

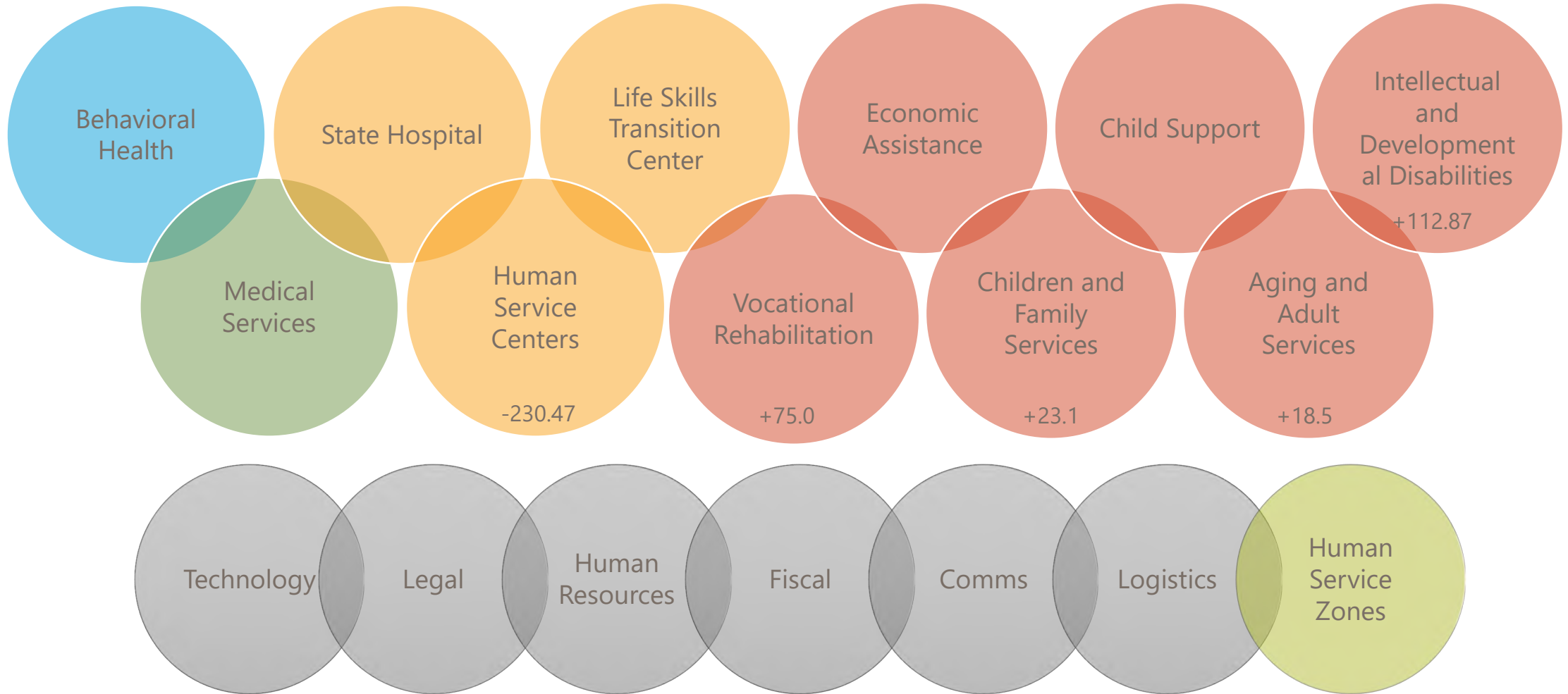


## **House Bill 1012 | Program & Policy Budget Overview**

Senate Appropriations  
*Senator Ray Holmberg, Chairman*

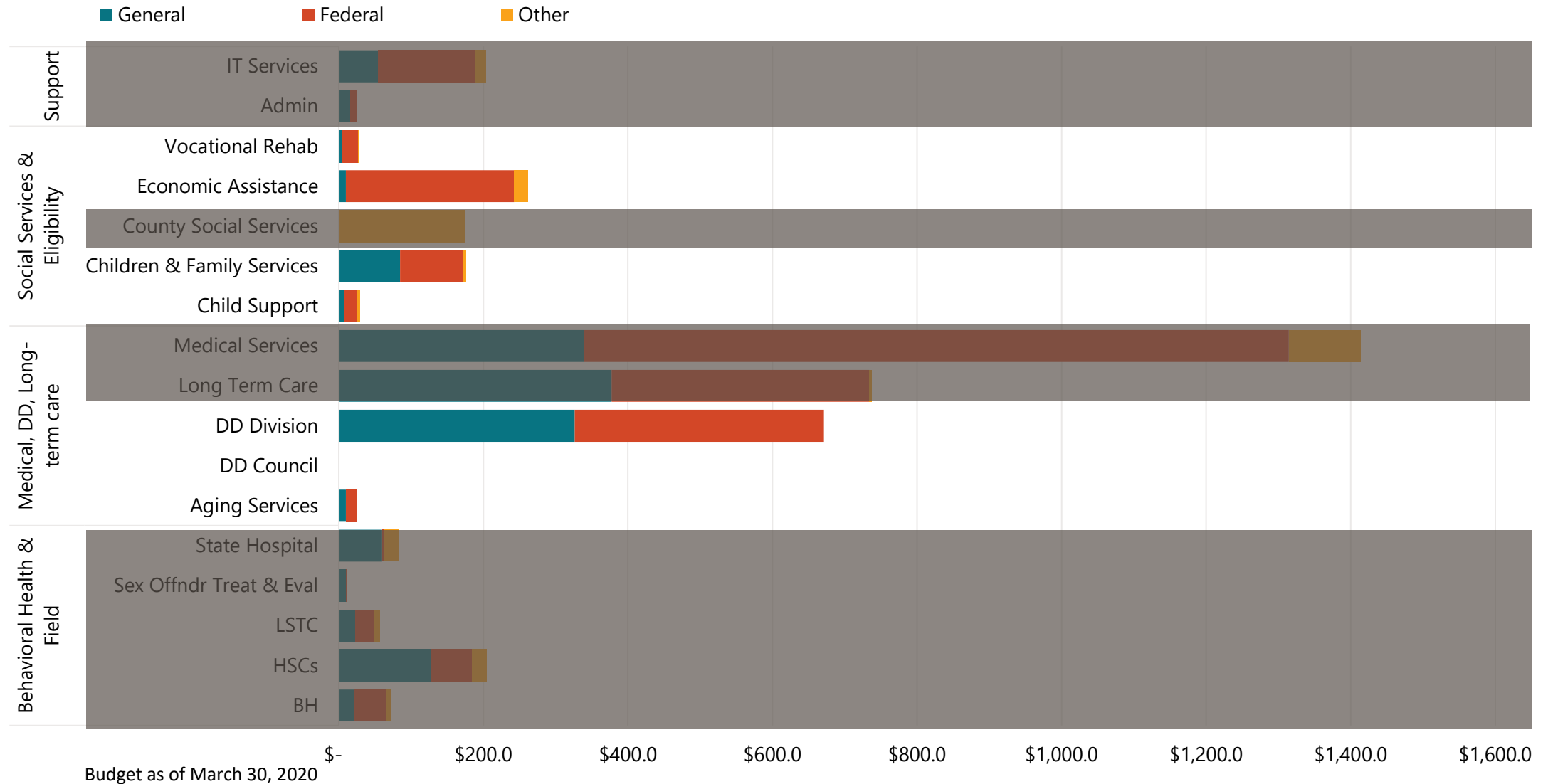
# ND DEPARTMENT OF HUMAN SERVICES

Helping North Dakotans realize their potential through targeted, evidence-based interventions that deliver meaningful results



# 2019-2021 LEGISLATIVELY APPROVED BUDGET

Total budget (millions) by division



# Helping people realize their potential

## Who We Serve

### **At risk of disruption/ instability**

*Individuals who have not previously engaged with a human service provider or who may be experiencing an instability-triggering event*

### **Need help restoring stability**

*Individuals who have engaged with services provided by the Zones, DHS and/or private providers or contracted partners, but who may not have a long-term need*

### **Need supportive services to live as independently as possible**

*Individuals who have a chronic health and/or disabling condition that will indicate long-term service needs*

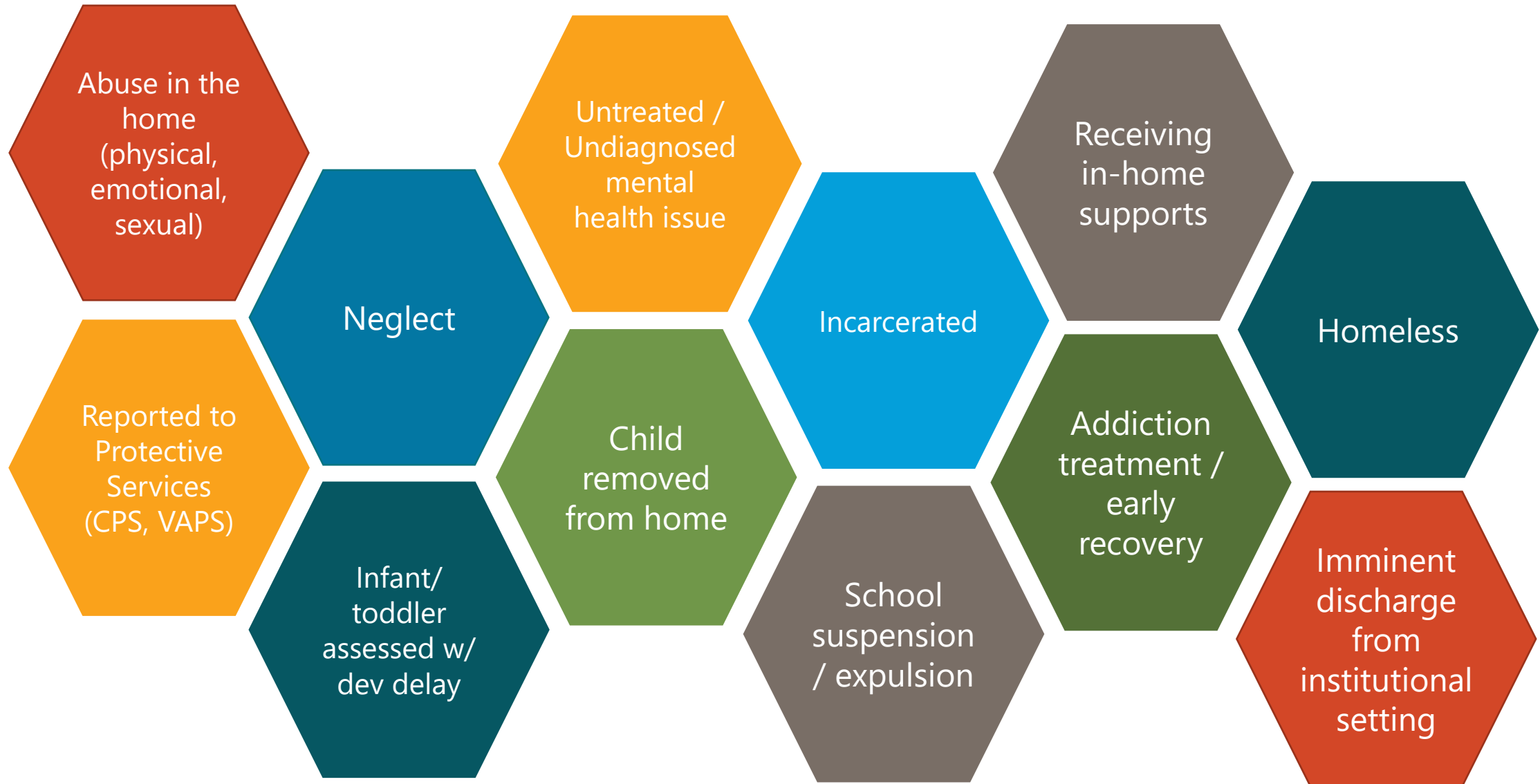
# Who we serve: Who's At risk of disruption/instability?

*Individuals who have not previously engaged with a human service provider or who may be experiencing an instability-triggering event*



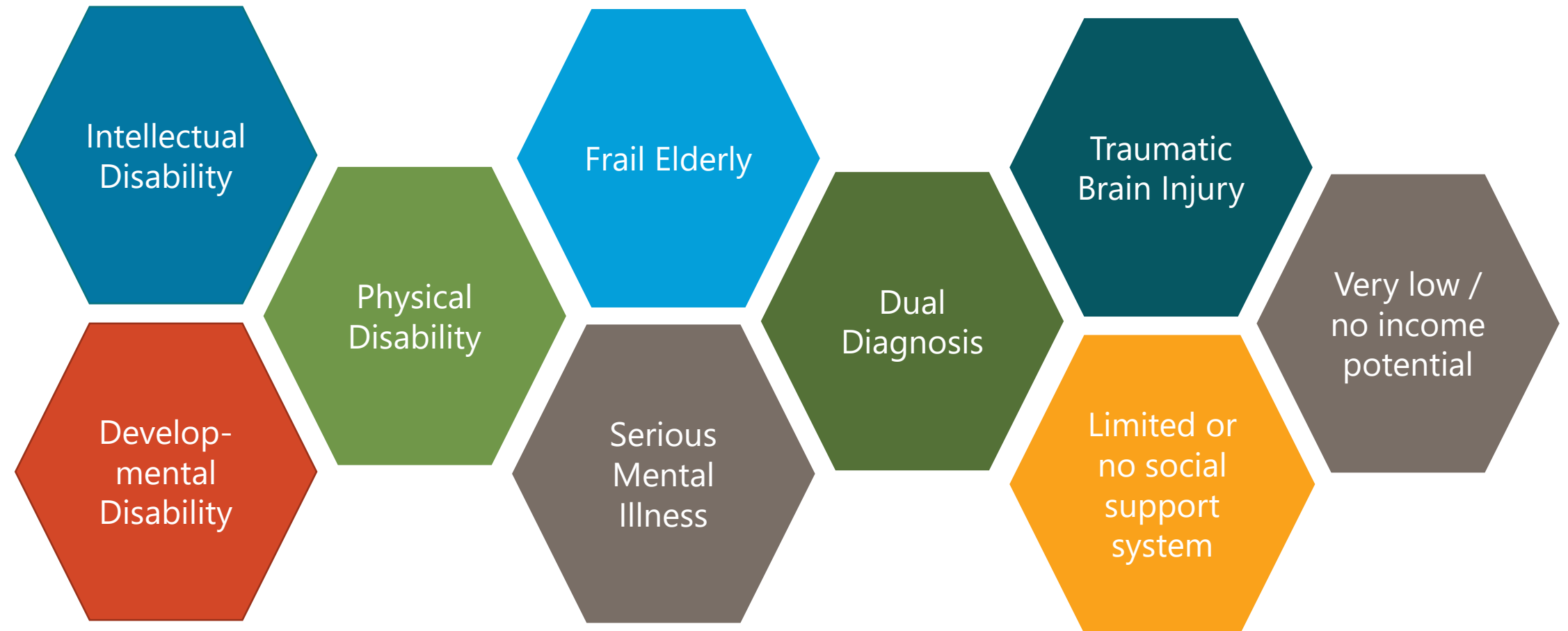
# Who we serve: Who needs help restoring stability?

*Individuals who have engaged with services provided by the Zones, DHS and/or private providers or contracted partners, but who may not have a long-term need*



# Who we serve: Who needs supportive services to live as independently as possible?

*Individuals who have a chronic health and/or disabling condition that will indicate long-term service needs*



# Human Services is the infrastructure for wellbeing

*Prevention | Early Intervention | Crisis Intervention | Long term supports*



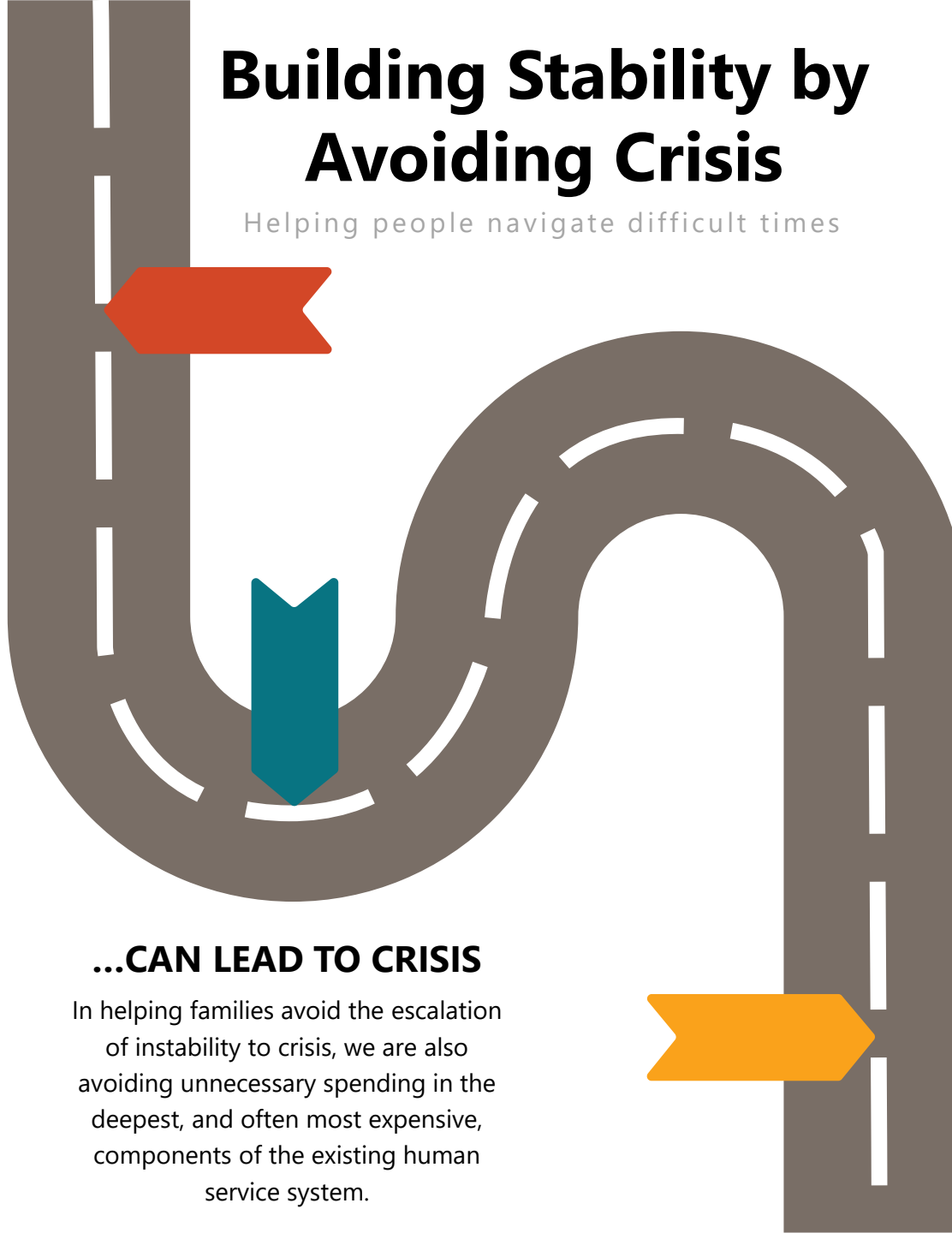


# Building Stability by Avoiding Crisis

Helping people navigate difficult times

## DISRUPTION

When families experience disruption, their ability to be a fully engaged, productive member of the community and the workforce is compromised.

