



HB 1012

Senate Appropriations Committee; Human Resources Division
Senator Dever, Chairman

Kim Mertz | Section Director, Healthy and Safe Communities
Public Health Division – March 11, 2025



Health & Human Services

Section Overview: Healthy & Safe Communities



Who we are

- Dedicated and Passionate Professionals
- Subject Matter Experts
- Collaborators
- Innovators
- Award Winners
- Empowering

Our role

- To support individuals, families and communities by providing quality preventive programs and services that equitably protect and enhance the health and safety of all North Dakotans

Services

- Chronic Disease Prevention
- Community Support and Training
- Injury and Violence Prevention
- Maternal, Child and Family Health
- Workforce Support

Partners | Providers

- Health Providers and Systems
- Schools and Universities
- Community-based Organizations
- Businesses
- State and Local Agencies
- Tribal Entities
- And so many more!

Healthy & Safe Communities Section

Mission: The purpose of the Healthy & Safe Communities Section is to support individuals, families and communities by providing quality preventive programs and services that equitably protect and enhance the health and safety of all North Dakotans.

Organizational Chart
January 2025

+ NDIT Employee
* Non-Permanent Positions
** Assistant Unit Directors



Kim Mertz, Section Director

Lead Section Support Team

Brittany Martinez, Executive Assistant
Sara Upgren, Administrative Assistant



Jennifer Schmidt, Strengthening US Public Health Infrastructure,
Workforce & Data Systems Grant Manager



Primary Care Office

Natalie Jung, Director
Kenneth Steiner, Healthcare Workforce Manager
Liza Root*, Workforce Coordinator



COMMUNITY ENGAGEMENT Krissie Mayer, Director

Assistant Director
Alicia Belay**

Systems and Performance Program Director
Jo Gourneau

Special Populations Coordinator
Jordan Laducer

Community Engagement Specialist
Katarina Domitrovich

Quality Improvement and Accreditation Assistant
Rhoda Adewunmi

Community Engagement Coordinator
Hayden Kemp

Community Liaisons
Luisa Hoyos/Agnes Mason*/Nada Soliman*

Tribal Health Liaisons
Hunter Parisien/Cheyenne Smith
Luticia Mann/Rylee Dahlen

Administrative Support
Sara Upgren



FAMILY HEALTH & WELLNESS Deanna Askew, Director

Breastfeeding/Childhood Obesity Prevention
Mikaela Schlosser/Sarah Massey

Child Passenger Safety/Vision Zero
Dawn Mayer

Domestic Violence/Rape Crisis
Deanna Askew/Mallory Sattler/Faye Kihne

Injury Prevention
Beth Oestreich

**Reproductive Health/Family Planning
Men's Health**
Cora Rabenberg**/Sarah Scott
Angela Reinarts

**Special Supplemental Nutrition Program for
Women, Infants & Children (WIC)**
Amanda Varriano/Kristi Miller
Kim Hinnenkamp/Carley Metzger

Administrative Support
Janet Lucas/Kayla Conklin



HEALTH PROMOTION & CHRONIC DISEASE PREVENTION Susan Mormann, Director

Community Clinical Coordination
Jesse Tran**

Colorectal Cancer Screening Initiative
Jesse Tran**

Comprehensive Cancer Control
Annette Clark/Mikaila McLaughlin

**Diabetes Prevention & Control/
Preventive Health Block Grant**
Brianna Monahan

Heart Disease & Stroke Prevention
Tiffany Knauf

Oral Health
Cheri Kiefer/Toni Hruby/Vanessa Bopp
Drew Goebel, DDS*
Mary Strube*/Vacant*

Tobacco Prevention & Control
Neil Charvat/Kara Hickel/Kara Backer/Abby Erickson

Women's Way
Susan Mormann/Paulette DeLeonardo
Barbara Steiner/Amy Keller

Administrative Support
Teri Arso/Kayla Conklin



SPECIAL HEALTH SERVICES Kimberly Hruby, Director

**TITLE V Maternal and Child Health (MCH)
Director**
Kimberly Hruby

Coordinated Services
Danielle Hoff**/Heather Kapella
Dorothy Schneider*

Financial Coverage
Tina Feigitsch/Kristi Stamness

Newborn Screening & Follow-up
Joyal Meyer/Amy Burke
Tina Feigitsch/Heather Kapella

