funds when they reach the age of 21, however often times they need help with the cost to purchase a new car

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battery, shoes for work, or transportation and housing expenses. This OAR also includes \$4,800, for up to \$200/month of flex funding for youth ages 21 to 23 who receive the Education and Training Voucher for college.

Change Group: A	Change Type: C	Change No: 309	Priority: 3
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Change in Federal Child Care Laws

The passage of the new federal law and rules is expected, which will significantly expand the number of fingerprint background checks required for early childhood providers. U.S. Senate Bill 1086, which was passed by the Senate in March, 2014, was recently passed with amendments by the House. The amended bill is scheduled for a vote on November 13, 2014. The Senate is expected to pass the bill without objection. This change in law will require all early childhood staff to be fingerprinted, instead of only staff that have lived outside of North Dakota in the last 10 years. It is anticipated that we will need to complete 4,315 initial background checks upon passage of the bill, and an increase of 1,500 background checks to be completed annually. We anticipate needing \$206,822 for 1.5 FTEs to complete the additional background checks on a timely basis, and \$84,318 to pay the Attorney General's office a fee of \$14.50 for each background check.

Change Group: A	Change Type: C	Change No: 310	Priority: 3
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Severely Mentally Ill Extended Services

Currently there are 164 slots for Serious Mental Illness (SMI) Extended Services. Extended Services provides job coaching that helps consumers maintain integrated, competitive, community-based employment, which is an important part of their recovery, rehabilitation, and habilitation process. The Department is requesting to add 50 slots to allow more individuals diagnosed with a serious mental illness to access employment support services through Extended Services. Total cost for the additional slots will be \$454,800. Also additional funding of \$100,189 is being requested for the contractor for the administrative costs related to the additional slots and maintenance of the Extended Services data system.

Change Group: A	Change Type: C	Change No: 311	Priority: 3
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Supported Employment for Integrated Dual Disorder Treatment

The Department is requesting to expand the evidence-based model of supported employment in the North Central, Lake Region, Northeast, South Central and West Central Human Service Center Integrated Dual Disorder Treatment (IDDT) programs to serve approximately 46-52 additional individuals. The evidence based model of supported employment is proven to be the most effective model of supported employment for individuals with serious mental illness and chronic substance abuse disorders. This program puts people who have never considered employment to work or increases their interest to consider work.

Change Group: A	Change Type: C	Change No: 312	Priority: 3
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TBI Prevocational Skills

The current provider of prevocational services is not able to spend adequate time with the individuals they serve. The individuals receive only an average of 2 hours per month with the current funding available. On average, an individual needs 8 hours of service per month to be adequately prepared to work with the Vocational Rehabilitation Program or to be able to return to work on their own. This additional funding would bring the total number of individuals that would be served to 50, for 8 hours per month, vs the current 24 individuals for 2 hours per month. A waiting list currently exists in the Fargo region for this service.

Change Group: A	Change Type: C	Change No: 313	Priority: 3
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Other Extended Services Slots

Currently, forty-six individuals with the most significant disabilities maintain employment due to the support they receive from the extended services program. The average hourly and monthly earning for these 46 individuals are \$8.76 and \$882. On average, individuals receiving extended employment are earning \$2.00 for every \$1.00 spent by the state for the extended services they receive.

There is a need for 24 additional slots for the Other Extended Services program.

The OAR anticipates 3 individuals will enter the program each quarter of the 2015-2017 Biennium.

Change Group: A	Change Type: C	Change No: 314	Priority: 3
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TBI Extended Services

Currently, five individuals that experience the functional limitations associated with a Traumatic Brain Injury maintain employment due to the support they receive through the extended services program. The sixth slot has been designated for an individual in the process of securing employment. The average hourly and monthly earnings for these five individuals are \$7.94 and \$335.91.

Currently there are 6 slots for Traumatic Brain Injury (TBI) Extended Services. The program is at capacity and a waiting list exists. Extended Services provides job coaching that helps consumers maintain integrated, competitive, community-based employment, which is an important part of their recovery, rehabilitation and habilitation process. Additional slots would allow 35 more individuals diagnosed with a traumatic brain injury to access employment services through Extended Services.

