

**North Dakota Department of Human Services
Savings Plan - Proposal for Executive Budget
2021 - 2023 Biennium**

Division	Description	Restructured Description	Total Savings	General Fund Savings	Other Fund Savings	Federal Fund Savings
Administration Support	Operational Efficiency/Savings	Adjust the mileage reimbursement rate for DHS employees from the federal rate to the state rate	(40,000)	(16,172)	(3,532)	(20,296)
Administration Support	Operational Efficiency Savings	Reduce the vendor contract that supports the DHS document migration project.	(176,143)	(150,768)	(1,738)	(23,638)
Administration Support	Operational Efficiency Savings	Overall reduction in executive team travel.	(985)	(785)	(14)	(186)
Administration Support	Operational Efficiency Savings	Reduce office space	(405,510)	(162,288)		(243,222)
Administration Support	Operational Efficiency Savings	Case Closure	(100,000)	(100,000)		
Administration Support	Operational Efficiency Savings	Case Closure	(528,048)	(528,048)		
Administration Support	Operational Efficiency Savings	Add new positions to focus on logistics management, communications, effective recruiting and procurement. This will allow DHS to more effectively support program and policy, field services and ultimately allow more efficient and effective services for ND constituents served.	1,716,602	1,226,841		489,761
Administration Support	Operational Efficiency Savings	Reduce indirect rate for Alzheimer's contract	(168,000)	(168,000)		
Aging Services	Programmatic Efficiency Savings	Reduce Community of Care Grant program	(660,000)	(660,000)		
Behavioral Health	19151 Service Access Change	Reduce Parent to Parent - 19151 Realignment	(11,250)	(11,250)		
Behavioral Health	19151 Service Access Change	Reduce Brain Injury - Resource Facilitation (NDBIN) - 19151 realignment	(279,247)	(279,247)		
Behavioral Health	19151 Service Access Change	Reduce Brain Injury - Pre-voc program (Skillmart) - 19151 realignment	(168,750)	(168,750)		
Behavioral Health	19151 Service Access Change	Reduce Brain Injury - Return to work (Workstart) - 19151 realignment	(174,277)	(174,277)		
Behavioral Health	19151 Service Access Change	Reduce peer support certification	(13,590)	(13,590)		
Behavioral Health	Operational Efficiency Savings	Reduce Peer support pilot	(15,000)	(15,000)		
Behavioral Health	Programmatic Efficiency Savings	Reduce Administrative Expenses (Travel, professional development, operating)	(71,294)	(71,294)		
Behavioral Health	Programmatic Efficiency Savings	Reduce Voluntary treatment program; treat youth out of or in the home - reduced need	(80,016)	(80,016)		
Behavioral Health	Programmatic Efficiency Savings	Reduce Brain Injury Taskforce	(3,750)	(3,750)		
Behavioral Health	19151 Service Access Change	Reduce ND CARES	(15,000)	(15,000)		
Children and Family Services	Programmatic Efficiency Savings	Reduce Family Voices Contract - 19151 re-alignment	(100,000)	(99,999)		(1)
Children and Family Services	Programmatic Efficiency Savings	Remove PBS data contract (rewrt expenditure for quality assessment to QRTP responsibility)	(34,000)	(34,000)		
Children and Family Services	Programmatic Efficiency Savings	Reduce NDSU Parent/Family Resource Ctrs and Nurturing Parent Program contract	(238,056)	(238,056)	0	(24,571)
Children and Family Services	Programmatic Efficiency Savings	Revise payment approaches for better alignment in rates for new subsidized adoption cases	(1,093,984)	(1,093,984)	0	(1)
Children and Family Services	Programmatic Efficiency Savings	Reduce foster care/QRTP placements via Family First Prevention Plan Implementation	(14,933,250)	(9,650,695)	(156,128)	(5,282,555)
Children and Family Services	Operational Efficiency Savings	Operating cost savings related to office space	(461,694)	(103,906)		(201,660)
Developmental Disabilities	Programmatic Efficiency Savings	Eliminate Section 11 Supported Housing & Employment; utilize other existing services	(373,261)	(373,261)		
Developmental Disabilities	Programmatic Efficiency Savings	Eliminate Recreation Contracts to RRHSF and LISTEV; integrate into other existing services	(150,000)	(150,000)		
Developmental Disabilities	Programmatic Efficiency Savings	Reduce accreditation costs; move expenditure for quality assessment to provider responsibility	(223,891)	(113,503)		(110,388)
Developmental Disabilities	Programmatic Efficiency Savings	Rate adjustments to implement recommendations for ICF/Non-ICF Residential settings	(11,150,000)	(5,240,000)		(5,910,000)
Human Service Center	19151 Service Access Change	Increase rate of transitions from LSTC to alternate settings (youth and medically fragile adults) (LSTC offset)	7,879,858	3,706,523		4,173,335
Human Service Center	19151 Service Access Change	Reduce Ladrave contract - 19151 re-alignment	(187,500)	(187,500)		
Human Service Center	19151 Service Access Change	Reduce Prairie Harvest Mental Health contract - 19151 re-alignment	(1,414,800)	(1,414,800)		
Human Service Center	19151 Service Access Change	Reduce Cooper House contract - 19151 re-alignment	(283,464)	(283,464)		
Human Service Center	19151 Service Access Change	Reduce Supportive Employment contract - 19151 re-alignment	(583,226)	(583,226)		
Human Service Center	19151 Service Access Change	Eliminate Gerriede's Place contract for long-term residential - 19151 re-alignment	(901,008)	(901,008)	0	
Human Service Center	19151 Service Access Change	Reduce Supportive Employment contract - 19151 re-alignment	(62,000)	(62,000)		
Human Service Center	Operational Efficiency Savings	Reduce office space	(8,000)	(8,000)		
Human Service Center	Operational Efficiency Savings	Reduce office space	(20,000)	(20,000)		(1)