**Title V/Children with Special Health Care Needs
System Enhancement**
Danielle Hoff**/Heather Kapella
Amy Burke/Joyal Meyer

Medical Director
Joan Connell, MD

Administrative Support
Kelsie Morris

Healthy and Safe Communities/Public Health

Team Structure and Function

Healthy and Safe Communities			
23-25 FTE	25-27 FTE Requested	# of Temporary	# of Vacancies
58	58	6	1

Average Age	45.00
Avg Years of Service	10.0
Retirement Risk	8.0%
Turnover 2023	4.0%
Turnover 2024	7.0%

2023-2025 Biennium Impacts



Strategies and resources to serve North Dakotans



Collaborations, Community
Engagement, and Core
Functions of Public Health



Data and Evidence-based
Decision Making



Policy, Systems and
Environmental Changes
(PSE)

Public Health Infrastructure

is made up of the **people, services, and systems** needed to promote and protect health in every U.S. community



A1 Strategy



WORKFORCE

- Retention
- Recruitment
- Equity

40% of funding to
LPH: \$3,373,462

A2 Strategy



FOUNDATIONAL CAPABILITIES

A3 Strategy



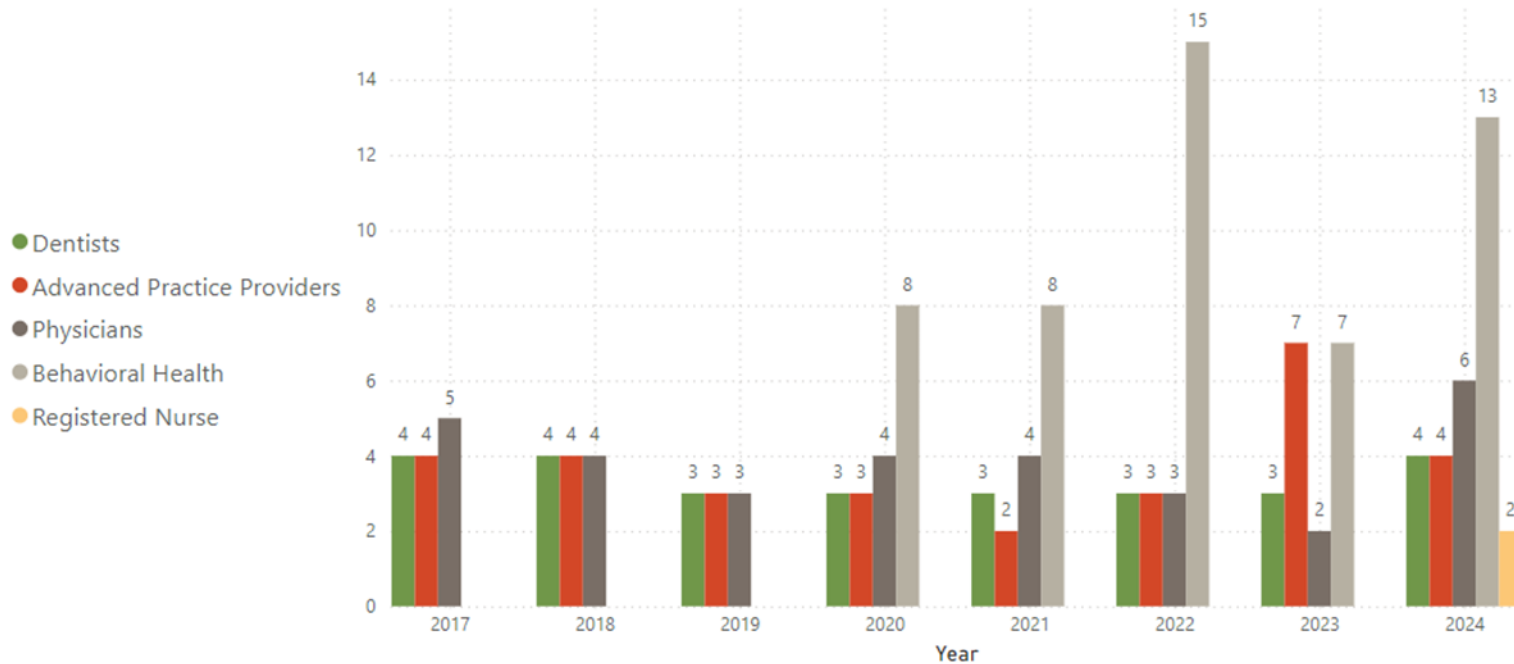
DATA MODERNIZATION

- CORE
- LDX - Laboratory Data Exchange
- ACCELERATION

Primary Care Office

Mission: to improve primary care service delivery and workforce availability

North Dakota Healthcare Loan Repayment Program and
Dental Loan Repayment Program participants - 2017-2024