The OAR anticipates 4 or 5 individuals will enter the program each quarter of the 2015-2017 biennium.

Change Group: A	Change Type: C	Change No: 315	Priority: 3
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Developmental Disabilities Nurse FTE

It has been identified that the division lacks appropriate services/supports for consumers with complex medical needs. This FTE would provide the expertise needed to work with the nurses at the provider agencies, review care plans as necessary and review general event reports that are medical in nature. This position would be able to collaborate with other entities (i.e. Board of Nursing, Dept. of Health, etc.) to ensure services continue to evolve to support the consumers in the Developmental Disabilities Division.

Change Group: A	Change Type: C	Change No: 316	Priority: 3
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Increase in Wards for DD Guardianship

Catholic Charities is requesting an increase in the number of wards they serve. The Department anticipates reaching current capacity of 449 within six months of the new biennium. Because of this the Departments is requesting an additional 20 slots for the 2015-2017 biennium.

Change Group: A	Change Type: C	Change No: 317	Priority: 3
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Autism Administrative Staff Officer

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Autism Services is currently a division of one person. The unit develops, manages, reports, and monitors the autism waiver, autism voucher, and autism training. In addition, the position is the 'go-to' person in the state on autism. This service unit is separate from the DD Division as these youth do not qualify for traditional DD services. Due to this, methodology to capture data, Medicaid authorizations, and reporting functions have been developed. As these autism services mature, the data will need to be compiled, analyzed, and reported. There is a need for administrative support so the autism coordinator can attend to programmatic and leadership functions.

Change Group: A	Change Type: C	Change No: 318	Priority: 3
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Increase in Current Autism Waiver Slots

Effective December 1, 2015, increase autism waiver slots by 30 for a total of 77 slots. The autism waiver began in 2010 with 30 slots. 17 additional slots were approved in the 2013 Legislative Session. The autism waiver amended in the fall of 2013, and now has a total of 47 slots. This amended waiver was approved by the Center for Medicaid and Medicare on June 1, 2014. Currently, based on the applications and transitions from the previous waiver, 53 slots could be utilized. This estimate is based on activity within two months of the waiver being approved. The Autism Coordinator receives 5 to 10 calls a day requesting information about the waiver and voucher program. The operating expenses include the cost of software licenses for additional slots.

Change Group: A	Change Type: C	Change No: 319	Priority: 3
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Additional Autism Voucher Slots

As of 9/15/2014, the autism voucher program had 19 parents or guardians of individuals with autism between the ages of three years up to 18 years of age apply in the 10 weeks since it was made available. The Department currently has 43 slots and is requesting to expand the voucher by 20 slots to serve a total 63 individuals at a rate of \$1,041.67 per month.

Change Group: A	Change Type: C	Change No: 320	Priority: 3
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Child Welfare Regional Supervisors

Regional Human Service Centers are seeing an increased need for child welfare county supervision work. Trends and data indicate an increase in foster care cases, child protective service investigations and institutional child protective service investigations. Specifically, the three regions with the largest increase are NC, SE, and WC in respect to data submitted from 2011 through 2014.

Change Group: A	Change Type: C	Change No: 321	Priority: 3
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10 Bed Crisis Residential/Transitional Living

During calendar year 2013, NCHSC completed 106 State Hospital (SH) screenings. The Center does not have a Crisis Residential Unit (CRU), and therefore these clients were admitted to the SH. The Extended Care Director estimated between one-half and two-thirds of these clients could have been served by a CRU. There is also a need for a Transitional Living facility (TL) in the Minot region to assist those being discharged from the SH to transition back into the community with assistance and those needing longer term assistance with their daily living. This facility would assist in stabilizing consumers long term which will reduce inpatient and SH stays. In order to meet the needs in the Minot & Williston regions, the Department is requesting funding to contract for a combination facility that consists of a 5 bed CRU and a 5 bed TL. The Department anticipates a January 1, 2016 start date.