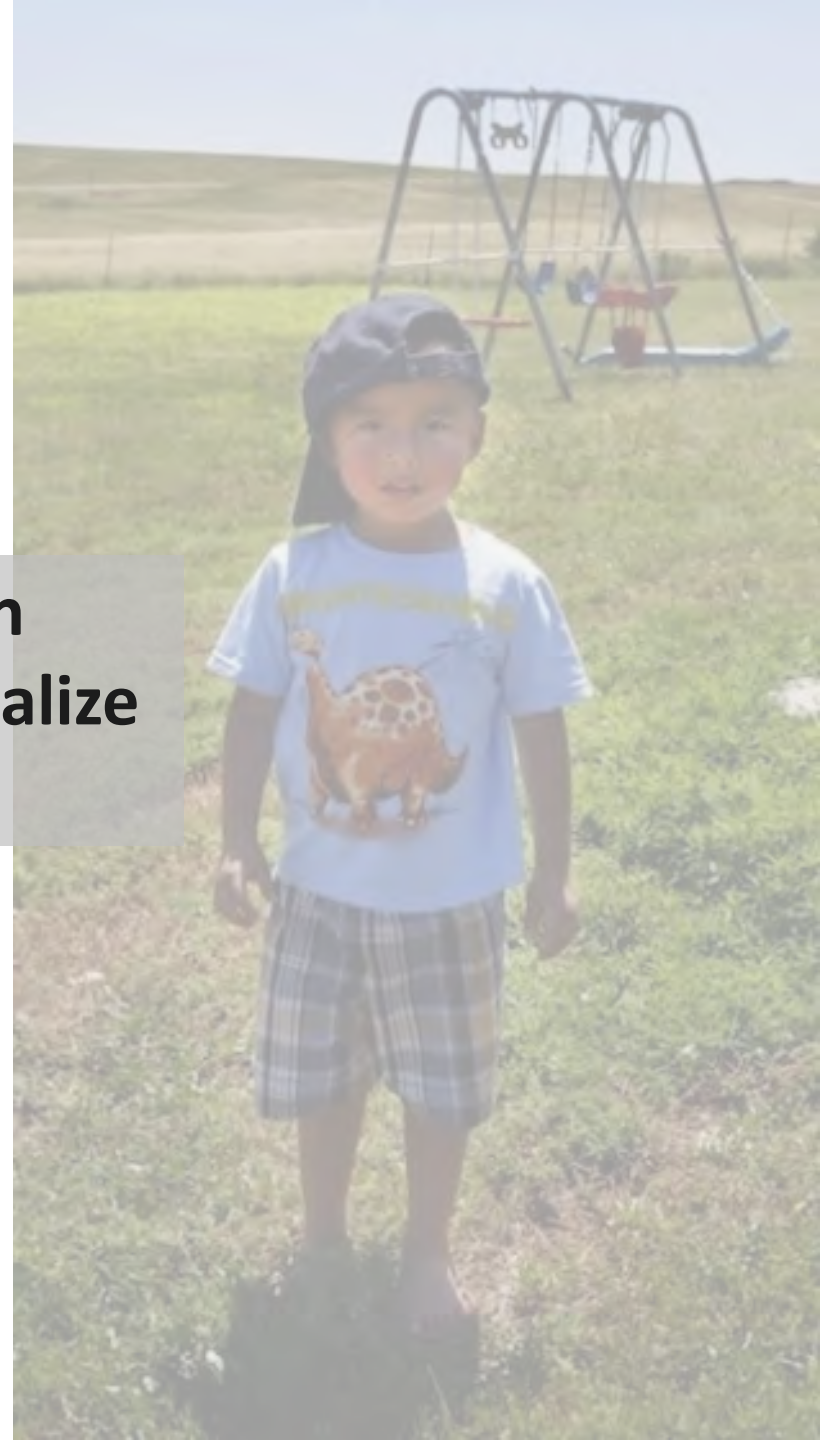


## ...CAN LEAD TO CRISIS

In helping families avoid the escalation of instability to crisis, we are also avoiding unnecessary spending in the deepest, and often most expensive, components of the existing human service system.

## SERVICES SUPPORT STABILITY

Intervening early will both save money and strengthen families. It will allow us to reserve deep end services for the times when they are truly needed, and help people avoid deepening their journey into crisis by diverting from institutions, keeping families together, and helping and sure that people have a place to call home.



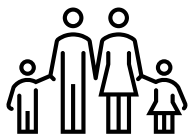
**Communities are stronger when everyone has the opportunity to realize their full potential**



What do we need to do to help someone find their way through a situation that threatens to push them into crisis, and instead help them find their way to stability.



# DHS 2021-2025 KEY PRIORITIES



## Strong Stable Families

- Maintain family connections
- Improve stability and prevent crises
- Promote and support recovery and well-being



## Early Childhood Experiences

- Support workforce needs with improved access to childcare
- Help kids realize their potential with top quality early experiences
- Align programs for maximum return on investment



## Services Closer to Home

- Create pathways that help people access the right service at the right time
- Engage proactively with providers to expand access to services



## Efficiency Through Redesign

- Embrace process redesign to find efficiencies in our work
- Leverage technology to support greater efficiency, quality and customer service



## High-Performing Team

- Develop a One DHS Team culture
- Engage team with opportunities for learning and development
- Implement fiscal scorecard to drive efficiency and effectiveness

## Reinforce the Foundations of Well-being

Economic Health | Behavioral Health | Physical Health

The threads that run through every person's life

# Foundations of Wellbeing are Interconnected



## Economic Health

Having the resources you need to meet basic needs contributes to stability and is a foundation you can build on

## Behavioral Health

Having good mental health and a healthy relationship with substances boosts your ability to weather life's storms

## Physical Health

When you are in good physical health you can better navigate the activities of daily and community life

The stability that comes from good **economic** health can **improve behavioral** health.  
The stability that comes from good **physical** and **behavioral** health **enables economic** health.

What do we need to do to help someone make an informed choice about how they may want to access services in the most integrated setting that is right for them?



# KEY CONCEPTS

Most Integrated Setting

Informed Choice

Diversion

Transition

Level of Care

Stability

Evidence Based

Redesign

Quality

Person-centered



NORTH  
Dakota

Be Legendary™

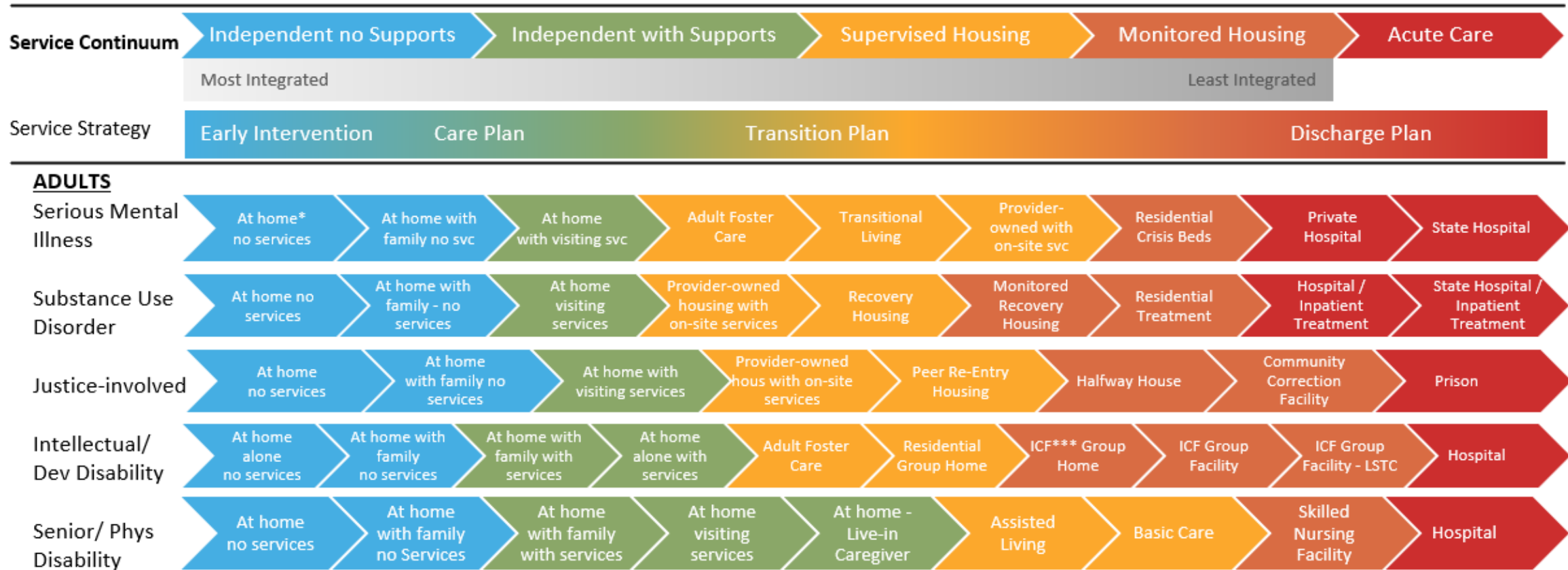
What do we  
need to do to  
make sure we  
are delivering  
the right service  
in the right  
place at the  
right time?





# The Service Continuum - Adults

A critical concept defined



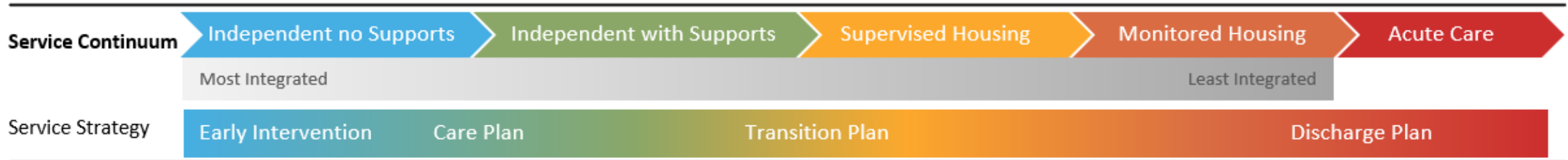
\*Home = includes any type of home setting that is the responsibility of the individual (single family home, condo, apartment, mobile home)

\*\*Family = includes birth family, kin-caregiver, adopted family

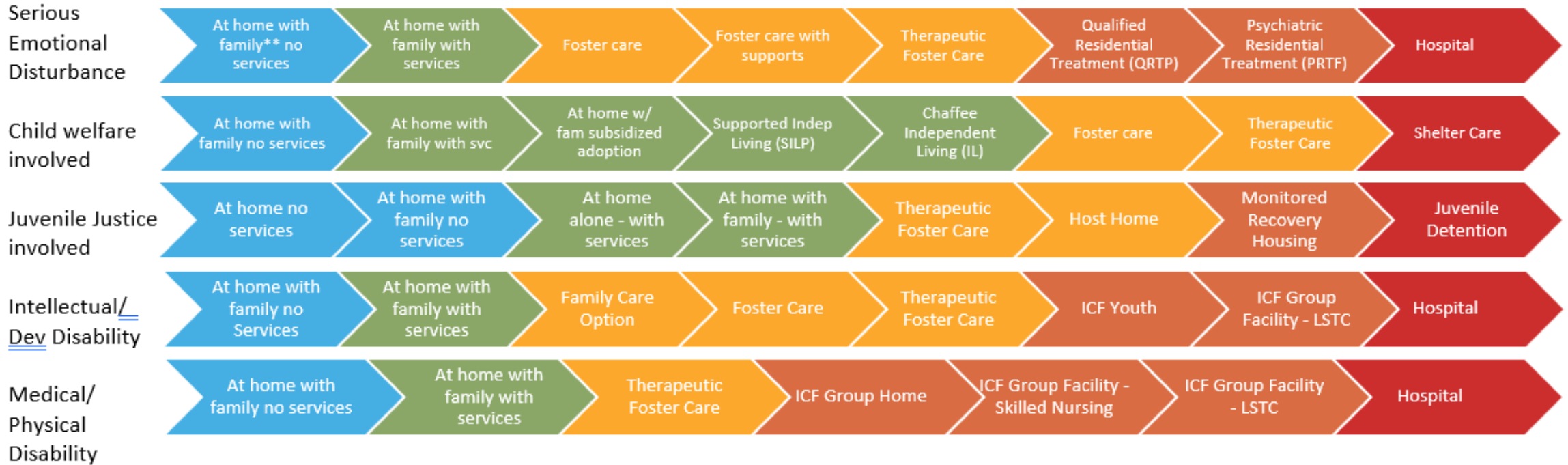
\*\*\*ICF = Intermediate Care Facility. ICF Group Home (less than 8 people); ICF Group Facility (8 or more people); ICF LSTC (Life Skills Transition Center)

# The Service Continuum - Children

Illustrating the work of transition and diversion



## CHILDREN



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\*\*Family = includes birth family, kin-caregiver, adopted family

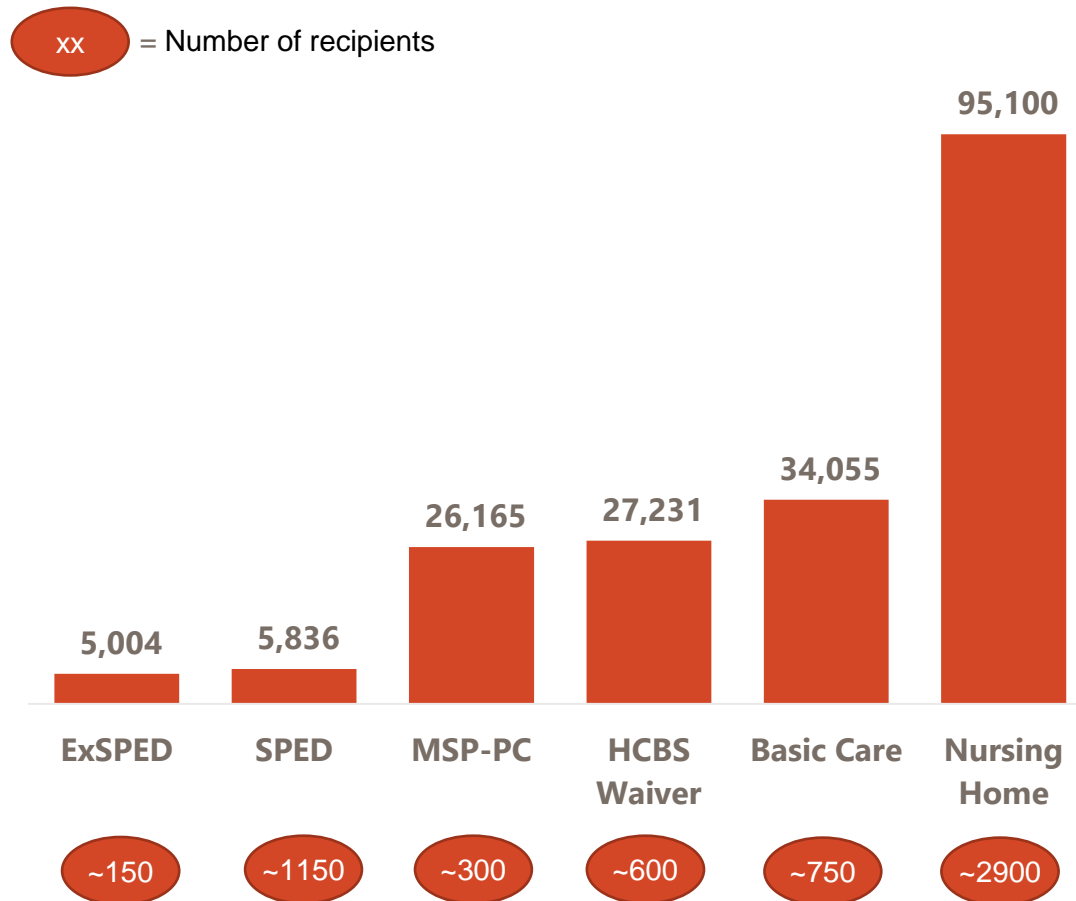
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# DHS FUNDED LONG TERM CARE AND HCBS SERVICES