Total providers: 141

Breakdown:

Dentists: 27

Advanced Practice Providers: 30*

Physicians: 31

Behavioral Health: 51**

Registered Nurse: 2

Key: *Advanced Practice Providers include Physician Assistant, Advanced Practice Registered Nurse, Certified Nurse Midwife, Certified Registered Nurse Anesthetist, Doctor of Nursing Practice, and Nurse Practitioner

** Behavioral Health includes Licensed Addiction Counselor, Licensed Professional Counselor, Licensed Social Worker, Behavioral Analyst, Behavioral Health Registered Nurse (Registered Nurse - Separate discipline added in 2023)



APPLICATIONS NOW OPEN!

[Learn More & Apply. »](#)

North Dakota Public Health Leadership Academy

Elevate your impact in public health with the North Dakota Public Health Leadership Academy! This transformative five-month program is designed for emerging and current public health leaders who work in public health (local, state, tribal or academic), Federally Qualified Health Centers (FQHCs) and similar types of healthcare settings. Collaborate with a diverse cohort to tackle complex challenges in your community and implement effective systems change strategies.

Join us for an in-person kick-off on Jan. 16–17 in Bismarck, followed by four engaging virtual sessions. Participants will benefit from a [CliftonStrengths](#) assessment and group coaching to enhance their leadership skills.

Apply by Friday, Dec. 6 at 11:59 pm CT using this [application link](#).

For questions, email: phperformance@nd.gov.

NORTH Dakota | Health & Human Services
Be Legendary.

SCHEDULE

January – May 2025

In-person sessions:

Jan. 16 1–5 pm CT
Jan. 17 8:30 am–12:30 pm CT

Virtual sessions:

Feb. 20 9 am–12 pm CT
March 20 9 am–12 pm CT
April 17 9 am–12 pm CT
May 15 9 am–12 pm CT

COST

FREE for up to 40 emerging public health leaders.

Individuals who need their travel expenses covered for attending the in-person event can apply for travel reimbursement.

RMPHTC
Rocky Mountain Public Health Training Center
A Member of the Public Health Learning Network

Community Engagement

- Tribal and Health Liaisons
- Local Public Health Liaison
- Accreditation
- Public Health Leadership Academy
- Multi-Partner Health Collaborative (MPHC)

Family Health & Wellness

- **Breastfeeding/Nutrition**

- WIC served 16,601 participants, including 4,877 infants
- 213 workplaces designated Infant Friendly impacting over 45,150 employees across North Dakota

- **Injury Prevention**

- The Poison Hotline answered 6,056 calls
- Provided 341 pack-n-plays to families for infant safe sleep through 46 Cribs for Kids distribution sites
- 30 car seat distribution programs provided 469 car seats to those who could not afford them

- **Women's and Men's Health**

- Alternatives to Abortion Program served 2,313 clients for a total of 6,259 client visits (4,263 prebirth, 1,913 postbirth)

Welcome to North Dakota's
Pregnancy and Parenting Website!