Change Group: A	Change Type: C	Change No: 322	Priority: 3
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DD Case Managers

NCHSC, LRHSC and NEHSC are above their allowable DD case manager to client ratios. North Dakota Administrative Code 75-05-05-01 requires the average case management unit be no more than 60 consumers per case manager. NCHSC is currently at 62.5; LRHSC is currently at 62.83 and NEHSC is currently at 61. With the increasing population in the Minot, Devils Lake and Grand Forks regions, an additional case manager for each HSC will be required in the upcoming biennium.

Change Group: A	Change Type: C	Change No: 323	Priority: 3
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4 Additional Beds for Alternative Care Services (ACS)

WCHSC currently contracts for 10 Detoxification Management (Social Detox) and crisis residential beds for those in a behavioral health crisis (mental health or addiction) and are in need of short term residential care for stabilization. The client may meet the criteria for a stay of as little as three days and for as long as up to five weeks. Admission into the ACS beds would assist the Bismarck Region in decreasing the need to make admissions to the local hospitals and inpatient psychiatric units, as well as decrease admissions to the ND State Hospital. Those admitted into ACS are allowed to remain closer to their natural supports while providing them a safe place to address their need for stabilization from their behavioral health crisis. All 10 beds are often filled, clients are then placed on a waiting list and are not receiving the level of care needed. The OAR anticipates a start date of January 1, 2016.

Change Group: A	Change Type: C	Change No: 324	Priority: 3
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IDDT Programming - 3 FTE

The Department is requesting 1 FTE for an Advanced Clinical Specialist, 1 FTE for a Registered Nurse II, and 1 FTE for a Human Service Aide II to be able to expand our Integrated Dual Diagnosis Treatment (IDDT) program. With WCHSC's current staffing pattern the IDDT program is at the maximum capacity. IDDT is an evidenced based treatment program which uses a co-occurring mental health and substance abuse treatment model and a team approach with a high amount of consumer input. The IDDT program has specific guidelines regarding caseload per FTE. WCHSC currently has 30 clients on a waiting list due to the lack of adequate staffing to meet the requirements of this model.

Change Group: A	Change Type: C	Change No: 325	Priority: 3
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10 Bed Residential Addiction

BLHSC is requesting a 10 bed short term residential facility to provide crisis residential and social detoxification services for addiction clients in the Dickinson Region. Currently the only option for social detoxification is a single crisis residential unit at the Residential Care Center (RCC) operated by BLHSC. When this bed is full, clients are sent to the county jail or the State Hospital. This facility would reduce those admissions and allow the client to receive stabilization and detoxification in their community where a supportive environment exists. The Department anticipates a July 1, 2016 start date for this OAR.

Change Group: A	Change Type: C	Change No: 326	Priority: 3
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15 Bed Unit for Tompkins Program

Both DHS and DOCR recognize the value of the Tompkins Rehabilitation Center in treating addiction and preventing addicted individuals from re-offending and returning to the corrections system. The number of inmates who could benefit from the service continues to rise, but the current Tompkins program is consistently full. Therefore, there is a need to add an additional 15 bed unit on the grounds of the State Hospital which would be operated by 11 full time FTEs, consisting of 2 Addiction Counselors, 2 Direct Care Supervisors and 7 Direct Care Staff.

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Change Group: A	Change Type: C	Change No: 400	Priority: 4
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Inflation

Provides an inflationary increase of 4% to service providers for both of the years of the biennium.

Change Group: A	Change Type: C	Change No: 600	Priority: 6
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Enhancement of Services

Change Group: A	Change Type: C	Change No: 601	Priority: 6
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Assisted Living

Currently, there are 73 licensed assisted living facilities in North Dakota. Licensure consists of an annual fee and application and a license for the food and lodging portion from the Health Department. This request is due to an increased number of complaints coming to DHS concerning assisted living facilities. One license was revoked in 2014 and approximately 16 complaints were received in the past calendar year. Current Medical Services staff are unable to do thorough on-site reviews and follow up of the concerns in a timely manner.