## Total cost by type of service

### Cost Per Recipient Per Year

Cost paid by state by service in \$ in State Fiscal Year 2020

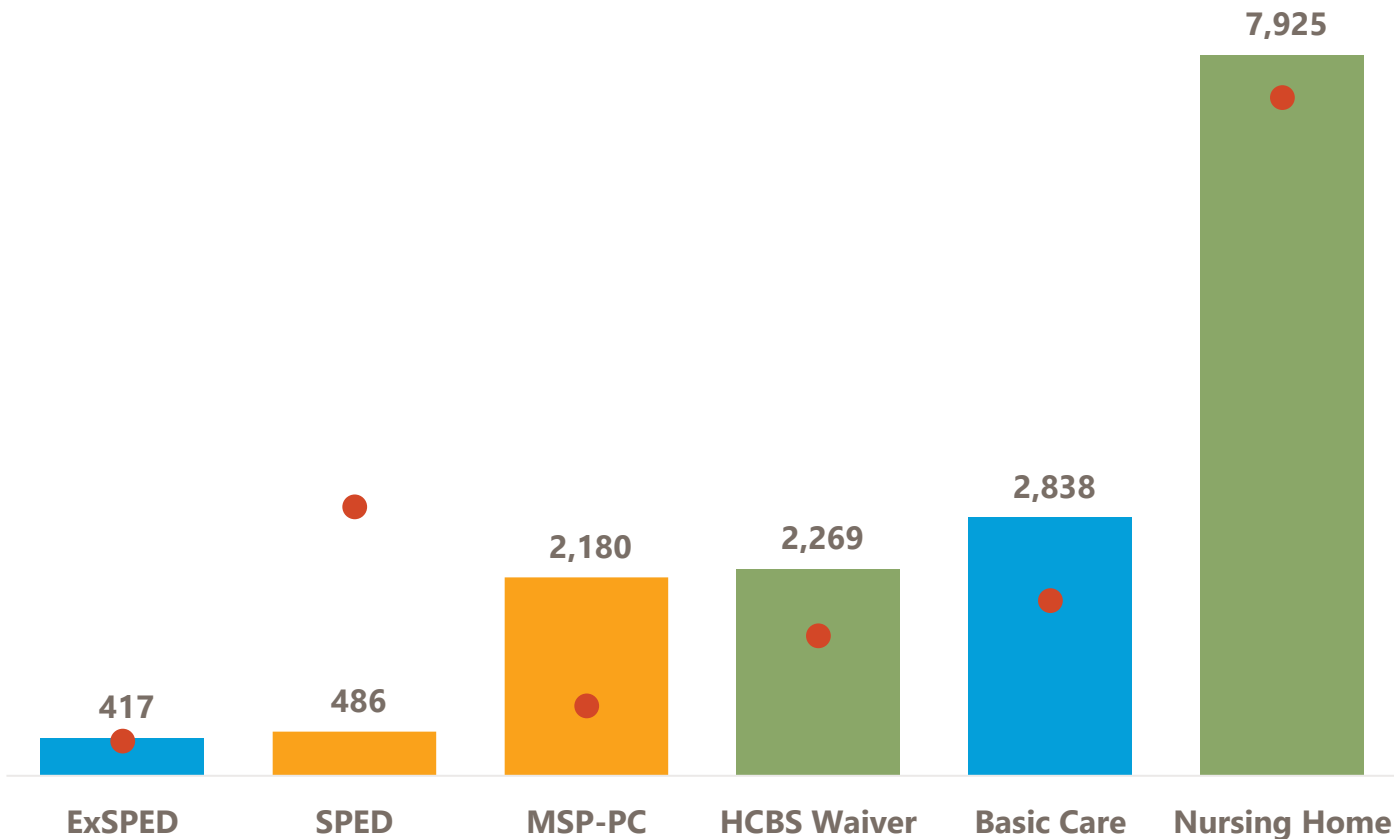


### Program Descriptions / Detail

- **Service Payments for the Elderly and Disabled (SPED):** Provides services for people who are older or physically disabled, have limited assets, and who have difficulty completing tasks that enable them to live independently at home.
- **Expanded SPED (Ex-SPED):** Pays for in-home and community-based services for people who would otherwise receive care in a licensed basic care facility.
- **Home and community-based services (HCBS) waiver:** This waiver from the federal government allows the state to use Medicaid funds to provide services enabling eligible individuals who would otherwise require nursing home services to remain in their homes or communities.
- **Medicaid State Plan personal care (MSP-PC):** Personal care services available under the Medicaid state plan and enable persons with disabilities or chronic conditions accomplish tasks they would normally do for themselves if they did not have a disability.
- **Basic Care:** Room and board and personal care services for persons eligible for Medicaid.

# AGING & ADULT SERVICES

## Cost per month per person per type of service – SFY20



### Types of Care with same criteria for eligibility *(level of care, assets, income)*

Expanded SPED = Basic Care  
\$417 / mo v \$2,838 / mo

DIFFERENCE IN COST : \$2,421

DIFFERENCE IN SVC :

Rent, Meals, Supervision, Medication Administration

HCBS Waiver = Nursing Home

\$2,269 / mo v \$7,925 / mo

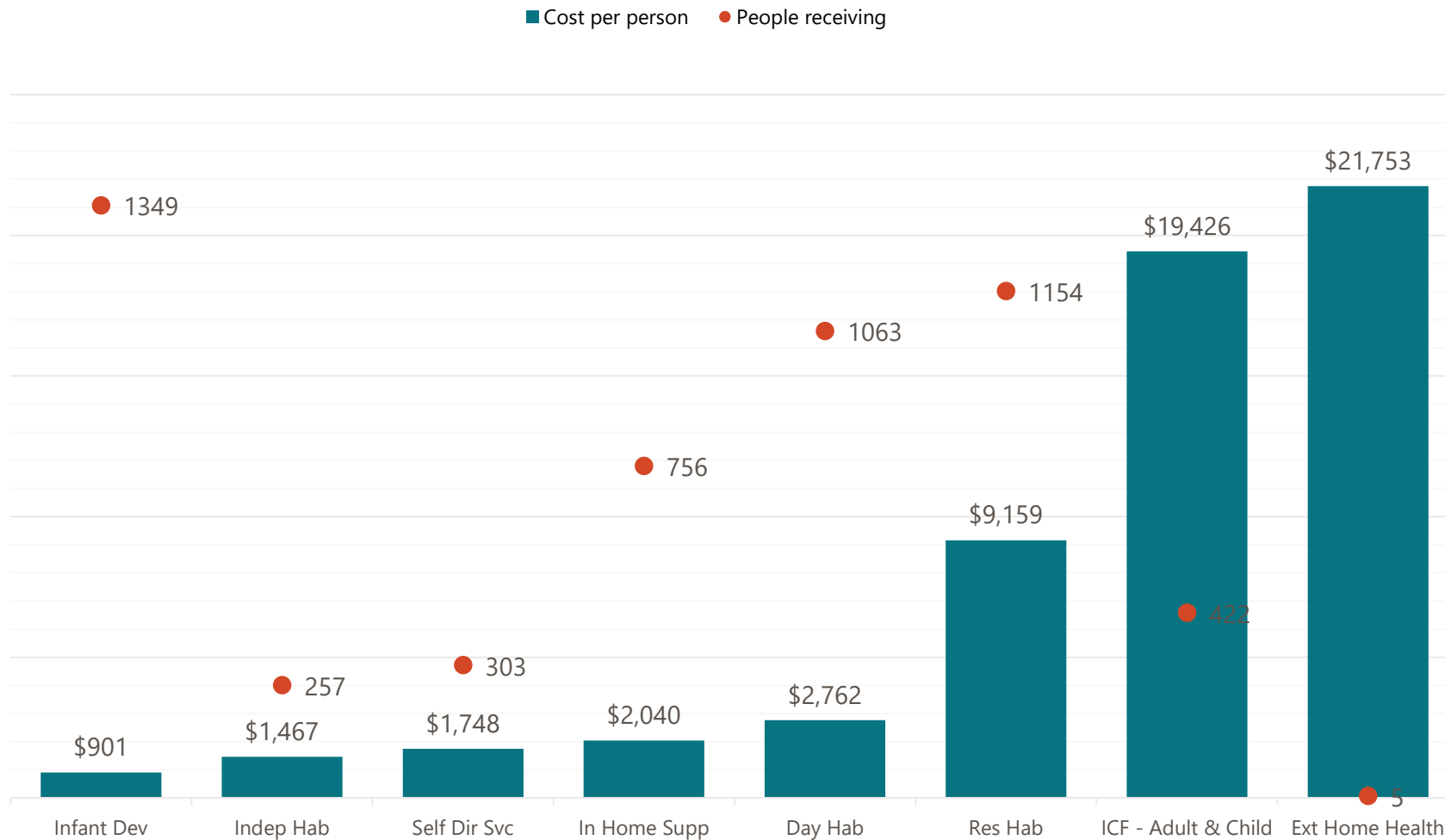
DIFFERENCE IN COST : \$5,656

DIFFERENCE IN SVC :

Rent, Meals, Supervision, 24/7 Nursing

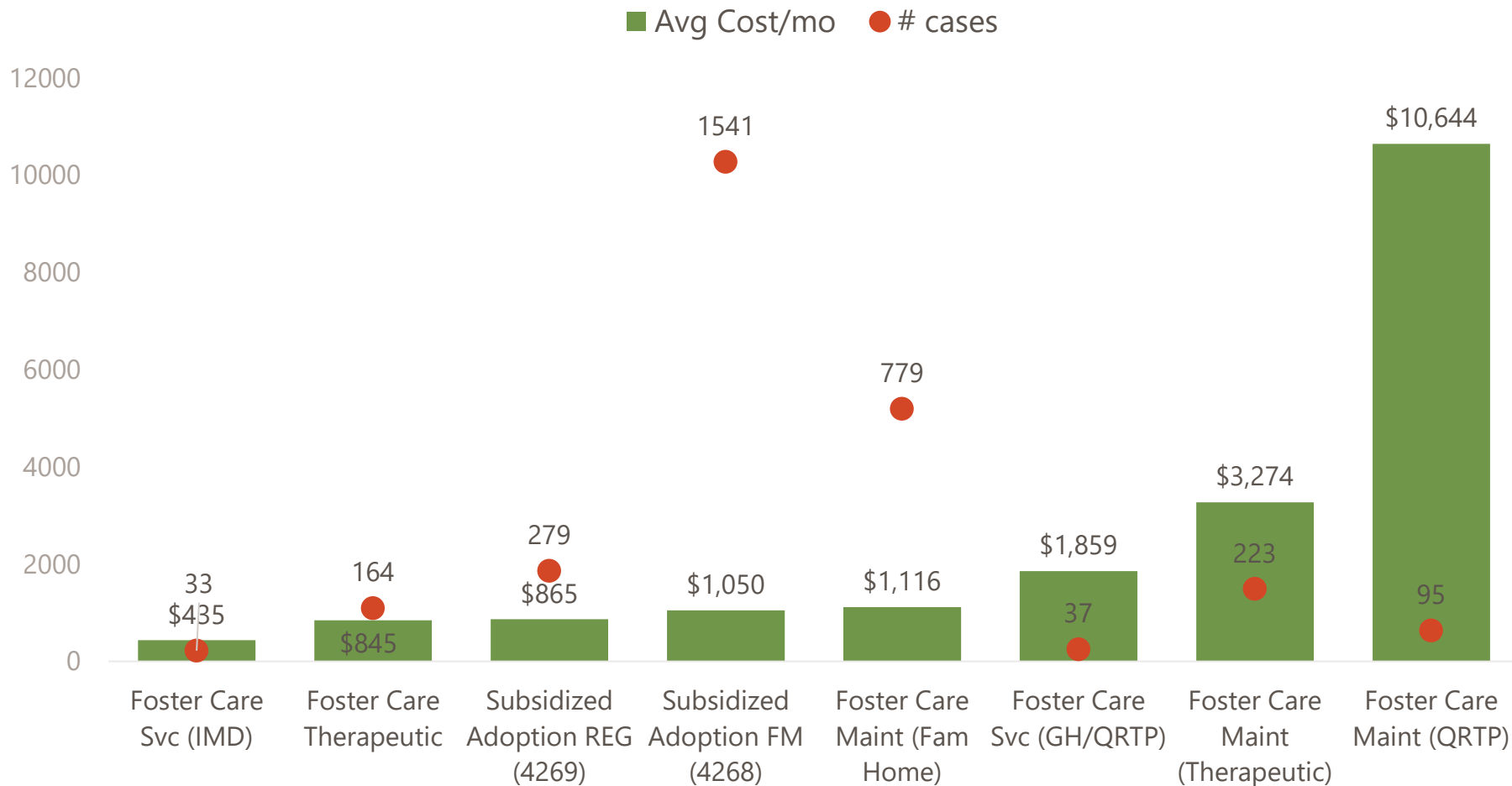
# DEVELOPMENTAL DISABILITIES

## Cost per month per person per type of service – SFY20



# CHILDREN & FAMILY SERVICES

## Cost per month per person per type of service – SFY20



# CHILDREN AND FAMILY SERVICES

## Program Purpose

The purpose of the Children and Family Services division is to help families who are struggling avoid disruption by having access to the help they need to build stability and well-being together.



# CHILDREN AND FAMILY SERVICES

## What we do

### Safety

- Child protective services
- Child fatality review panel
- State Child protection team
- Parent Resource Centers
- Alliance for Children's Justice

### Permanency

- Foster Care
- Adoption
- Guardianships
- Interstate compacts for the placement of children
- Unaccompanied minor services
- Independent living services
- Licensing for QRTPs and LCPAs

### Well-being

- Family preservation services
- Intensive In-home therapy
- Nurturing Parent programs
- Parent aides
- In-home case management
- Respite care
- Family centered engagement

### Early Childhood

- Early childhood coaching and quality
- Child care licensing
- Home Visiting
- Early childhood inclusion supports



# CHILDREN AND FAMILY SERVICES

In ND child welfare services are delivered by local, state, tribal and private providers using both federal and state funds

## Dept of Human Services

- **Human Service Centers**
  - Crisis teams
  - Intensive In-home services (therapy & treatment, skills training, behavior mod)
  - Targeted case management
- **Children & Family Services**
  - Training and coaching of field staff
  - Oversee quality service delivery
  - Administration of policy

## Private Human Service Providers

- Safe shelter for crisis
- Human trafficking supports and safe beds
- Unaccompanied minor services
- Foster homes, including therapeutic
- Targeted case management

## Tribal Social Services

- FRAME entry and foster eligibility determinations
- Joint practice model and ICWA training
- Native American Training Institute supports (training, billing, svc delivery)
- New FMAP service contracting
- IV-E agreements boost access to funding

## Human Service Zones

- Assess present and impending danger
- Safety planning
- Case management
- Assess and build parent capacities
- Provide safe supports for children and families
- Refer and broker services needed for families
- In home supports
- Parent aides
- License foster homes
- Intake for child abuse and neglect reports



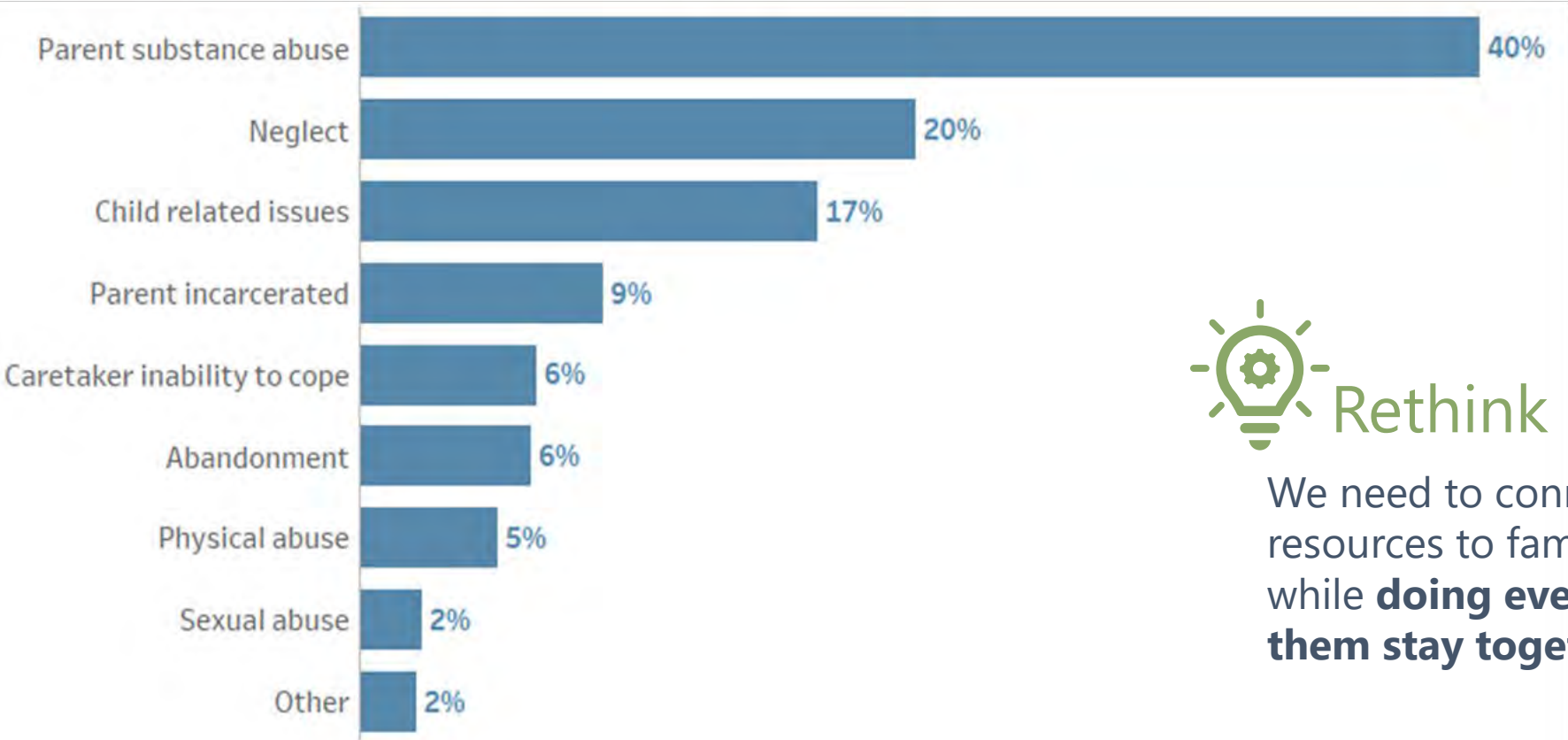
## What's driving us

- Abuse and neglect related to substance abuse in families
- Increasing challenging behaviors in K-3
- Adolescent suicides
- Inconsistencies in child protection practices
- Delays in completion of child safety assessments
- Clear return on investments made early