Where can
I go for
pregnancy
resources

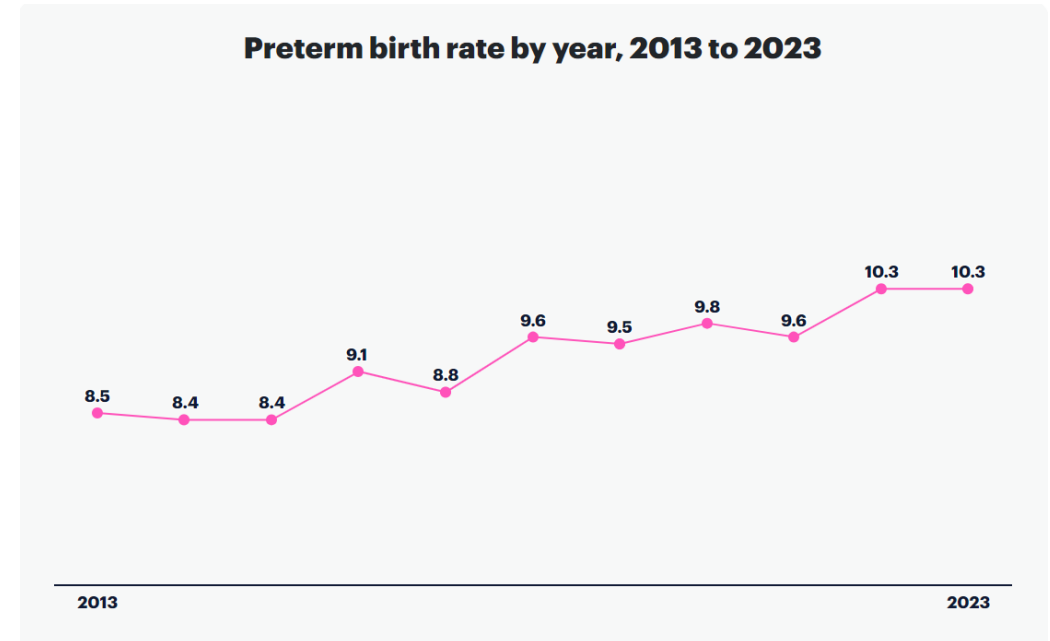


The guide for new
parents is born.

2025-27 Executive Budget Highlight: \$2,000,000 for Maternal and Child Health Programs

- Expand access to care for women's health services
- Preconception/reproductive health services
- Enhance postpartum services and recognize urgent maternal warning signs in the postpartum period
- Strengthen chronic disease prevention and management (chronic health conditions make people more likely to have a preterm birth)
- Screenings for obesity, tobacco use, drug and alcohol use, mental health, intimate partner violence, hypertension, substance use disorder, etc.

North Dakota Preterm Birth Rate by Year
(a birth occurring before 37 completed weeks of gestation)
2024 March of Dimes Peristats



2025-27 Executive Budget Highlight: Increase of \$2,250,000 for Domestic Violence/Sexual Assault

- Staff capacity and infrastructure
- Expand and add new services
 - Support groups
 - Transitional housing
 - Mobile advocacy
 - Transportation
 - Prevention
- Partnerships



Domestic Violence Facts | 2023



6,131
new victims

served by



19
Domestic Violence/Sexual
Assault Crisis Centers

OF THOSE CASES:

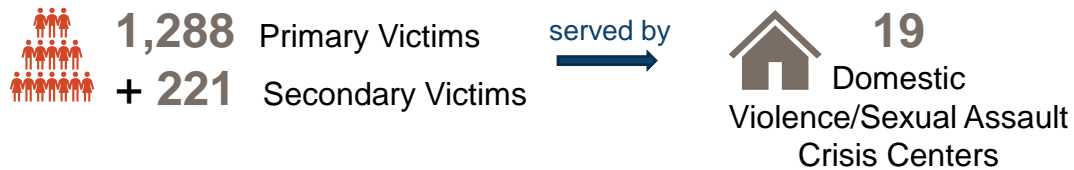
- **83%** of the victims were women
- **105** women were pregnant at the time they were assaulted
- **21%** of new victims were people with disabilities
- At least **4,205** children were directly impacted by these incidents

A CLOSER LOOK



- At least **58%** of victims served were physically abused.
- Weapons were used in at least **11%** of the cases identified. Guns were used in **23%** of the cases and knives were used in **17%** of the cases involving weapons.
- In at least **33%** of cases, the abuser had a history of abusive behavior with other adults, including previous partners.
- Alcohol use by the abuser was indicated in **23%** of the new cases. Alcohol use by both the victim and offender was indicated at **4%** of the cases.

Sexual Assault Facts | 2023



OF THOSE CASES:

- At least **1,042** victims were female
- **55%** of cases were male assailants (795), a female victim
- **221** assailants were female
- **6%** of cases were male assailants, a male victim

A CLOSER LOOK



- At least **242** of primary victims were under the age of 18 years old at the time of the assault(s).
- In adult cases, **6%** of assailants were strangers. In child cases, **4%** of the assailants were strangers.
- In at least **24%** of all cases, the assailant was a friend/acquaintance/date of the victim.
- At least **34%** of the assaults occurred in the victim's or assailant's home.
- **31%** of new victims were people with disabilities. Of those, **17%** were people with developmental disabilities, **29%** had physical disabilities, and **54%** were people with mental health disabilities.