This OAR has an anticipated start date of January 1, 2016.

Change Group: A	Change Type: C	Change No: 602	Priority: 6
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Long Term Care Consultant for Pay for Performance

This OAR is for a consultant to help develop a Pay for Performance plan for Nursing Homes. The actual financial estimates of a Pay for Performance plan would be needed to build the 17-19 budget. The anticipated cost for the consultant would be \$50,000.

Change Group: A	Change Type: C	Change No: 603	Priority: 6
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Personal Care with Supervision

Personal Care with Supervision was approved by the 2013 Legislative assembly. Up to 24 hours of supervision may be provided to individuals who need monitoring to assure their continued health and safety. This OAR will add funds to provide for an increased rate to assure providers (Qualified Service Providers - QSP's) are available and willing to provide the service and also includes funding for growth of the program over the biennium from 13 individuals to 20 with an anticipated start date of July 1, 2015.

Change Group: A	Change Type: C	Change No: 604	Priority: 6
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Companionship Services

Statewide Stakeholder Meetings and interested parties have testified to the need for companionship in the Home and Community Based Services to address the issues of loneliness and isolation. The companionship service would serve individuals that meet nursing facility level of care who are currently receiving personal care services in Levels B and C or those individuals being served in the HCBS waiver. These individuals are generally at the greatest risk for institutionalization. The companionship service would allow up to 2 hours per week of companionship if they are living alone. Family members would not be paid for this service. The Department anticipates a January 1, 2016 start date for these services.

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Post Adoption Services

The Department is requesting to provide services for families to maintain adoptive placements and permanency. These services will assist in avoiding adoption disruptions and subsequent re-placement of children in foster care. Services would include, but not limited to; crisis intervention, primarily through phone contact with families and referral for on-going case management services, therapeutic services, mental health services (in-home and residential care) and respite care. The Department anticipates a January 1, 2016 start date for these services.

Change Group: A	Change Type: C	Change No: 606	Priority: 6
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Family Team Decision Making

Family Team Decision Making (FTDM) is an evidenced based intervention strategy that provides immediate support for children and families when critical decisions must be made to ensure child safety. FTDM is a facilitated team process including parents, guardians, extended family members, youth, service providers, child welfare staff and other caregivers who come together to make decisions regarding the safety and placement of the child.

FTDM has proven to be an out of home placement diversion strategy in many states resulting in significant reductions in the number of children placed in foster care. The Department currently provides FTDM services in Burleigh/Morton, Grand Forks and Cass Counties and is requesting to expand this service to six counties at a cost of \$25,000 per year, per site for the 15-17 biennium.

Change Group: A	Change Type: C	Change No: 607	Priority: 6
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Parents LEAD

Parents LEAD is an evidence-based underage drinking prevention program.

The Parents LEAD program began with the primary focus as underage drinking; however, recently work has shifted towards risk and protective factors that apply to both mental health and substance abuse.

In order to appropriately enhance Parents LEAD to cover the prevention of both mental illness and substance use issues, additional funding is necessary to develop content, adapt the website, and evaluate and promote the expansion.

Change Group: A	Change Type: C	Change No: 608	Priority: 6
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Trauma-Informed System of Care

During the 2014 DHS stakeholder meetings 50-60% of locations visited indicated more complex client issues and were concerned with the number of youth placed out-of-state for treatment. These children are traumatized and multiple placements make the situation worse.

By focusing on and implementing evidenced-based trauma awareness and treatment, children will have better opportunities to do better in their lives.

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The funding will support ongoing statewide implementation of a trauma-informed system of care. This work includes training and consultation with the child welfare system, HSC's, medical providers, other system partners, and the RCCF and PRTF's.

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NDCARES

ND Cares is a coalition dedicated to strengthening an accessible, seamless network of support for Service Members, Veterans, Families, and Survivors in North Dakota, initiated in 2013 through a Substance Abuse and Mental Health Services Administration (SAMHSA) initiative.