# Substance abuse and unaddressed mental health needs are major de-stabilizing forces in families

## Removal reasons

Percent of children entering care for each removal reason, FY2019

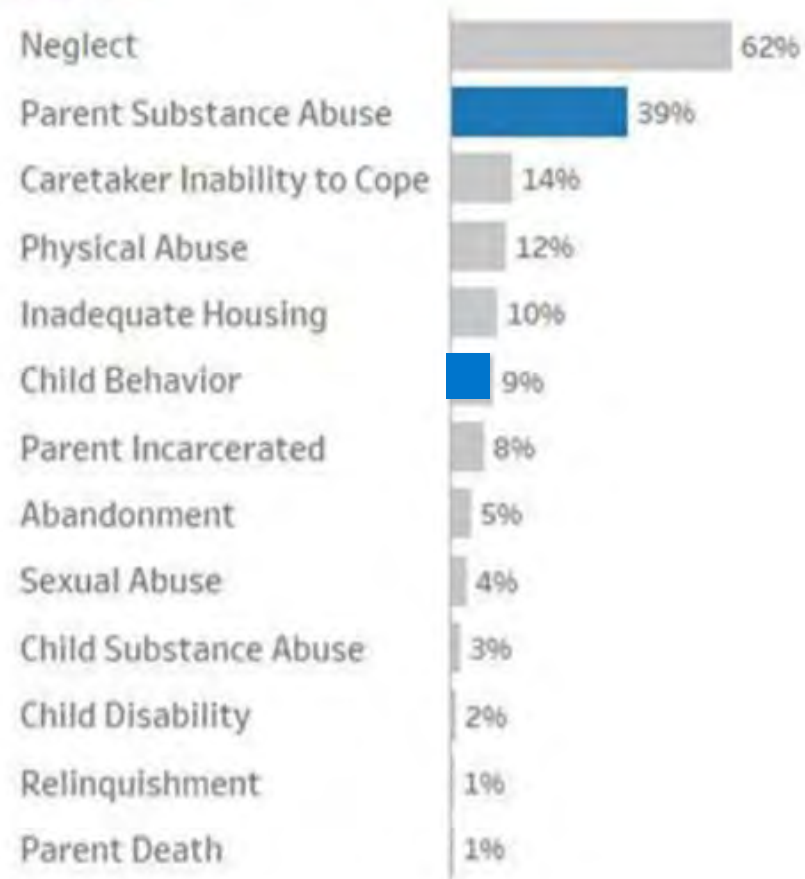


## Rethink child welfare

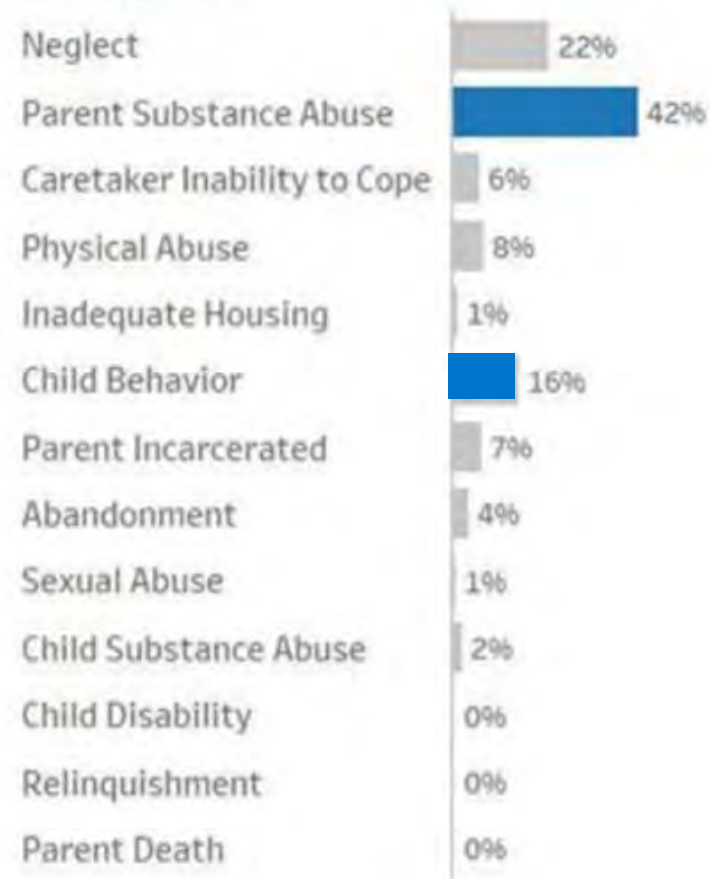
We need to connect behavioral health resources to families who are struggling while **doing everything we can to help them stay together safely.**

# Parental Substance Abuse and Child Behavior are cited more often as reasons for removal in North Dakota than in the U.S.

## National



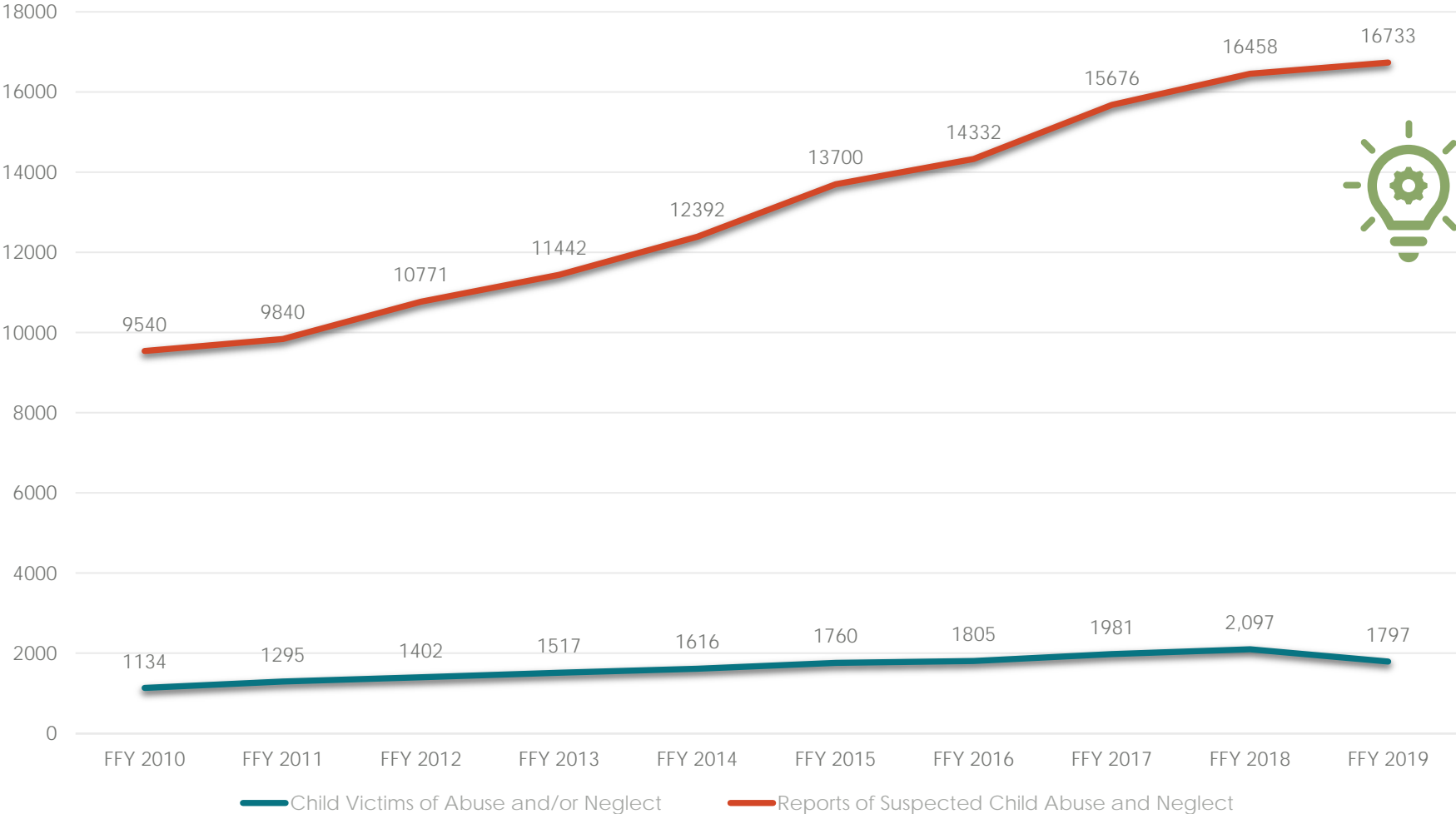
## North Dakota



Data source: FFY 2017 state-submitted AFCARS data. Denotes percent of children entering foster care for each removal reason; multiple reasons may be selected for a single child.

# 10-12 percent of child abuse/neglect calls are ultimately substantiated as abuse/neglect

Numbers of Reports and Substantiated Reports of Child Abuse and Neglect  
FFY 2010 - FFY 2019



## Rethink child welfare

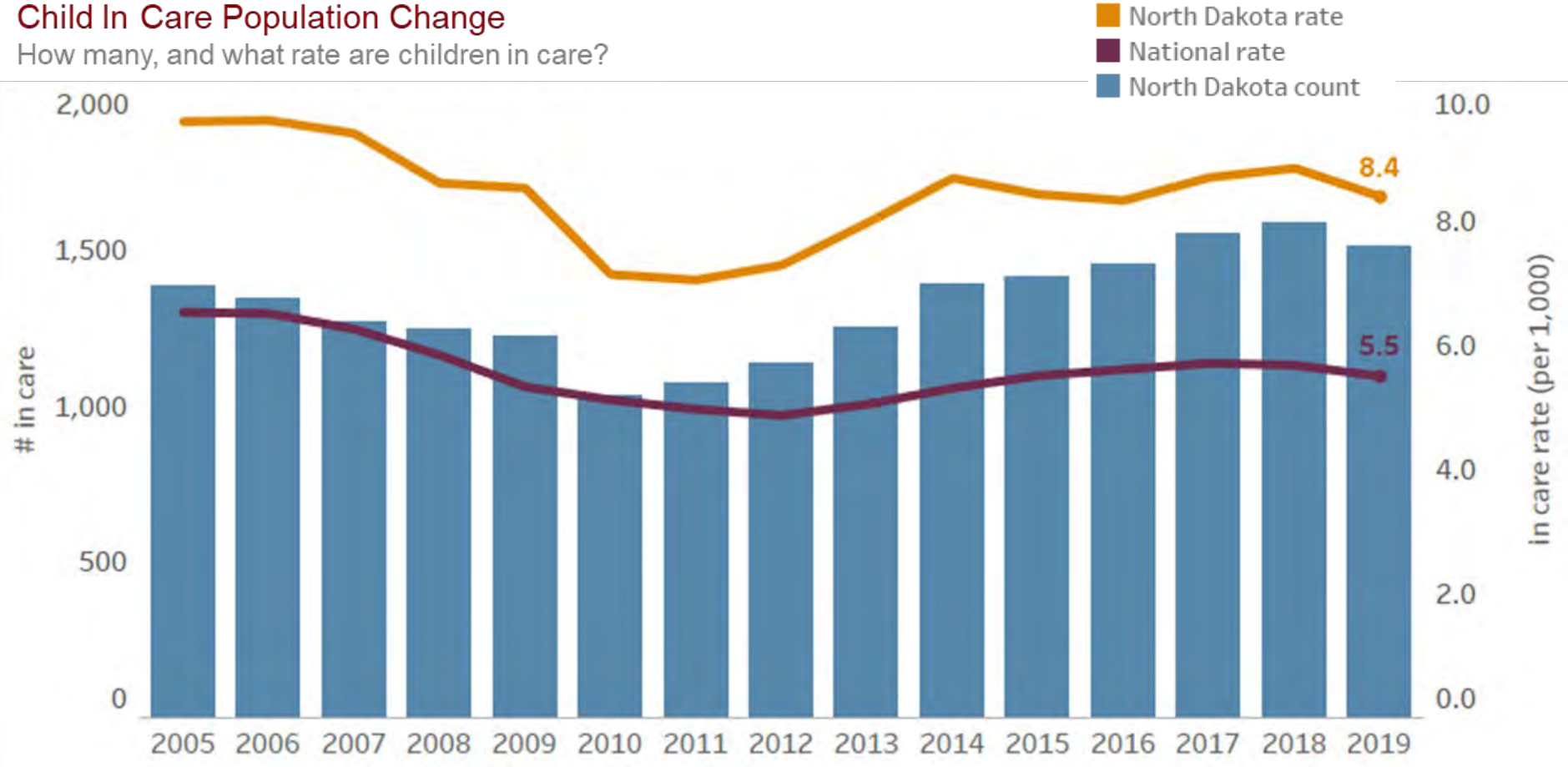
People who call to report a suspicion of abuse or neglect are seeing something that causes them to be concerned about a child's (and their family's) well-being.

**We need a different response for those often valid concerns.**

# The rates at which children are placed in foster care is 52 percent higher in North Dakota than in the U.S. overall

## Child In Care Population Change

How many, and what rate are children in care?



Rethink child welfare

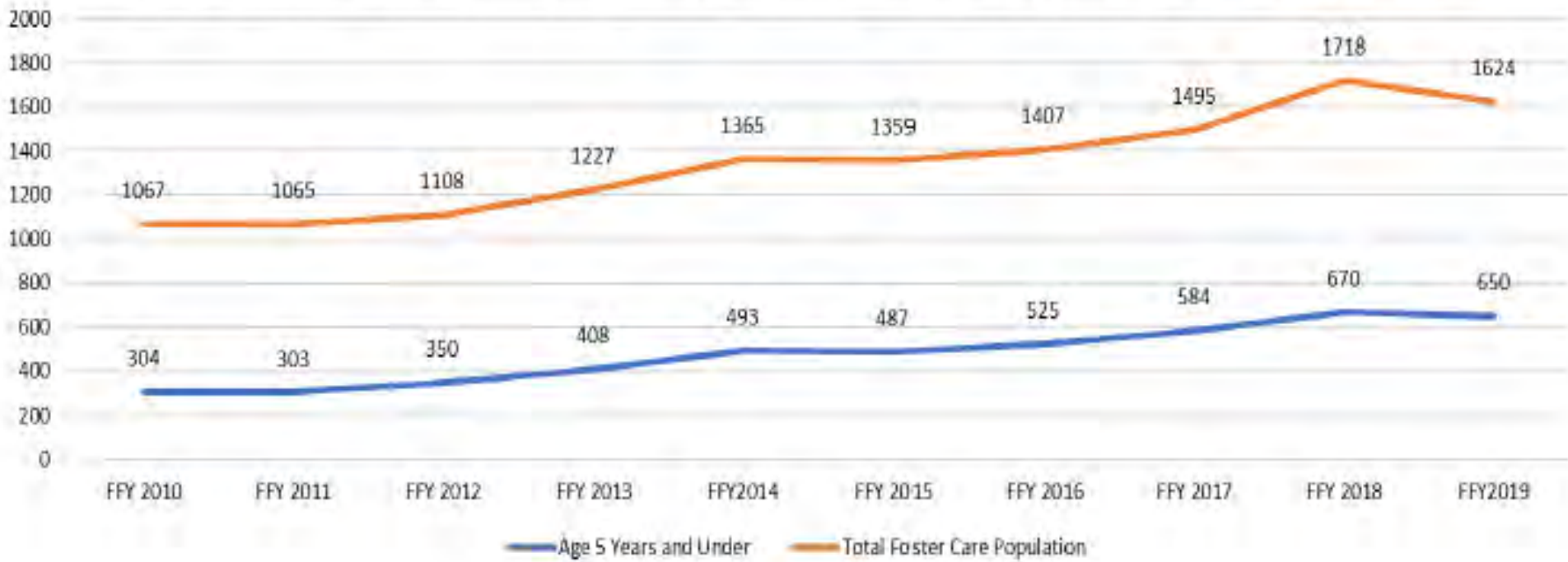


We need to shift resources from removal to family strengthening and preservation.

# The percentage of children in foster care under age 5 has risen steadily from 28% to 40% since 2010

## The number of children in foster care in ND has risen by 52% over the last 10 years

ND Foster Care census and those age 54 years and under, FFY 2010-2019

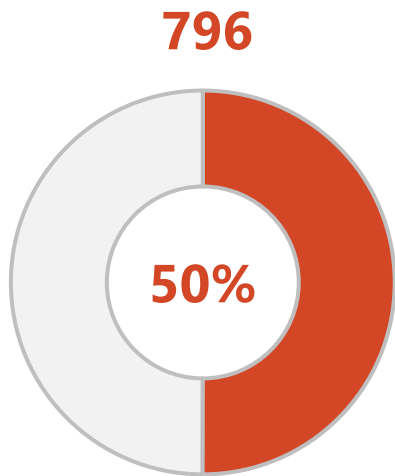


Rethink  
child welfare

Early interventions with young families are they key to reducing foster care placement for the youngest children.