North Dakota Cancer Plan 2025 - 2035

Know Your Numbers



Health Promotion/ Chronic Disease Prevention

- New 10-year cancer plan
- *Women's Way*: 998 individuals received breast and cervical cancer screening
- Colorectal Cancer Screening: number of providers increased from 16 to 143
- Diabetes and heart disease pharmacy services program
- Seal!ND – school-based dental program. In 2023-24:
 - 70 participating schools
 - 3,070 children screened
 - 1,817 referrals

Donated Dental Services

Program history:

- Established in 1998
- 1,105 total patients served since inception
- \$4,860,408 in total care donated by volunteers
- Volunteer network: 94 dentists and 7 laboratories

"I can smile, I can talk without hiding my mouth, I am able to eat without choking. Most of all I'm regaining my confidence. This organization and the volunteer dental offices that help people like me need to know how greatly you affect so many lives. I am grateful beyond words."

Ronald McDonald House Care Mobile

Between 7/1/2024 – 12/31/2024, the Care Mobile:

- Visited 13 sites
- Treated 437 children
- Provided a total value of \$265,779 in dental services
- About 26% of the children were Medicaid eligible
- 1.5% had private insurance
- 72.5% were uninsured

Tobacco Prevention and Control

The State of Tobacco Control in North Dakota: 2023 – 2025

Expanding Access To Treatment and Adapting in a Changing Landscape



Prepared for

**NORTH
Dakota**

Be Legendary.

Health & Human Services

Prepared by



Professional
Data Analysts

TABLE OF CONTENTS

INTRO

This biennial synthesis report of the North Dakota Tobacco Prevention and Control Program (TPCP) is a strategic evaluative effort that culminates in this summary report to the North Dakota Legislature, tobacco control partners, and the public.

01

Who is Using Tobacco Products?

Pages 4–8

- + Definitions in a shifting landscape
- + Youth are using different products
- + Adult use and chronic disease
- + American Indian commercial tobacco use

02

Nicotine Dependence Treatment

Pages 9–17

- + Effective treatment across products
- + Effective promotion
- + TTS trainings
- + NDQuits Cessation grantees

03

Expanding Access to Treatment

Pages 18–27

- + Building capacity within schools
- + Behavioral health
- + North Dakota Medicaid coverage
- + Building capacity in tribal nation
- + Maternal population

04

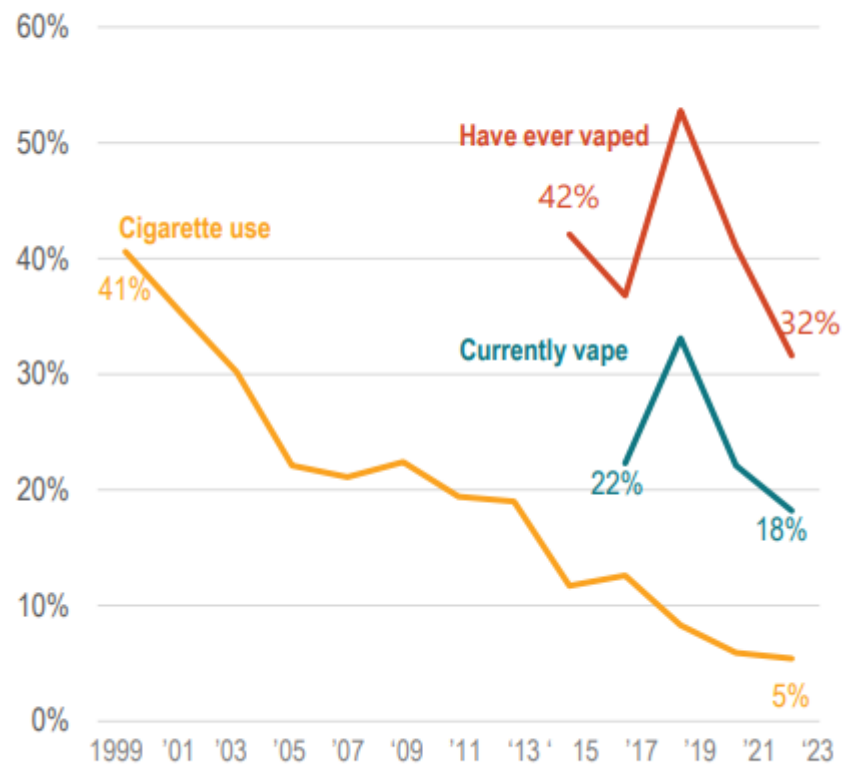
Innovative Collaborations to Increase Reach