ND Department of Human Services has the infrastructure and capacity in place to support the ND Cares statewide efforts and initiatives.

Funding for the this effort would support the following:

- Facilitation of ND Cares Data Committee [\$80,000]: Contract for data support services and development of data products.
- Professional Development Trainings [\$20,000]: Provides funding to enhance the Fall and Spring Behavioral Health Conferences by integrating military specific trainings, presenters, and stipends to enhance the capacity of key stakeholders.
- Website/Communication efforts [\$30,000]: Acquiring relevant URL, development and design of ND Cares website and related communication efforts.

Change Group: A	Change Type: C	Change No: 610	Priority: 6
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Increase Age Limit of Autism Waiver to 9 Years

Effective December 1, 2015, increase age of children served in the autism waiver to cover children birth through age 9. From July 1, 2015 until June 30, 2017 there are approximately 12 children that would age out of the current autism waiver. These children, unless they qualify for the DD Traditional waiver, will not have similar services available to them. If the age is extended by two years, there should be no children that age out of the Autism Services Waiver prior to June 30, 2017. The operating expenses include the cost of software licenses for additional children.

Change Group: A	Change Type: C	Change No: 611	Priority: 6
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Mobile On-Call Crisis Services

The Mobile On-Call Service in the Southeast Region has successfully helped clients remain in the community and diverted them from inpatient hospitalizations. The program links clients to services to prevent future crises and to help sustain their recovery so they can remain living in their homes and communities. The amount requested is to expand Mobile On-Call Services to the remaining human service center regions.

Implementation by Region is projected to occur on or before these dates; January 1, 2016 - Lake Region, Northeast and South Central; July 1, 2016 - Northwest and Badlands; October 1, 2016 - North Central and West Central.

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Peer Support Specialists

The Peer Support program is a key part of the recovery effort and an integral part of the tiered case management system. It is important that peers of consumers deliver peer support services throughout the eight regions of the state. Peer support has been implemented in all 8 regions as an evidence-based practice and is a promising approach to assist people in recovery.

With this expansion, the Department will issue contracts to peer support specialists in each of the eight regions of the state. The larger centers will contract for 2 peer support specialists per region (NC, NE, SE, and WC) and the smaller centers for 1 peer support specialist per region (NW, LR, SC and BL).

Change Group: A	Change Type: C	Change No: 613	Priority: 6
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DD Crisis Beds

In December 2012, a subcommittee of the transition task force submitted a crisis infrastructure plan for DD crisis units for the HSC's. This OAR would provide funding for a rental unit in Minot, Grand Forks, Fargo, and in Dickinson to be used by people receiving DD services however, they are in need of a temporary placement away from their current living situation. When the unit is occupied, the client will pay the rent if they do not have to maintain a separate residence. Providers will staff the unit with existing staff from their previous setting for the individual needing the service. Total funds is calculated using information received from regions on rental costs in their area.

Change Group: A	Change Type: C	Change No: 614	Priority: 6
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Medically Fragile ICF in Grafton, ND

Individuals who currently reside at the Health Services Center at the Life Skills and Transition Center are medically complex and require 24-hour ongoing nursing assessment and multidisciplinary management to maintain their best possible health. The department is looking for a private partner to be the landlord of two adjoining homes that would serve eight people. Each home will have separate and distinct areas for meal preparation and kitchen facilities. The home's design may incorporate common multipurpose space for programming and leisure supports. The Department would provide the staff and would expect the homes to be a reasonable distance from the LSTC as it is anticipated that staff may need to travel between the homes and the LSTC. The OAR would cover the property costs associated with the two homes.

Change Group: A	Change Type: D	Change No: 200	Priority: 2
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Oil Patch Add on - Williston, Minot and Dickinson Regions

The oil industry in North Dakota has affected the retention of staff in the Department of Human Services. In order to retain the existing staff, the Department implemented an oil-patch add-on for the Williston, Dickinson, and Minot staff of \$500 each month. This OAR requests funds to continue the oil-patch add-on for DHS staff in these 3 regions.