# CHILDREN & FAMILY SERVICES

## Foster Care in ND – 2020 Snapshot



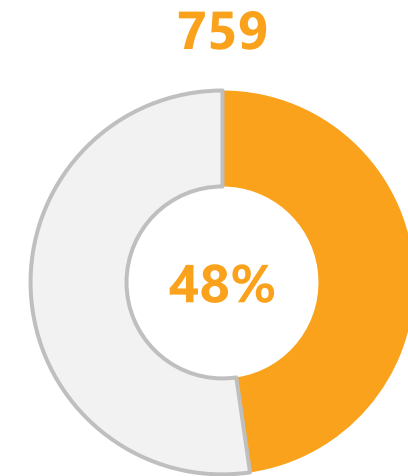
### 1 in 2 age 0-7

Half of the 1,591 children in foster care in North Dakota are age 7 or younger. (2020)

34%

### Intense level of care

Of the 189 kids receiving therapeutic foster care in 2020, 65 (34%) were younger than 7 years old.



### 5x more likely

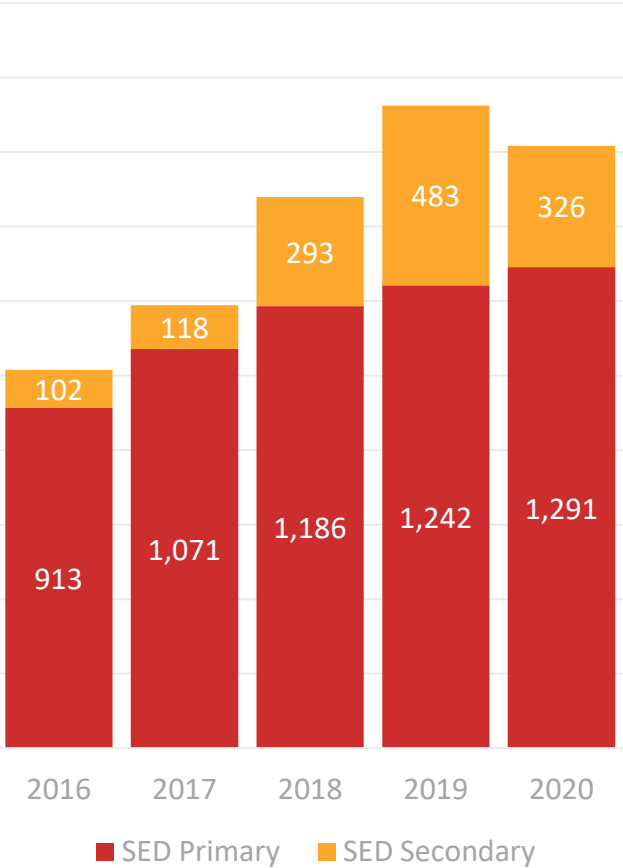
Native American children make up 48% of the total number of children in foster care in ND (759 of 1,591).

Native American children make up 8.7% of kids under age 18 in ND.

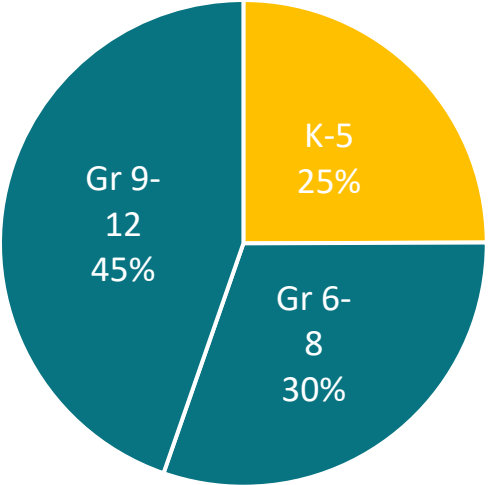


# Trends in services for emotional disturbance, age of incidents and rates of chronic absence point to increasing behavioral health needs for kids and families

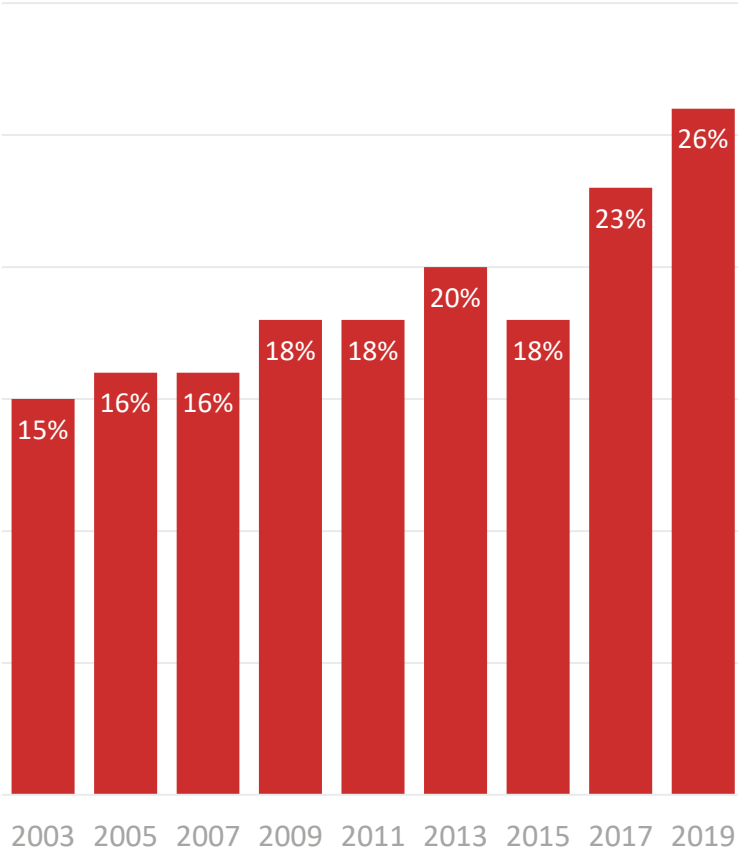
Students receiving services for “emotional disturbance” in Grades K-12



“Incidents” in school setting by grade level (2019-20 school year)



4<sup>th</sup> graders counted as chronically absent by academic year



Rethink child welfare  
 Supporting behavioral health needs in families can prevent disruptions at home and in school.





“Everyone would agree that children should not be exposed to abuse or neglect.

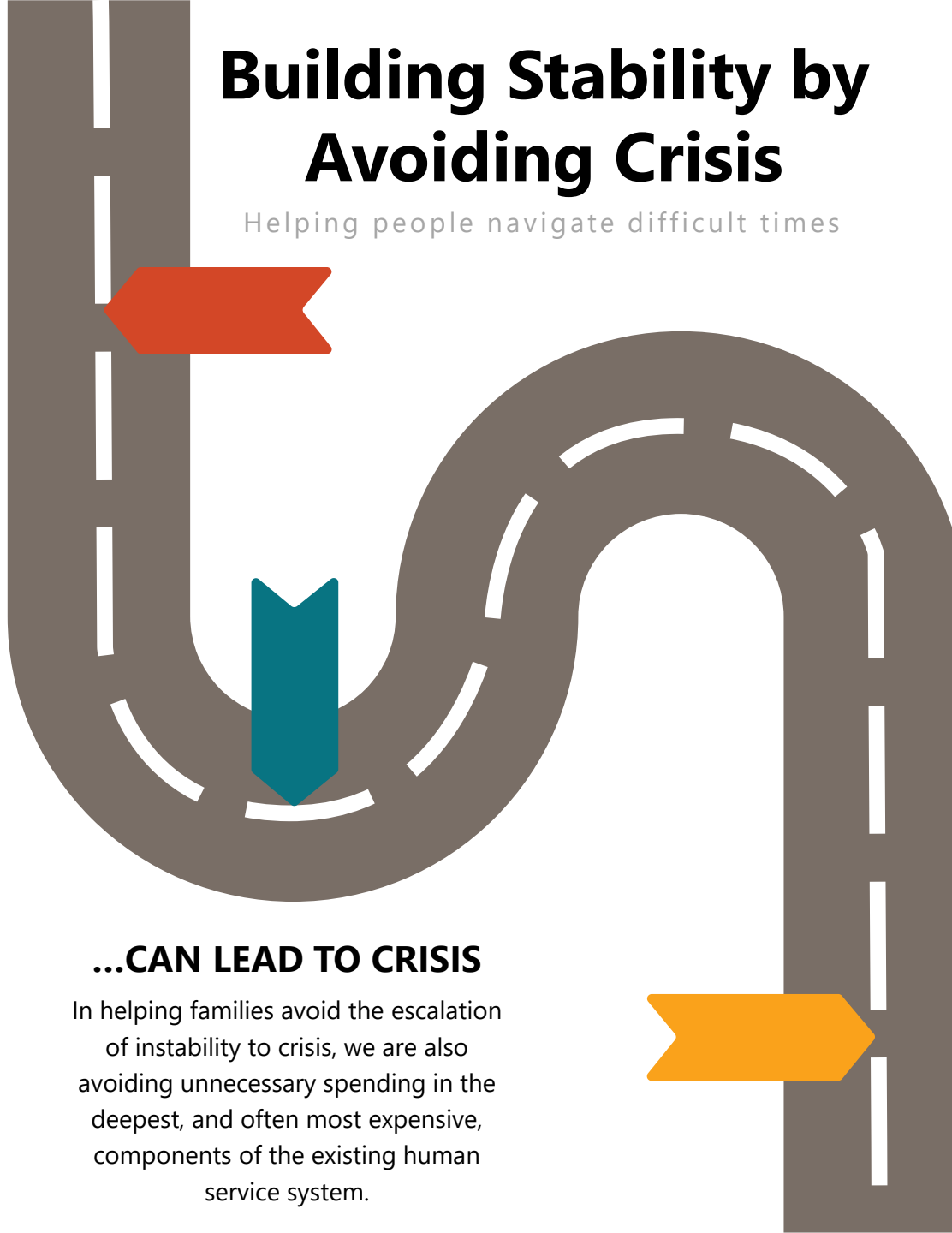
“The process of being removed from one’s home and placed in foster care has consequences as well and can have negative effects that last a lifetime.”

# Building Stability by Avoiding Crisis

Helping people navigate difficult times

## DISRUPTION

When families experience disruption, their ability to be a fully engaged, productive member of the community and the workforce is compromised.



## ...CAN LEAD TO CRISIS

In helping families avoid the escalation of instability to crisis, we are also avoiding unnecessary spending in the deepest, and often most expensive, components of the existing human service system.

## SERVICES SUPPORT STABILITY

Intervening early will both save money and strengthen families. It will allow us to reserve deep end services for the times when they are truly needed, and help people avoid deepening their journey into crisis by diverting from institutions, keeping families together, and helping and sure that people have a place to call home.

# Our Journey Toward Building Stronger Families

Redefining Child Safety and Wellbeing through a Two-Gen Lens

2017

## Setting the Course

**April** – HSRI Beh Health  
**June** – Soc Svc Redesign  
**Sept** – FFPSA Prev Opt In

2019

## Preparing for Change

**September** – FFPSA Prevention Plan Approved  
**October** – Safety Practice Model Cohorts

2021  
Jan Feb

## 2017-19 Session

**April** - Free Through Recovery  
**May** - Dual Status Youth Kickoff

2018

## 2019-21 Session

**January** – DSY Collab implem  
**April** Approve -  
1915i | Soc Svc Redesign |  
Mobile Crisis Svc | School BH  
**September** – FFPSA QRTP Rules  
Tribal IV-E Agreements

2020  
Sept Oct

## Putting into Practice

**January** – Provider Portals  
1915i and FFPSA  
Community Connect / Extended FTR |  
Safety Practice Model | Centralized  
Abuse/Neglect Intake



“North Dakota’s Child Welfare System is focusing on efforts to **ensure availability and access** to a broad, flexible array of **effective community-based services and supports**

for children and their families

that address their emotional, social, educational and physical needs,

including traditional and nontraditional services as well as natural and informal supports.”

*ND 2020-2024 Title IV-E  
Prevention Services and  
Programs Plan*

## Children considered a “Candidate for Foster Care”

Have access to



## Evidence-based Prevention Services

Under 18 years of age	Significant interference or limitations of the child’s functioning in home, school or community	Child is pregnant or parenting a child(ren)	Siblings in foster care
Inadequate supervision based on family and youth circumstances	Currently involved in 2 or more community services or agencies	DSM diagnosis for emotional, behavioral, or mental health disorder	Child whose adoption or guardianship arrangement is at risk of disruption
Prior out of home placement	Reunification has occurred	Difficulties are interfering or limiting achievement or maintenance in 1 or more developmentally appropriate skills	Parent/custodian/guardian has limited capacity to meet educational, medical, safety or basic needs of child due to parental need*

**In home parent skill-based programs**

**Mental health programs**

**Substance abuse prevention and treatment**

\*Parental inability to meet needs of child could be due to parent(s)’ behavioral health, incarceration, physical or intellectual disability, debilitating or life-threatening medical needs, homelessness or substandard living conditions, verbalization of no longer wanting their child, or substance exposed newborns.

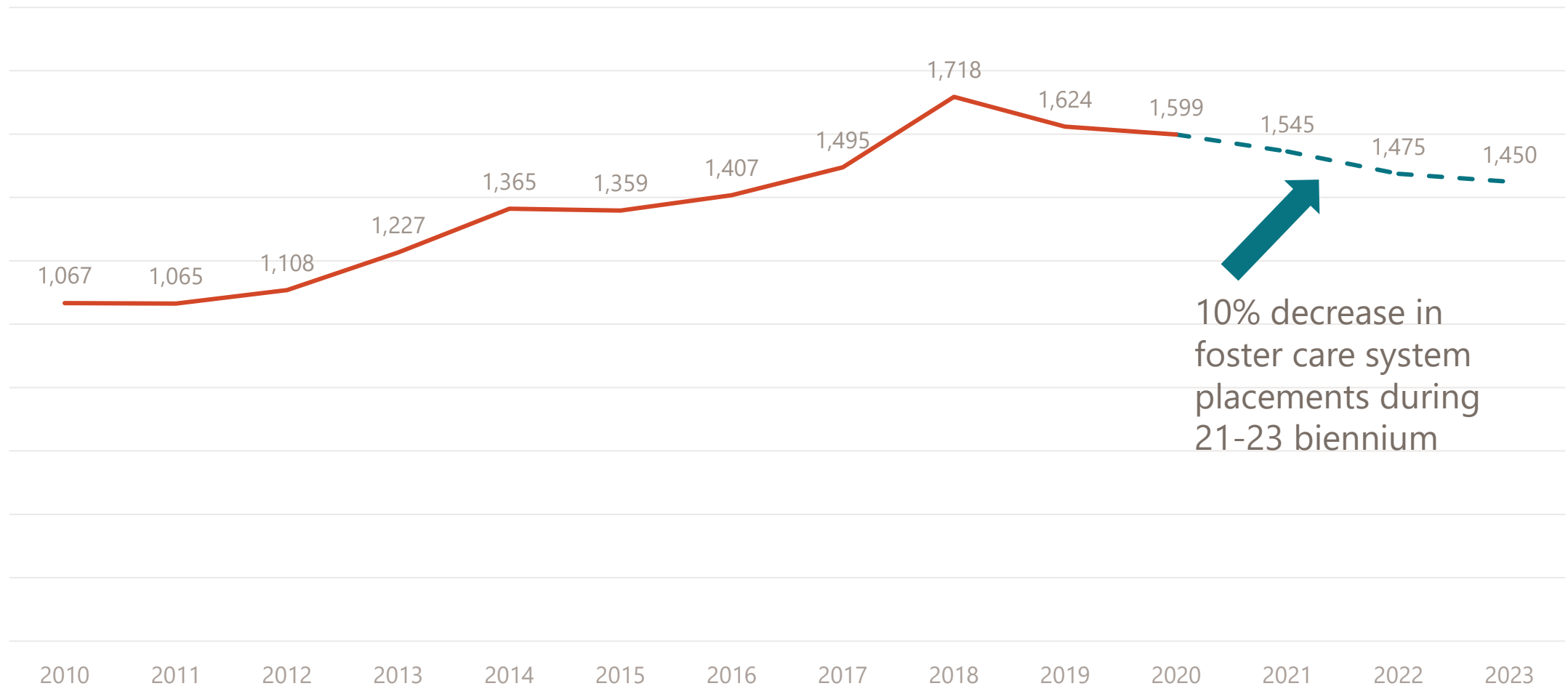


## Our goals

- Reduce Foster Care Numbers
- Reduce Institutional Placements
- Reduce Out of State Placements
- Reduce Substance Abuse as Abuse/Neglect factor
- Increase Kids receiving evidence-based supports
- Reduce severity of school-based behaviors