Pages 28–37

- + Youth and young adults
- + Flavored tobacco products
- + Pharmacist pilot
- + Behavioral health providers
- + Innovative collaborations

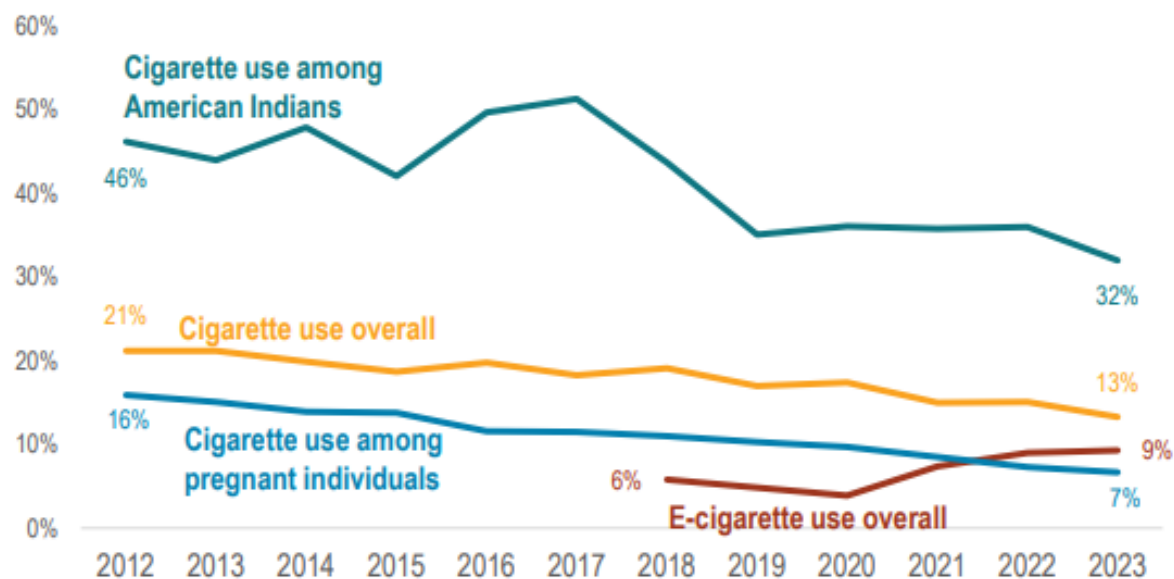
Data Highlights – Progress and Challenges

Nearly one in three North Dakota high school students **have ever vaped** and one in five **currently vape**. **Cigarette use** has declined.



ND YRBS, 1999-2023

Current use of cigarettes and e-cigarettes over time



North Dakota BRFSS, 2012 – 2023

Special Health Services

Coordinated Services

- Provided 19 individuals with 90 requests for metabolic food
- 350 children had 1,440 visits to multidisciplinary clinics

Financial Coverage

- Helped families pay for medical services for 272 eligible children, including health care visits and tests to diagnose chronic health conditions early and specialty care needed for treatment

System Enhancement

- 348 children received care coordination
- 390 information and referral requests were completed for families

