

**Testimony
House Bill 1012
House Appropriations Human Resources Division
Rep. Jon Nelson, Chairman
January 25, 2021**

Chairman Nelson, members of the House Appropriations Human Resources Division, I am Heather Simonich, Operations Director of Nexus-PATH. Nexus-PATH is a member of Nexus Family Healing, providing child welfare and behavioral health services from nine office locations in North Dakota. I am here today to provide input on HB1012, more specifically the Behavioral Health Division budget, relating to implementation of 1915(i) services.

Your committee is familiar with the Department's work in securing legislative and federal CMS approval to develop a 1915(i) state plan amendment. We fully support the Department's vision and believe the 1915(i) state plan provides opportunity to offer robust community-based services and supports previously unavailable in North Dakota.

Much progress has been made and yet many challenges remain. Timing is critical as our children and families need us now more than ever. You heard from Superintendent Baesler on Friday morning regarding the growing behavioral health needs of our students – the “multipliers” as she put it. You are also aware of the Department's goal and strategic efforts to avoid placing children in foster care or congregate care settings whenever possible. To achieve this goal, it is critical that we build and improve access to intensive family services in our ND communities.

We understand that there is significant federal rule that makes rolling 1915(i) services out in a rural state with a limited workforce very challenging. Today, I would like to speak briefly to concerns about the current eligibility requirement in the area of functional capacity.

- A WHODAS score of 50 indicates an individual ranks in the 95th percentile of functional impairment. This is a level of functioning**

comparable to those that are home-bound, have significant physical limitations, or reside in institutional care settings.

- The WHODAS was developed to assess functional impairment in adults and although it is a reliable and well-validated measure for use with adults – it was not designed for children. We have concerns regarding the application of this tool and its scoring algorithm to children. A score of 50 is simply too restrictive and will severely limit access to these essential 1915(i) services.**
- We currently use the WHODAS to determine eligibility for our school case management services because a score of 25 is required for eligibility under the ND SED-TCM state plan. To date, we have not had a child score near 50 yet these are students that our schools have identified as having the highest needs and would certainly benefit from 1915(i) services. Many of them have experienced significant trauma, are on the verge of out of home placement, and require substantial one-on-one supports in school to function.**

We understand the Department will work with CMS to make amendments to the eligibility criteria if needed and we urge them to begin conversations now or in the very near future. We have shared our data with both Medical Services and Behavioral Health Division staff. Without careful reconsideration of this eligibility requirement and more assurance of eligible children, providers will struggle to establish these critical services – especially in our rural communities.

In closing, I can't help but return to Superintendent Baesler's words, "We cannot do this alone". I know our schools are depending on providers like Nexus-PATH to be part of the solution here. To meet our ND families where they are at – to provide person-centered services in ways they have never been delivered before. It will take all of us working in tandem and, together, I believe we can bend the curve. We are proud to live in a state chasing bold behavioral health and child welfare goals – goals aimed to reduce congregate and foster care placement, invest in families and early childhood, and build robust community services that span the entire

behavioral health continuum. These are goals that we all agree are in the best interest of children and families and will ultimately build a better North Dakota. The collaborative leadership demonstrated at the state level is applauded and has set an effective tone for leadership amongst providers, Human Service Zones, and local school districts.

Thank you for the opportunity to testify before your committee today. I am happy to answer any questions you may have.