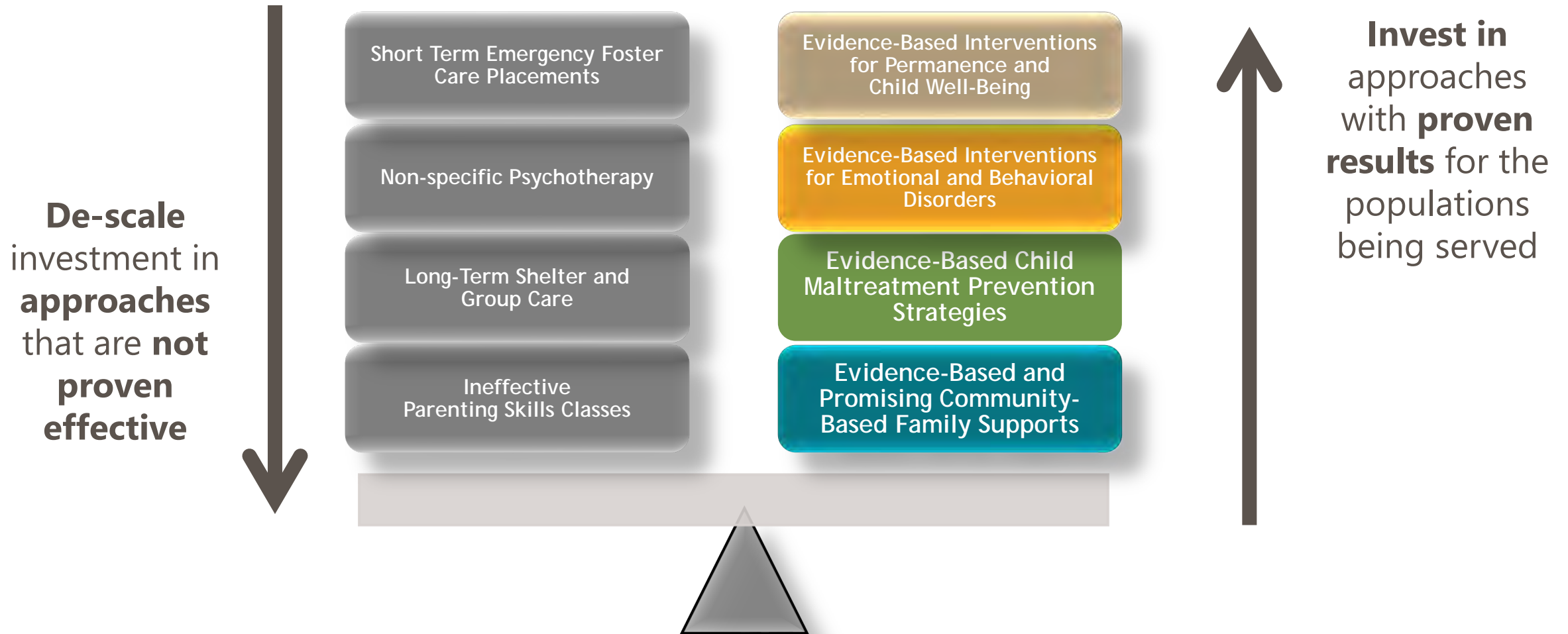
# CHILDREN AND FAMILY SERVICES

The 21-23 budget anticipates a modest but steady reduction in foster care and residential placements





# SHIFTING RESOURCES TO SUPPORT WHAT RESEARCH INDICATES WILL WORK FOR CHILDREN AND FAMILIES





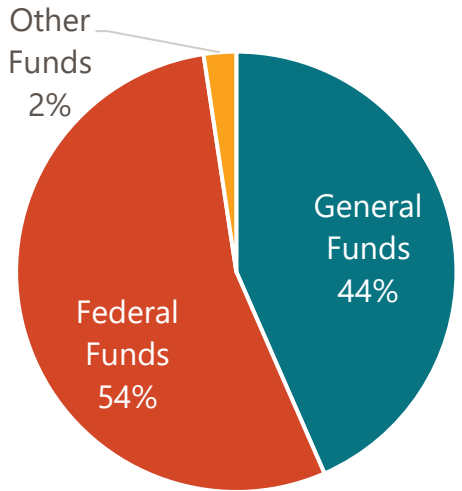
# Children & Family Services Budget Summary

19-21 Budget	\$181,171,041	41.6 FTE
21-23 Budget (exec)	\$165,637,720	41.6 FTE
21-23 Budget (House)	\$171,815,985	48.3 FTE

+6.7 FTE and \$6.2 million related to early childhood policy bills (HB1416 and HB1466)

21-23 EBR proposed \$15.5 million decrease in total budget (7% of reduction is from federal funds)

- Reduce foster care and residential placements, accomplished in part by investing in evidence-based parent skill building and mental health services to families
- Implement equity in payments for services to families (QRTP, subsidized adoption, targeted case mgmt)
- Technology infrastructure investments in early childhood integrated data system and replacement of child welfare technology platform



# DEVELOPMENTAL DISABILITIES

## Program Purpose

Maximize community inclusion, independence and self-sufficiency to prevent institutionalization, and to enable individuals to transition from institutions to community living.



# DEVELOPMENTAL DISABILITIES

## What we do

### Case Management

- Case management provided by DD Program Managers to individuals and families
- Eligibility review
- Person centered planning
- Service authorization

### Administration

- Provider licensing
- Training & TA
- Policy Development
- Contract Management
- Provider Enrollment
- Part C and Infant Development

### Program Integrity

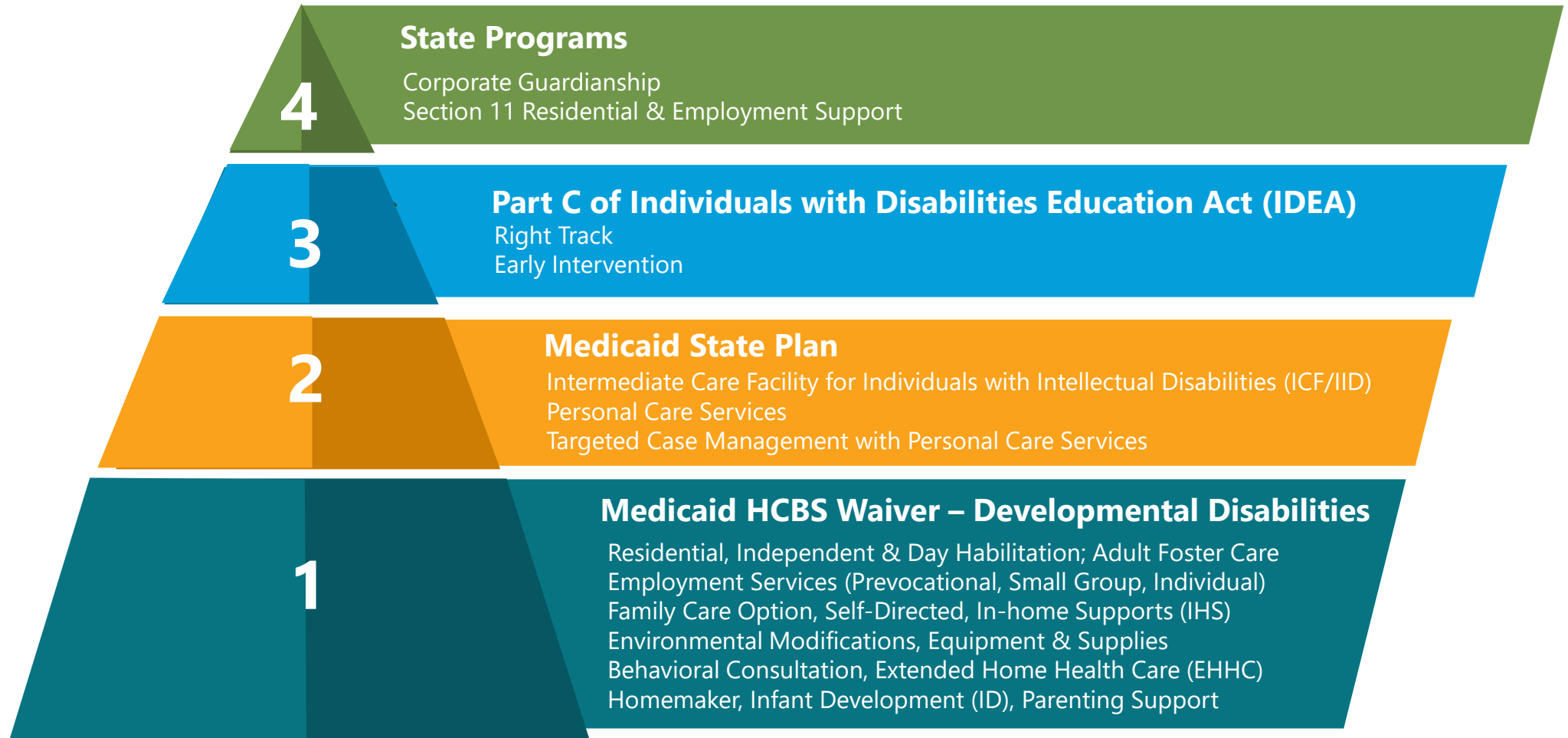
- Regulatory compliance
- Provider Audits
- Case Reviews
- Federal & State Audits
- Quality Assurance

### Partnerships

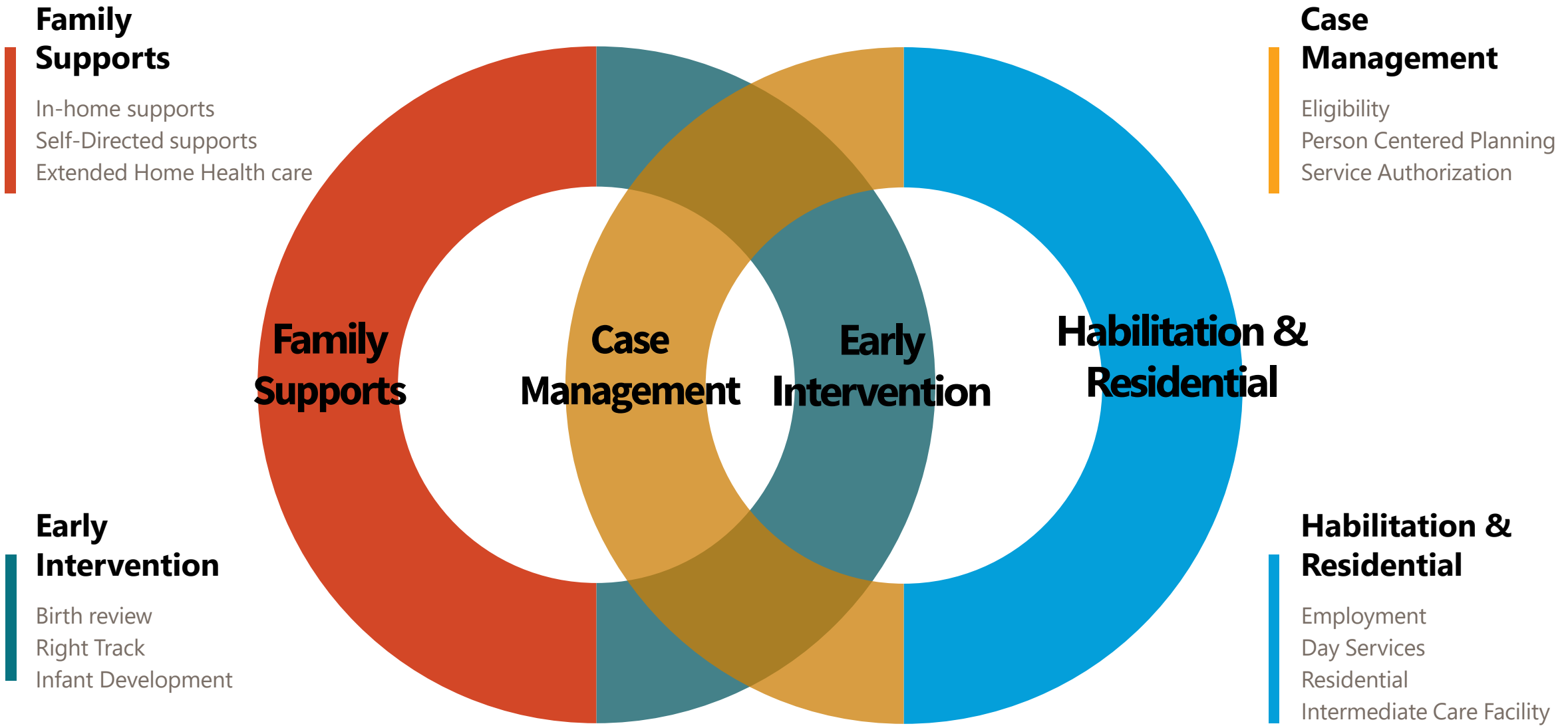
- North Dakota Interagency Coordinating Council
- State Rehabilitation Council
- Transition Task Force
- Money Follows the Person

# DEVELOPMENTAL DISABILITIES

## Service Array by Funding Authority

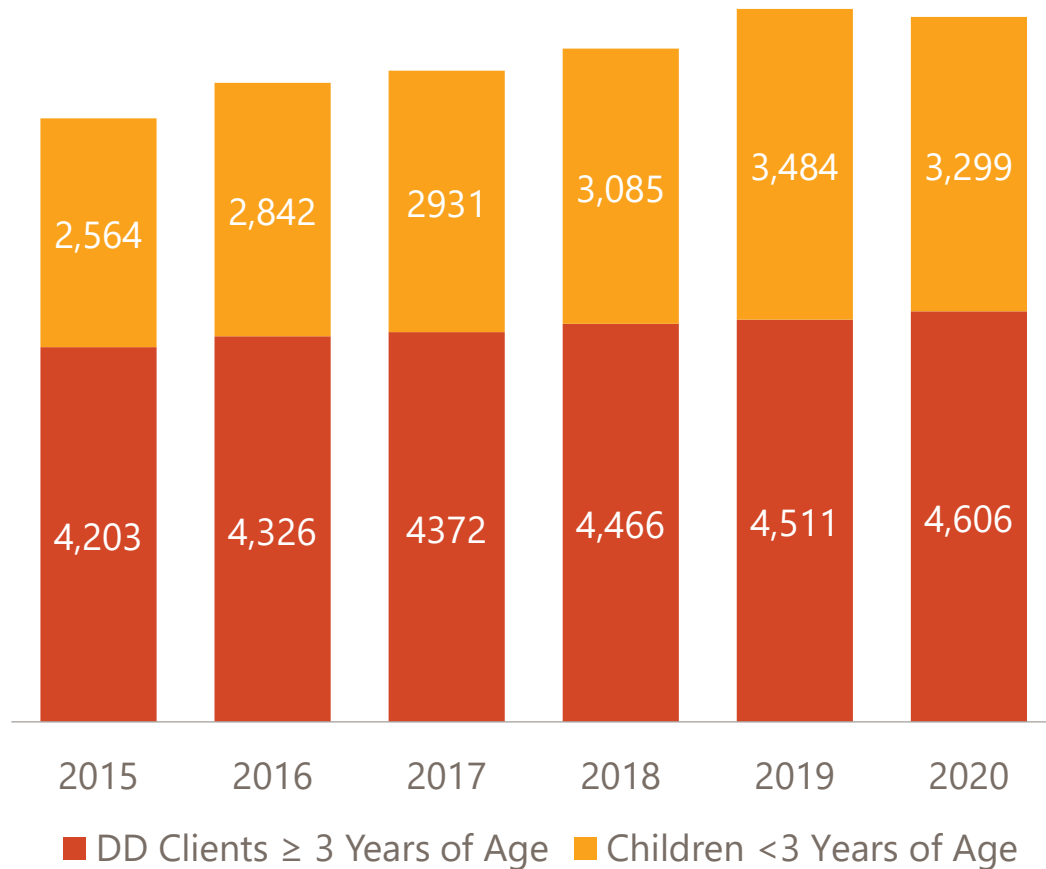


# Case management and early intervention are a key intersection within the continuum of services available to people with Developmental Disabilities