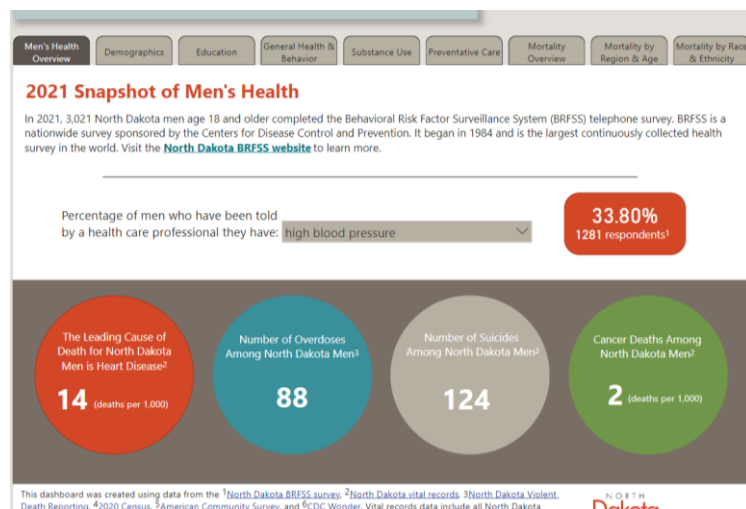
Note: All data is from 2023

Newborn Screening identifies conditions that can affect a child's long-term health or survival. Early detection, diagnosis, and intervention can prevent death or disability and enable children to reach their full potential.

11,034 infants screened



Monitoring and Evaluating Data



EVALUATION OF SEAL!ND: SCHOOL YEAR 2023–2024



The North Dakota
Oral Health Program's
School-Based
Sealant Program

Maternal and Child Health Services Title V Block Grant

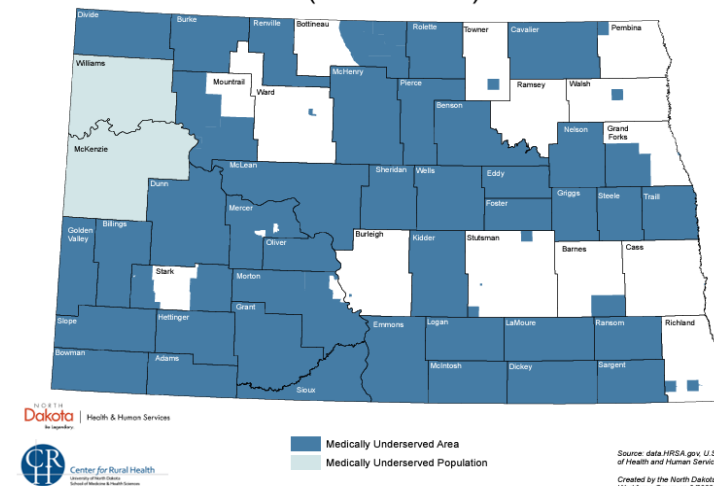
North Dakota

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FY 2025 Application/
FY 2023 Annual Report



North Dakota Medically Underserved Areas/Populations (MUAs/MUPs)



2025-2027 Biennium

Plans

- Enhanced community engagement
- Streamlined loan repayment application process
- Maternal and Child Health (MCH) Needs Assessment – new priorities
- 10-year Statewide Cancer Plan
- WIC participant portal, new food package, and updating MIS
- Youth nicotine prevention

Challenges

- Return to core public health services
- Childhood obesity
- Changing federal grants and requirements
- Ever expanding diversity of nicotine products
- Domestic Violence/Sexual Assault
- Maternal health care services



2025-2027 Budget request

**The program, systems and
workforce support**
necessary to continue to
serve North Dakotans

Comparison of budget expenditures and projections

By Program

PROGRAMS	2023-25 LEGISLATIVE BASE	ONE-TIME /CARRYOVER	2023-25 EXPENSES THROUGH DECEMBER	2023-25 PROJECTED EXPENDITURES	2025-27 EXECUTIVE BUDGET RECOMMENDATION	INCREASE / (DECREASE)	ENGROSSED HB 1012	GENERAL	FEDERAL	OTHER
PRIMARY CARE AND LOAN REPAYMENT	\$ 4,709,584	\$ -	\$ 3,422,752	\$ 4,621,773	\$ 6,100,048	\$ 130,072	\$ 6,230,120	\$ 2,308,290	\$ 3,027,330	\$ 894,500
CHRONIC DISEASE AND TOBACCO PREVENTION	26,566,548	-	16,557,082	24,160,618	27,108,859	-	27,108,859	225,000	14,187,033	12,696,826
COMMUNITY HEALTH INITIATIVES	15,291,129	-	11,487,175	16,650,234	7,903,903	(2,000,000)	5,903,903	725,476	5,178,427	-
LOCAL PUBLIC HEALTH STATE AID	8,000,000	-	6,211,920	8,000,000	8,000,000	-	8,000,000	4,725,000		3,275,000
MATERNAL CHILD HEALTH	15,346,240	-	8,168,977	12,098,444	11,580,172	737,661	12,317,833	5,250,846	7,039,087	27,900
STATEWIDE HEALTH STRATEGIES	-	3,000,000	3,000,000	3,000,000	-	750,000	750,000			750,000
PUBLIC HEALTH INFRASTRUCTURE	4,830,488	-	1,248,022	2,014,408	6,800,000	-	6,800,000		6,800,000	
DOMESTIC VIOLENCE AND SEXUAL ASSAULT	17,193,024	-	9,481,782	16,915,433	21,299,546	2,140,000	23,439,546	9,214,268	9,344,406	4,880,872
WOMEN INFANT AND CHILDREN (WIC) FOOD PROGRAM	30,340,000	-	20,320,262	27,100,000	33,520,000	-	33,520,000		33,520,000	
TOTAL	\$ 122,277,013	\$ 3,000,000	\$ 79,897,972	\$ 114,560,910	\$ 122,312,528	\$ 1,757,733	\$ 124,070,261	\$ 22,448,880	\$ 79,096,283	\$ 22,525,098