Change Group: A	Change Type: D	Change No: 500	Priority: 5
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Information Technology Projects

Change Group: A	Change Type: D	Change No: 501	Priority: 5
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Eligibility Modernization Project

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The Eligibility Modernization Project is the rewrite of the TECS and Vision systems (which are used for the Medicaid, Temporary Assistance for Needy Families(TANF) and Supplemental Nutrition Assistance Program (SNAP) programs) with the addition of the Childcare and Low Income Home Energy Assistance Program (LIHEAP) programs into one all-inclusive system. This project will streamline the work of county eligibility workers by combining four individual systems (TECS, Vision, LIHEAP and Child Care) into one all-inclusive system.

Change Group: A	Change Type: D	Change No: 700	Priority: 7
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Capital Projects

Change Group: A	Change Type: D	Change No: 701	Priority: 7
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Heating Plant Repairs and Upgrades for State Hospital

The North Dakota State Hospital (NDSH) and James River Correctional Center (JRCC) share a campus in Jamestown. By agreement, NDSH pays the cost of operating the centralized heating plant, including salaries, operating expenses, equipment and extraordinary repairs. 60% of the cost of coal, natural gas, heating fuel, electricity, and water are paid by NDSH and 40% by JRCC. In order to operate the centralized heating plant for the foreseeable future, equipment repairs and upgrades are needed totaling \$1,509,156.

Change Group: A	Change Type: D	Change No: 702	Priority: 7
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Surveillance Cameras

The installation of surveillance cameras throughout the State Hospital campus will provide a level of security needed to alert security staff to the presence of potentially dangerous individuals, so staff can take appropriate action. Over 200 cameras would be installed either replacing outdated cameras, or installing cameras in new locations. Cameras mounted on the exterior of buildings would provide coverage for all outside areas of the State Hospital campus.

Change Group: A	Change Type: D	Change No: 703	Priority: 7
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Central Air for Tompkins Building

The building used for the men's units of the Tompkins Rehabilitation Center was built in 1956 as a dormitory for nursing students and does not have air conditioning. In 2009, the State Hospital installed air conditioning for the treatment rooms and meal serving areas, but the building's electrical service was not adequate to install air conditioning throughout the rest of the building. The State Hospital has tried utilizing portable air conditioners, but they are not effective for cooling the bedrooms, and window air conditioners are not an option because the windows have security screens on them. The State Hospital has a project in the 2013-15 biennium that will upgrade the electrical service to the building. This would enable the installation of central air conditioning throughout the building. Engineer's estimates are that the installation of central air conditioning would cost \$557,606.

Change Group: A	Change Type: D	Change No: 704	Priority: 7
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Heating Plant Repairs and Upgrades for LSTC

In June 2014, a study of the heating and cooling systems in the LSTC buildings was performed. The purpose of the study was to determine if the current system of using steam for heating & cooling the campus was the most economical. The conclusion of the study was that other methods would be costly to install and wouldn't be as

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efficient as operating the current plant. However, the heating plant needs \$230,000 in repairs and improvements to keep the boilers functional to provide the campus with utilities.

Change Group: A	Change Type: D	Change No: 705	Priority: 7
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6 Living Area Kitchens

A step in accommodating person-centered care is to engage direct care staff & residents in choices at mealtime by having decentralized kitchens. LSTC is requesting to remodel 6 living area kitchens at an estimated cost of \$125,000 per kitchen. The kitchens would be remodeled to accommodate the residents needs, and therefore would be wheelchair accessible with varied counter heights, include safe induction cooktops, adequate cupboards for storage of groceries and cooking utensils to allow residents access to a fully functional kitchen. The request also includes the trenching of cement floors to allow the wiring of an island and the replacement of patio doors.