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Human Service Center	Operational Efficiency Savings	Operational Savings	(168,417)	(168,417)		
Human Service Center	Operational Efficiency Savings	Reduced office space	(280,000)	(280,000)		
Human Service Center	Program Ended	Reduce Dakota Pioneer contract - 1915I re-alignment	(170,000)	(170,000)		
Human Service Center	Programmatic Efficiency Savings	Alignment of rates paid to private hospitals	(1,293,348)	(1,293,348)		
Human Service Center	Programmatic Efficiency Savings	Replace Adult Case Aid contract with HSC staff and align with team-based care	(125,605)	(125,605)		
Human Service Center	Programmatic Efficiency Savings	Replace Adult Case Aid contract with HSC staff and align with team-based care	(150,000)	(150,000)		
Human Service Center	Programmatic Efficiency Savings	Reduce Adult Case Aid contract with HSC staff and align with team-based care	(367,625)	(367,625)		
Human Service Center	Programmatic Efficiency Savings	Reduce Adult Mental Health Tech contracts - 1915I re-alignment	(400,000)	(400,000)		
Information Technology	Operational Efficiency Savings	Reduce office space	(498,522)	(261,930)		(236,592)
Information Technology	Operational Efficiency Savings	Updated assumption about costs associated with mainframe processing through current biennium				
Information Technology	Operational Efficiency Savings	Updated assumption about costs associated with contracted support provided to DHS through NDIIT	(7,017,198)	(4,161,227)	(1,349)	(2,854,623)
Information Technology	Operational Efficiency Savings	Youth - speed transitions and diversions for youth to alternate settings (DD offset)				
Life Skills Transition Center	Programmatic Efficiency Savings	Adults - speed transitions for medically complex adults (DD offset)	(11,000,000)	(5,114,999)	(1)	(5,885,000)
Life Skills Transition Center	Programmatic Efficiency Savings	Reduce expenditure for Assistive Device Customization Program	(306,701)	(142,615)		(164,086)
Life Skills Transition Center	Programmatic Efficiency Savings	Operational Savings	(178,788)	(178,788)		
Life Skills Transition Center	Programmatic Efficiency Savings	FTE reduction due to census changes and operating efficiencies	(1,362,547)	(697,998)		(664,549)
Medical Services	Programmatic Efficiency Savings	Eliminate remedial eye program	(5,000)	(5,000)		(745,834)
Medical Services	Programmatic Efficiency Savings	Technical adjustment; PRTF was over budgeted last biennium	(1,396,399)	(650,565)		(1,022,902)
Medical Services	Programmatic Efficiency Savings	Reduction in PACE rates and lower-than-expected enrollment	(1,914,733)	(891,831)		(992,368)
Medical Services	Programmatic Efficiency Savings	This is not a reduction- disregard	(992,368)			
Medical Services	Programmatic Efficiency Savings	Assumes that hospitals will agree to some type of VBP arrangement. Reduces funds based on current state of hospital rates	(6,250,000)	(1,562,500)		(4,687,500)
Medical Services	Programmatic Efficiency Savings	Transition Medicaid expansion from managed care to fee-for-service arrangement	(146,617,828)	(16,841,705)		(129,776,123)
Medical Services	Programmatic Efficiency Savings	Transition Medicaid expansion from managed care to fee-for-service arrangement	1,790,904	700,846		1,090,058
Medical Services	Programmatic Efficiency Savings	Waiver not utilized; able to address with existing waivers; eliminating duplicative admin burden	(5,015,638)	(5,015,638)		
Medical Services	Programmatic Efficiency Savings	Eliminate and shift dollars into existing waiver and state plan services for ASD to draw down a match	(92,883)	(62,134)		(30,749)
Medical Services	Programmatic Efficiency Savings	Funds have not been utilized in some time	425,617	(528,706)		954,323
Medical Services	Programmatic Efficiency Savings	Alignment of all providers under the same rate for Targeted Case Management	(2,363,809)	(1,099,171)		(1,264,638)
Medical Services	Programmatic Efficiency Savings	Eliminate the \$2 PMPM but maintain the requirement that clients have a PCP	(1,652,240)	(769,859)		(882,371)
Medical Services	Programmatic Efficiency Savings	Eliminate DOCR TASC contract, close treatment unit and reduce FTE	(2,216,080)	(1,870,218)	(304,426)	(41,437)
Medical Services	Programmatic Efficiency Savings	Remove grant to Bottineau Ski Park	(200,000)	(109,000)		(91,000)
Medical Services	Programmatic Efficiency Savings	Disregard; this is not savings as it's required state match for federal funds	(1,694,954)	(1,694,954)		
Medical Services	Programmatic Efficiency Savings		(218,799,124)	(62,408,249)	(467,184)	(155,923,692)

*NOTE: Dollar amounts in column E reflect original proposal by DHS to OMB; some items may have been subsequently adjusted by OMB in final preparation of the Executive Budget.