Changes to Base Budget

By Ongoing, One-Time and Funding Source

BASE BUDGET CHANGES	DESCRIPTION	2025-27 EXECUTIVE BUDGET		ENGROSSED HB 1012	
		GENERAL	OTHER	GENERAL	OTHER
Services - Vulnerable Adults	Expanded support for domestic and sexual violence prevention		\$2,250,000 CHTF		
Services - Families	Partnerships with healthcare stakeholders to improve maternal and child health programs	\$2,000,000		(\$2,000,000)	
House Amendment	FTE Block Grant Reduction			(\$169,928)	
House Amendment	Provides additional funding for domestic and sexual violence			\$1,700,000	
House Amendment	Add funding for Safe Haven Program			\$440,000	
House Amendment	Add funding to increase the grant to the Family Voices program			\$100,000	
House Amendment	Provides funding for a fetal alcohol spectrum disorder clinic at UND			\$637,661	
House Amendment	Provides one-time funding for the Cass County animal shelter				\$300,000 CHTF
House Amendment	Provides one-time funding for the statewide health strategies grant				\$750,000 CHTF

Comparison of budgets and funding

By Major Expense

DESCRIPTION	2023-25 LEGISLATIVE BASE	INCREASE / (DECREASE)	2025-27 EXECUTIVE BUDGET RECOMMENDATION	INCREASE / (DECREASE)	ENGROSSED HB 1012
Salaries & Benefits	\$ 11,573,656	\$ 3,055,937	\$ 14,629,593	\$ (169,928)	\$ 14,459,665
Operating	30,846,651	(642,130)	30,204,521	-	30,204,521
IT Services	716,713	3,748,653	4,465,366	-	4,465,366
Grants	79,139,993	(6,126,945)	73,013,048	1,927,661	74,940,709
Total	\$ 122,277,013	\$ 35,515	\$ 122,312,528	\$ 1,757,733	\$ 124,070,261
General Fund	\$ 19,466,380	\$ 2,274,767	\$ 21,741,147	\$ 707,733	\$ 22,448,880
Federal Funds	83,092,233	(3,995,950)	79,096,283	-	79,096,283
Other Funds	19,718,400	1,756,698	21,475,098	1,050,000	22,525,098
Total Funds	\$ 122,277,013	\$ 35,515	\$ 122,312,528	\$ 1,757,733	\$ 124,070,261

Healthy and Safe

Communities' Budget as % of HHS Budget

- 2.0%

Budget by Funding Source

- 18.1% General
- 63.8% Federal
- 18.1% Other

Budget by Pass Through

- 66.2% Paid to private providers
- 17.0% Direct Service
- 13.2% Admin
- 3.6% IT

A family of three (mother, father, and child) holding hands and jumping in a field at sunset. The scene is bathed in warm, golden light from the setting sun, creating a silhouette effect on the family. The background shows a line of trees and a clear sky with soft clouds.

Summary and Key Takeaways

Key Strategies and Needs:

- Community Engagement
- Data and Evidence-based decision making
- Policy, Systems and Environmental changes (PSE)
- Infrastructure, Workforce and Data Systems
- Increased support for Domestic Violence/Sexual Assault and maternal health services

Implementing these strategies and meeting these needs is essential to ensure that everyone has the chance to achieve their optimal health – and to make North Dakota the Healthiest State in the Nation!



Contact Information

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