Change Group: A	Change Type: E	Change No: 8	Priority:
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Remove One-Time Funding

Change Group: A	Change Type: F	Change No: 9	Priority:
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Remove One-Time Capital Items

Change Group: R	Change Type: A	Change No: 20	Priority:
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County Grant and Technology Expenditures

Provides for \$19.3 million from the general fund to provide property tax relief for counties by the state bearing the cost of the Child Welfare and Service Payments to the Elderly and Disabled grants, as well as the county technology costs.

Change Group: R	Change Type: A	Change No: 30	Priority:
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Emergency Human Services Levy

Provides \$3.9 million from the general fund to provide additional property tax relief by establishing a grant program for counties who have historically used the emergency human services levy.

Change Group: R	Change Type: A	Change No: 100	Priority:
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Executive Compensation Package Adjustment

This budget change provides funding for recommended 2015-17 compensation adjustments.

Change Group: R	Change Type: A	Change No: 110	Priority:
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Salary Equity

Provides \$6.2 million, with \$6.0 million from the general fund, for staff equity increases for difficult to fill positions.

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Change Group: R	Change Type: A	Change No: 301	Priority:
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Increase Child Care Assistance Provider Rates

Provides \$2 million from the general fund, to increase child care provider rates to assist in reducing the shortage of needed child care providers in the state.

Change Group: R	Change Type: A	Change No: 302	Priority:
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Ambulance Rate Increase

Provides \$3.8 million, with \$1.9 being from the general fund, to rebase the Medicaid reimbursement rates for ambulance services to ensure ambulance services remain viable across the state.

Change Group: R	Change Type: A	Change No: 304	Priority:
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Spousal Impoverishment

Change Group: R	Change Type: A	Change No: 306	Priority:
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Vulnerable Adult Protective Services

Provides \$1.3 million from the general fund, to establish guardianships for 52 vulnerable adults and for additional resources across the state for vulnerable adult protective services.

Change Group: R	Change Type: A	Change No: 307	Priority:
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Guardianship Establishment

Provides \$1.3 million from the general fund, to establish guardianships for 52 vulnerable adults and for additional resources across the state for vulnerable adult protective services.

Change Group: R	Change Type: A	Change No: 309	Priority:
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Change in Federal Child Care Laws

Provides \$291,140 of which \$172,459 is from the general fund, for quality day care by ensuring all day care workers have the required background checks.

Change Group: R	Change Type: A	Change No: 310	Priority:
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Severely Mentally Ill Extended Services

Provides \$554,989 from the general fund to add 50 slots for extended services for seriously mentally ill individuals to assist them in maintaining employment.

Change Group: R	Change Type: A	Change No: 312	Priority:
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TBI Prevocational Skills

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Provides \$422,000 from the general funds for prevocational services to ensure individuals with traumatic brain injury are adequately prepared for employment opportunities.

Change Group: R	Change Type: A	Change No: 314	Priority:
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TBI Extended Services

Provides \$180,783 from the general fund to add 35 slots for extended services for individuals with a traumatic brain injury to assist them in maintaining employment.

Change Group: R	Change Type: A	Change No: 315	Priority:
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Developmental Disabilities Nurse FTE

Change Group: R	Change Type: A	Change No: 317	Priority:
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Autism Administrative Staff Officer

Change Group: R	Change Type: A	Change No: 318	Priority:
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Increase in Current Autism Waiver Slots

Provides \$2.97 million, with \$1.7 million being from the general fund, to increase the age limit of the autism waiver to 9 years of age as well as to increase the number of slots available to serve children with autism.

Change Group: R	Change Type: A	Change No: 319	Priority:
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Additional Autism Voucher Slots

Change Group: R	Change Type: A	Change No: 320	Priority:
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Child Welfare Regional Supervisors

Change Group: R	Change Type: A	Change No: 321	Priority:
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10 Bed Crisis Residential & Transitional Living - NC

Provides \$903,983, with \$685,895 from the general fund, for a 5-bed crisis residential unit to reduce admissions to the State Hospital and a 5-bed transitional living unit which would be used, for example, to assist individuals being discharged from the State Hospital transition back into the community in the north central region.