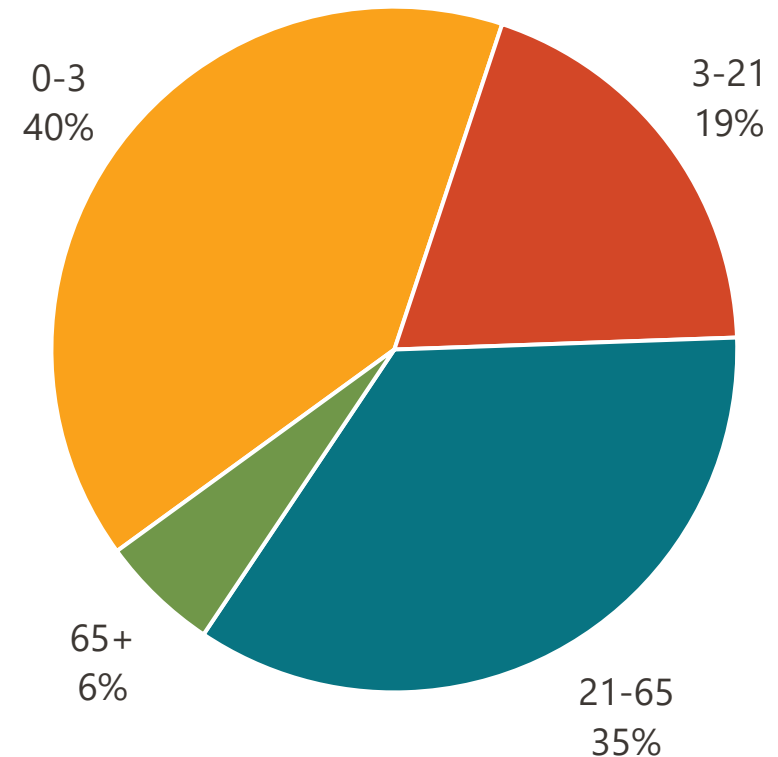


# DEVELOPMENTAL DISABILITIES

The majority of individuals receiving case management services are under age 21



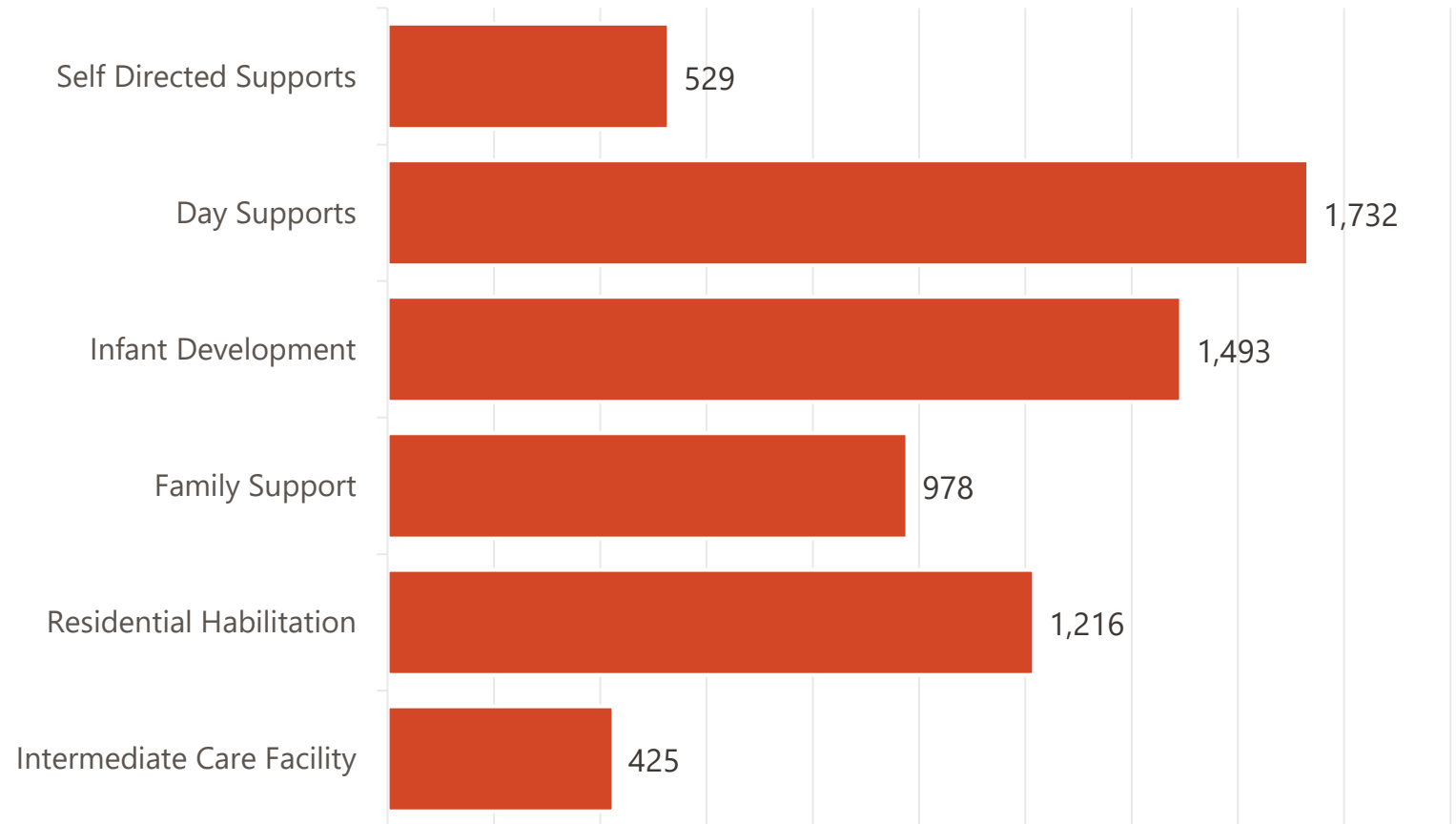
Age of DD clients receiving program management SFY20



# DEVELOPMENTAL DISABILITIES

## Individuals receiving 1915(c) waived services

ND's 1915(c) waived services for people with a range of developmental disabilities are coordinated by 120 DD program managers and delivered by 38 licensed providers who served 7,900 people ages 0-90+ in 2020

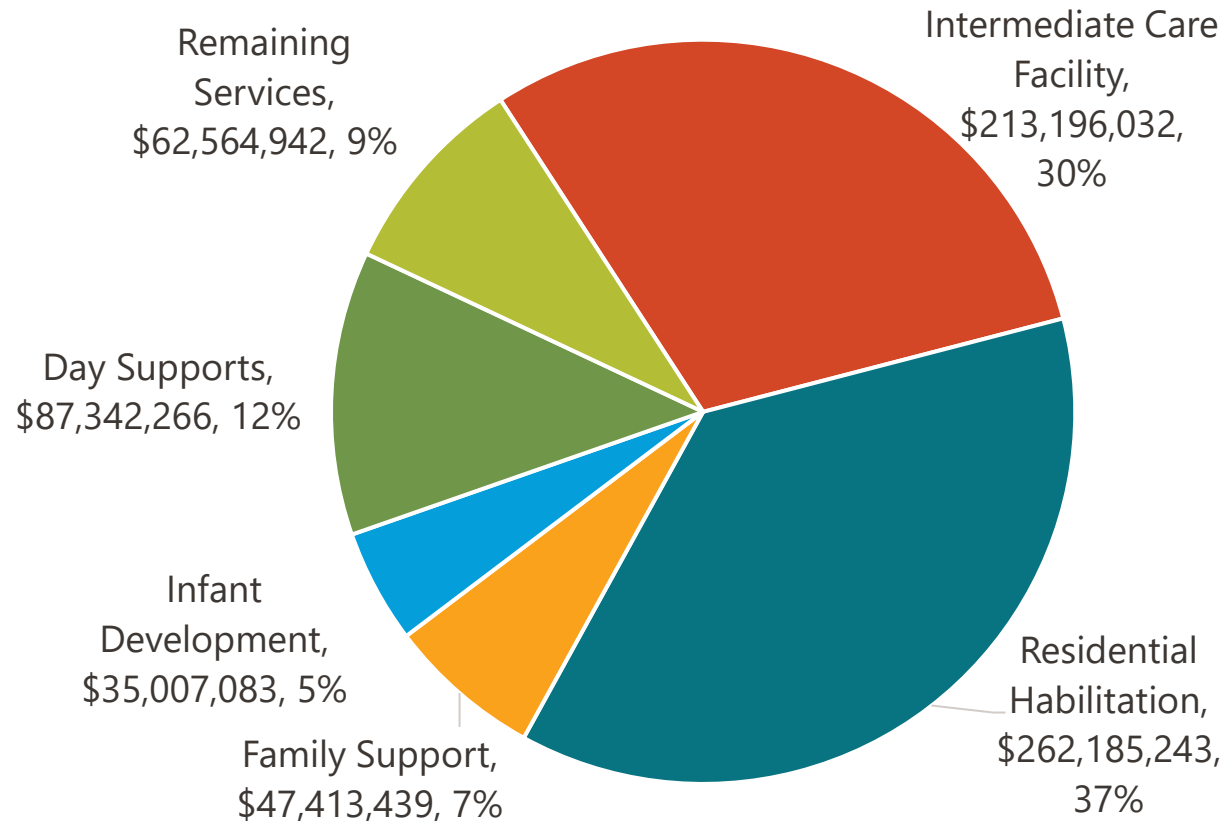




# DEVELOPMENTAL DISABILITIES

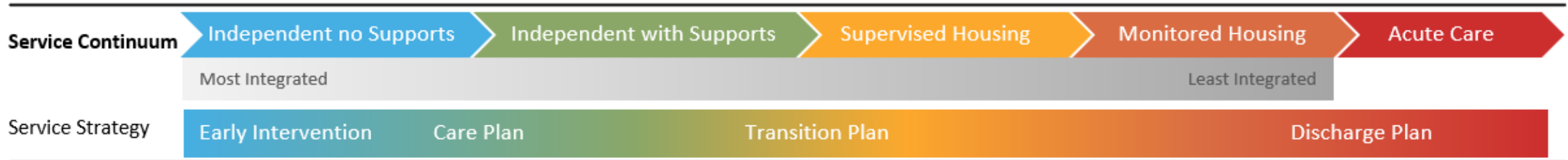
## Proposed 21-23 budget by type of service

67% of the total proposed 21/23 budget for DD services will support residential care for people with developmental disabilities

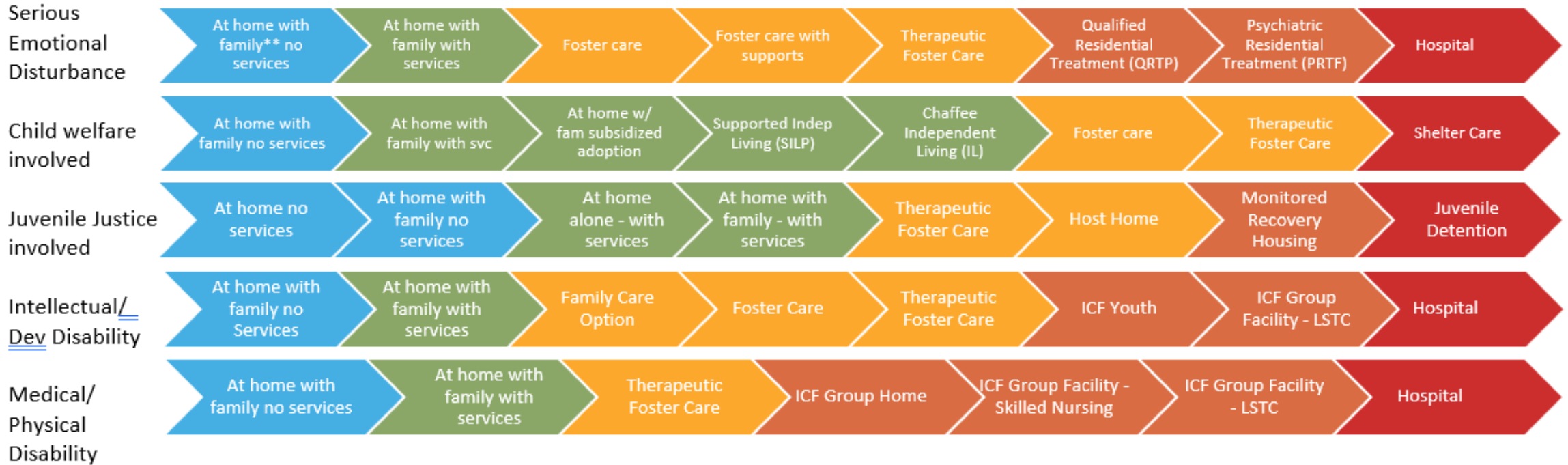


# The Service Continuum - Children

Illustrating the work of transition and diversion



## CHILDREN

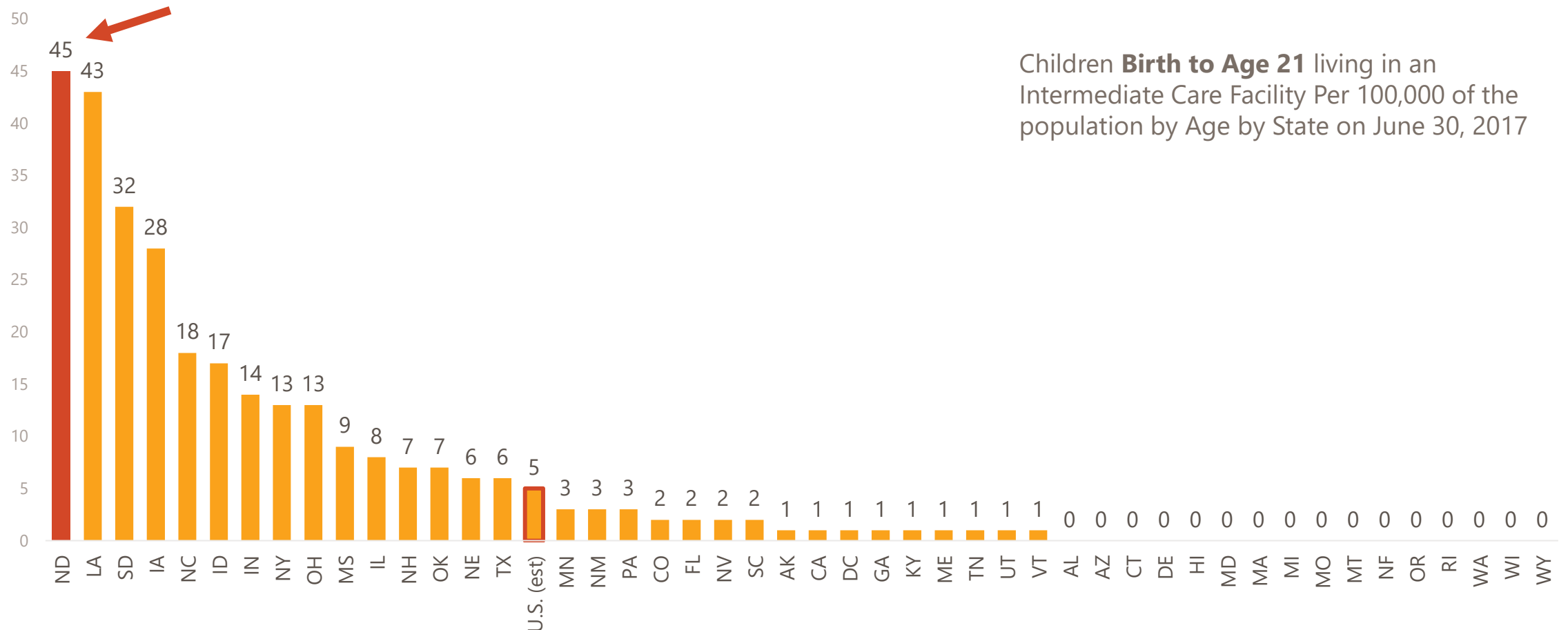


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\*\*Family = includes birth family, kin-caregiver, adopted family

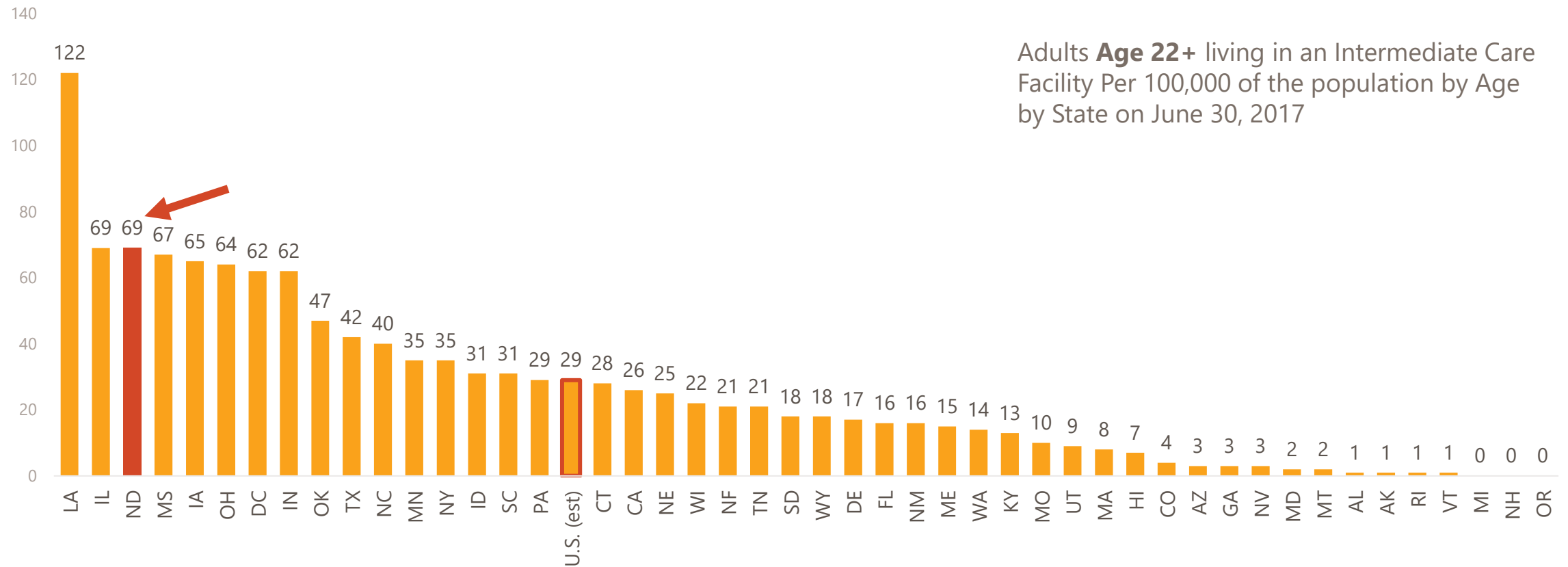
\*\*\*ICF = Intermediate Care Facility. ICF Group Home (less than 8 people); ICF Group Facility (8 or more people); ICF LSTC (Life Skills Transition Center)

# ND HAS THE HIGHEST RATE OF CHILDREN LIVING IN AN INTERMEDIATE CARE FACILITY (ICF)



Source: Residential Information Systems Project. In-Home and Residential Long-Term Supports and Services for Persons with Intellectual or Developmental Disabilities: Status and Trends 2017. NOTE: Virginia, Kansas, Arkansas and West Virginia not reporting.

