

March 10th, 2021

Chairman Holmberg and members of the committee,

My name is Taylor Restad and I work for the Grand Forks Housing Authority as the Program Director at LaGrave on First. Before I begin, it would be remiss of me today if we didn't give thanks to the Department of Human Services, both Medical Services and Behavioral Health, for including individuals with lived experience, families and friends, as well as providers, the opportunity for input during the development of the North Dakota Medicaid 1915(i) State Plan Amendment.

I'm here today to request an increase in the funding for our line item in the Northeast Human Service Center budget to \$515,000. We make this request for two main reasons. First, during the last session our request of \$550,000 was decreased to \$375,000 - \$275,000 for the first year and \$100,000 for the second year as the 1915(i) was anticipated to be available as of July, 2020. This year, the Executive Budget allocated \$187,500 for LaGrave on First, again, we believe, with the intent for the 1915(i) SPA covering the rest. While we are grateful to be in the budget, it is substantially less than what is necessary to provide 24/7 housing support to the tenants at LaGrave on First. The House returned half of our reduction but that is still \$233,750 less than our request.

Second, we ask for \$515,000 because of the considerable uncertainties with the 1915(i). Of note, the Grand Forks Housing Authority is one of the biggest fans of the 1915(i). In 2016 we brought in national experts, the Corporation for Supportive Housing, to help identify a sustainable funding source to assist individuals with behavioral health conditions remain in their home and communities, and they recommended a Medicaid 1915(i) State Plan Amendment. Unfortunately, we believe there are issues that have already become quite apparent including, but not limited to:

- In regard to housing support services, the current 1915(i) includes housing support services to be offered in 15-minute units with a maximum of 156 hours per 12 months. This is not sufficient for everyone, and in particular not for those who have experienced chronic homelessness and therefore have had extensive issues with tenancy in the past. Until the 1915(i) provides daily rates for housing support services, we will continue to request additional resources.
- For individuals who have a behavioral health condition, they may not be able to self-recognize their condition's impairment on their daily functioning, and therefore are not able to score the required 50 on the WHODAS.
- The lack of time that Human Service Zone Eligibility workers have to complete WHODAS interviews with individuals.

We are big believers in the 1915(i), and have insight into its potential and the possibilities it holds. The Grand Forks Housing Authority is in the process of becoming a Medicaid biller in

order to provide housing support services and take advantage of this sustainable funding opportunity. We have received a Bush Foundation grant to secure capacity building and technical assistance from the Corporation for Supportive Housing in order to do so to the best of our ability and adhere to national best-practices.

In summary, we ask that you increase funding for LaGrave on First until we all have the opportunity to see how the 1915(i) functions and to ensure we don't let some of our states' most vulnerable people fall through the cracks, potentially becoming homeless yet again. I appreciate the opportunity to submit this testimony before you today. I will answer any questions you may have at this time.

Respectfully submitted,

Taylor Restad