Change Group: R	Change Type: A	Change No: 322	Priority:
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DD Case Managers

Change Group: R	Change Type: A	Change No: 323	Priority:
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4 Additional Beds for Alternative Care Services - WC

Provides \$283,500 from the general fund, for a 4-bed alternative care services unit to help serve individuals in a behavioral health crisis in the west central region.

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Change Group: R	Change Type: A	Change No: 324	Priority:
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IDDT Programming - WC

Provides \$393,295 from the general fund for 3.00 FTE to expand the integrated dual disorder treatment (IDDT) program in the west central region.

Change Group: R	Change Type: A	Change No: 325	Priority:
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10 Bed Residential Addiction - Bdl

Provides \$601,699 from the general fund, for a 10-bed short term residential facility to provide crisis residential and intoxication management services in the badlands region.

Change Group: R	Change Type: A	Change No: 326	Priority:
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15 Bed Unit for Tompkins Program

Provides \$1.5 million from the general fund, to expand the Tompkins Rehabilitation Center for treating addiction and preventing addicted individuals from re-offending and returning to the corrections system.

Change Group: R	Change Type: A	Change No: 400	Priority:
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Provider Inflationary Increases 4 and 4

Provides \$90.1 million of which \$48.1 million is from the general fund, for inflationary increases of 4 percent each year of the biennium, to service providers.

Change Group: R	Change Type: A	Change No: 601	Priority:
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Assisted Living

Change Group: R	Change Type: A	Change No: 603	Priority:
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Peronal Care with Supervision

Change Group: R	Change Type: A	Change No: 605	Priority:
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Post Adoption Services

Provides \$260,335 including \$169,140 from the general fund for post adoption services.

Change Group: R	Change Type: A	Change No: 608	Priority:
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Trauma-Informed System of Care

Provides \$287,630, with \$229,130 from the general fund, for the statewide implementation of a trauma-informed system of care which will include training and consultation for child welfare providers, so children will have a better opportunity to succeed in life.

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NDCARES

Provides \$130,000 from the general fund for ND Cares for the development of data and training materials and website communications to strengthen a seamless network of support for service members, veterans and families.

Change Group: R	Change Type: A	Change No: 610	Priority:
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Increase Age Limit of Autism Waiver to 9 Years Old

Change Group: R	Change Type: A	Change No: 611	Priority:
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Mobile On-Call Crisis Services

Provides \$1 million from the general fund, to expand the mobile on-call service currently in the southeast region to a statewide program to help clients remain in the community and divert them from inpatient hospitalizations.

Change Group: R	Change Type: A	Change No: 614	Priority:
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Medically Fragile ICF in Grafton

Provides \$1.5 million, with \$750,000 being from the general fund, to create 2 adjoining medically fragile units in the community of Grafton to serve 8 individuals currently residing at the Life Skills and Transition Center.

Change Group: R	Change Type: A	Change No: 615	Priority:
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Centers for Independent Living

Provides \$500,000 from the general fund, for the Centers for Independent Living to assist individuals with disabilities to live independently.

Change Group: R	Change Type: B	Change No: 501	Priority:
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Eligibility Modernization Project

Change Group: R	Change Type: B	Change No: 701	Priority:
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Heating Plant Repairs and Upgrades for State Hospital

Provides \$2.7 million from the general fund to provide necessary heating and cooling repairs and upgrades at the State Hospital, and the Life Skills and Transition Center and for additional surveillance cameras located throughout the State Hospital campus to help ensure the safety of patients and staff.

Change Group: R	Change Type: B	Change No: 702	Priority:
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Surveillance Cameras

Change Group: R	Change Type: B	Change No: 703	Priority:
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Central Air for Tompkins Building

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Heating Plant Repairs and Upgrades for LSTC

Change Group: R	Change Type: B	Change No: 705	Priority:
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6 Living Area Kitchens

Provides for \$750,000 from the general fund to remodel six living area kitchens at the Life Skills and Transition Center to accommodate person-centered care by engaging residents in meal preparation and providing care in smaller units.