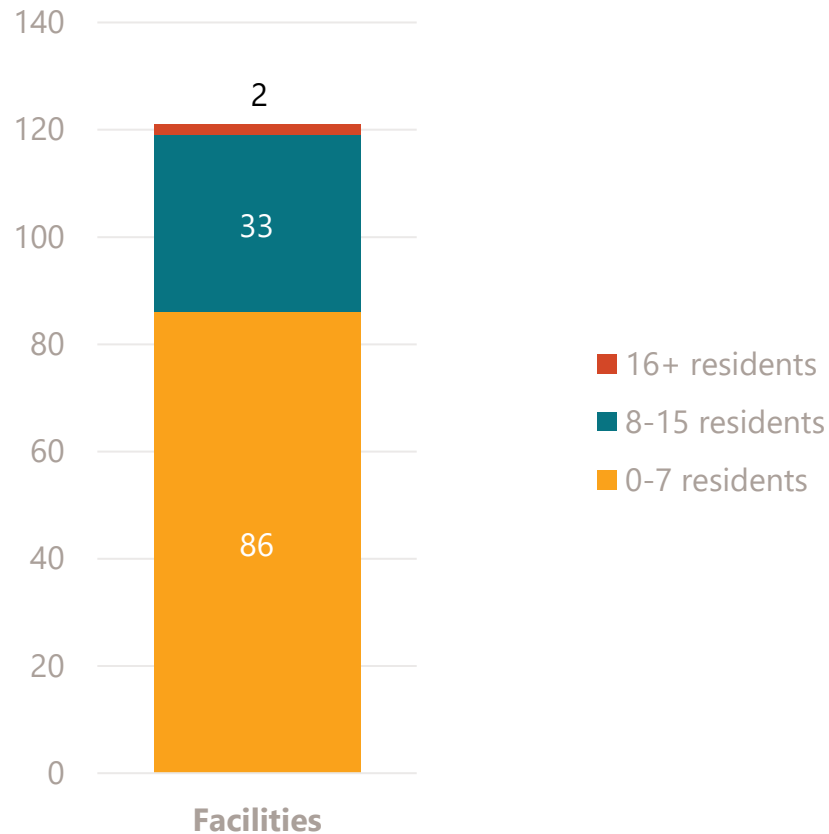
# ND HAS THE 3<sup>RD</sup> HIGHEST RATE OF ADULTS LIVING IN AN INTERMEDIATE CARE FACILITY (ICF)



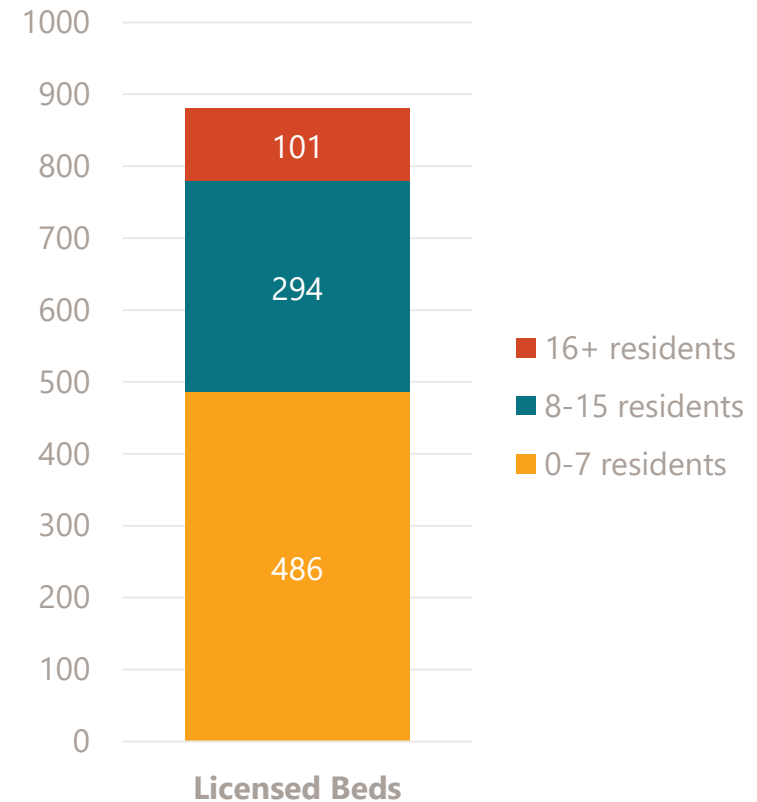
Source: Residential Information Systems Project. In-Home and Residential Long-Term Supports and Services for Persons with Intellectual or Developmental Disabilities: Status and Trends 2017. NOTE: Virginia, Kansas, Arkansas and West Virginia not reporting.

# 45% OF ND LICENSED DD RESIDENTIAL BEDS ARE IN FACILITIES THAT SERVE 8 OR MORE PEOPLE

# of Licensed Residential DD Facilities by # of Residents



# of Licensed Residential Beds by Size of facility





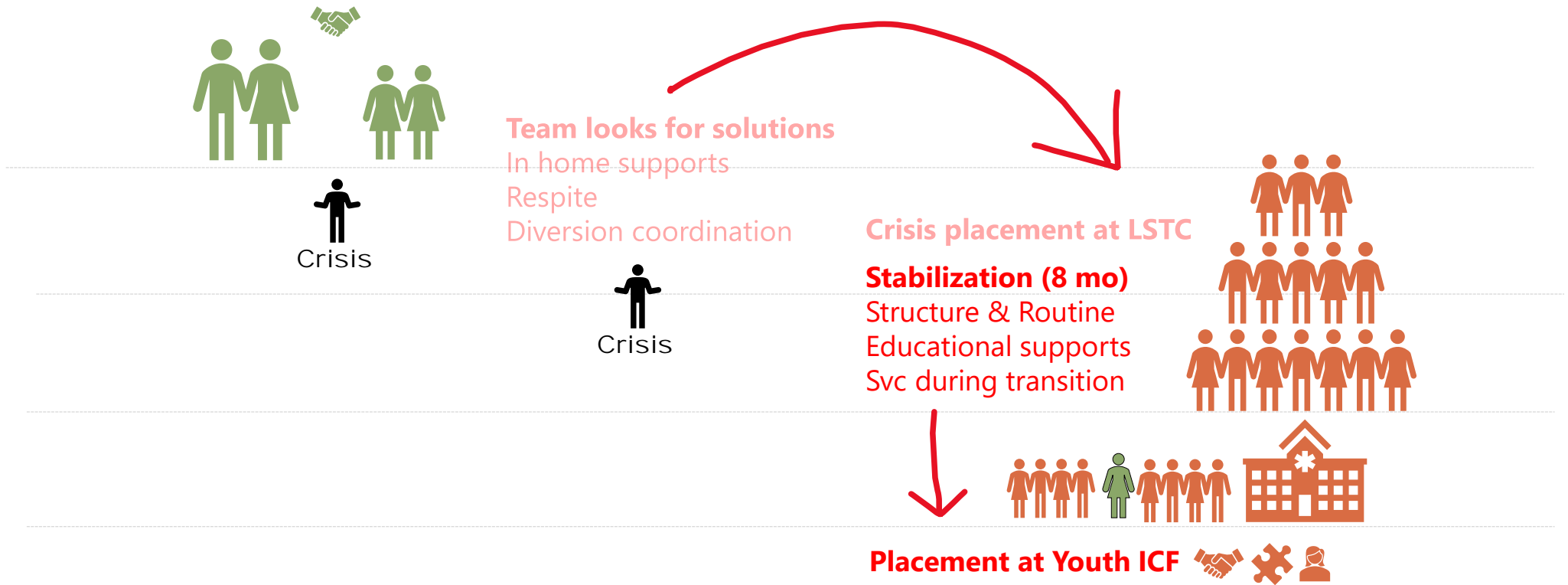
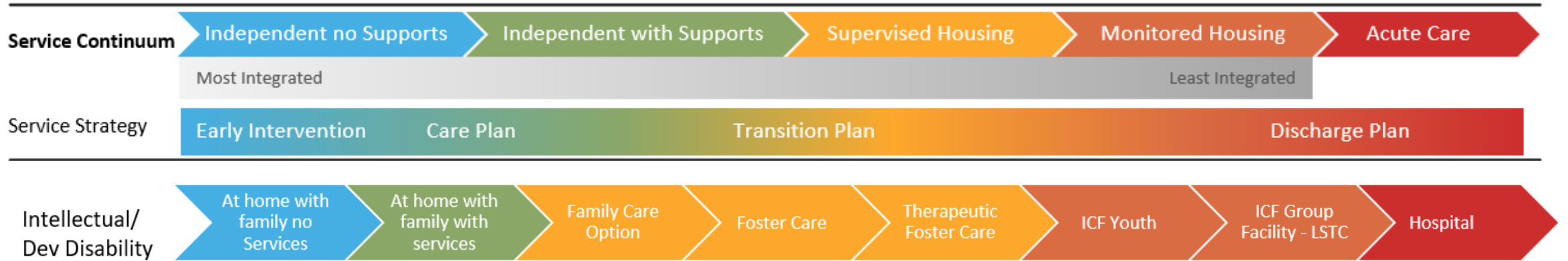
## What's Driving Us?

In North Dakota, people have the opportunity to learn about their options and make an informed choice about the most integrated setting that is right for them.

Our system partners work together to create robust options for non-institutional living, optimizing autonomy, choice, self-direction and community integration.

# A young girl is struggling. So is her family. What do we do?

Understanding how systems can help families find stability amidst crisis



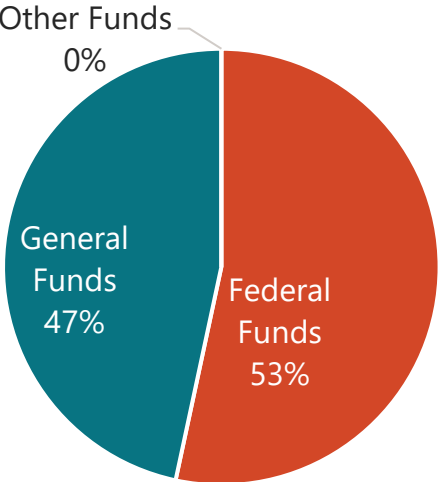


# Developmental Disabilities Budget Summary

19-21 Budget	\$689,016,522	125.87 FTE
21-23 Budget (exec)	\$739,269,819	125.87 FTE
21-23 Budget (House)	\$739,217,501	125.87 FTE

21-23 EBR proposed \$50.3 million increase in total budget

- Cost to continue services
- Diversion/Transition initiative with LSTC
- Provider inflation
- Payment system adjustments for ICF and Residential Group Homes
- Elimination of supplemental recreational and Section 11 grants
- Transitioning accreditation to provider program cost
- Operating efficiencies related to travel and occupancy





# AGING & ADULT SERVICES

## Program Purpose

Help older adults and individuals with physical disabilities to remain in their own homes and communities.

Protect the health, safety, welfare and rights of residents of long-term care settings and vulnerable adults in the community.



# AGING & ADULT SERVICES

## What we do

### **Aging & Disability Resource Link (ADRL)**

- Toll free resource line for people with questions about how to access services
- Centralized intake for HCBS services
- Proactive in-reach and out-reach to build awareness of HCBS options

### **HCBS Case Management**

- HCBS case management provided to consumers
- Eligibility review
- Care Team planning
- Service authorization

### **Protective Services**

- Vulnerable Adult Protective Services delivered statewide
- Ombudsman services for long term care residents

### **Senior Nutrition & Community Supports**

- Administration of Older Americans Act
- Senior nutrition program
- Support for Family Caregivers
- Lifespan Respite grant

### **Administration HCBS and Partnerships**

- HCBS 1915(c) Medicaid waiver
- Medicaid State Plan – Personal Care
- SPED / Expanded SPED
- Money Follows the Person

# AGING & ADULT SERVICES

## Aging & Disability Resource Link (ADRL)

### Top 5 Information Requests

- In-home assistance
- Adult protective services
- Medicaid information
- Family caregiver support program (FCSP)
- Older adults/aging Issues

Web  
6147

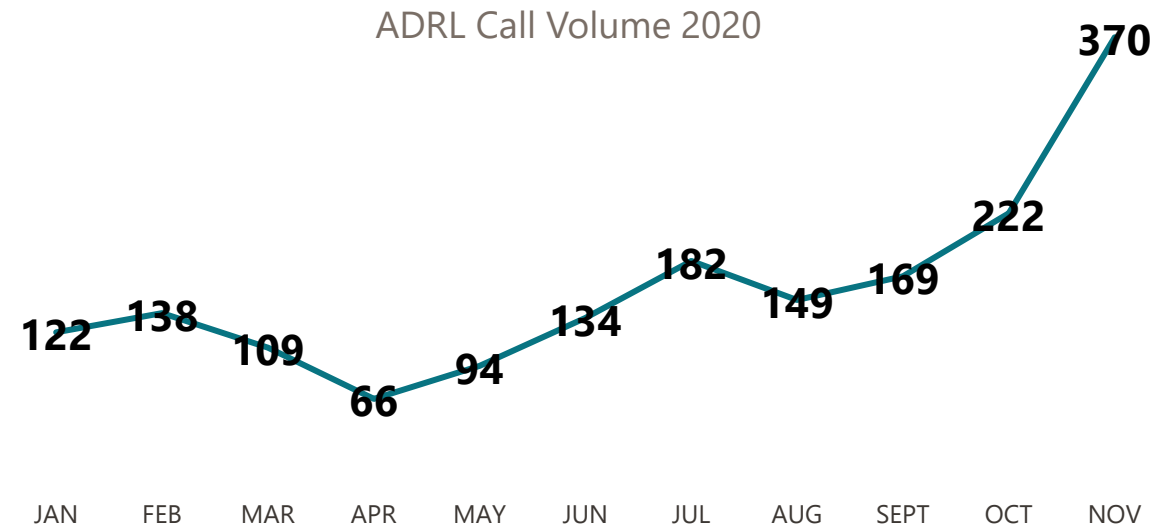
Phone  
2,776



# AGING & ADULT SERVICES

## ADRL Centralized Intake

- Process to receive HCBS referrals
- Based on no wrong door (NWD) approach
- Network built to support individuals needing LTC services by simplifying and streamlining access to information and services
- 6 FTE dedicated to centralized intake
- Fully implemented January 2021



**7 in 10**

*Americans 65+ will need LTC services for an average of 3 years*

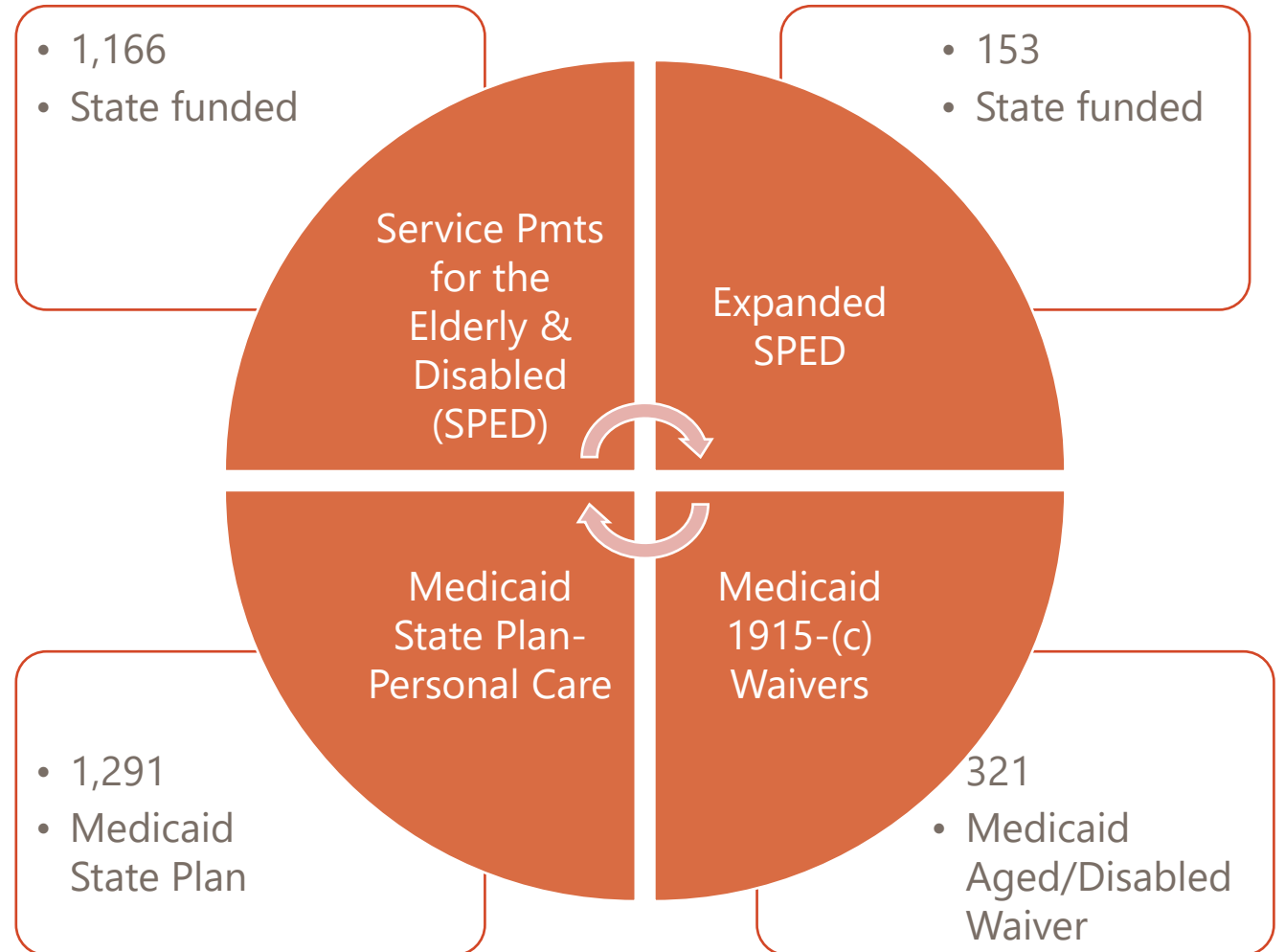
# AGING & ADULT SERVICES

## Home and Community Based Services

**2,300**

HCBS supported 2,300 unduplicated recipients

- Primarily serves older adults and individuals with physical disabilities
- Recipients must be both functionally and financially eligible
- May have client cost share based on income
- Federal and state funds



# AGING & ADULT SERVICES

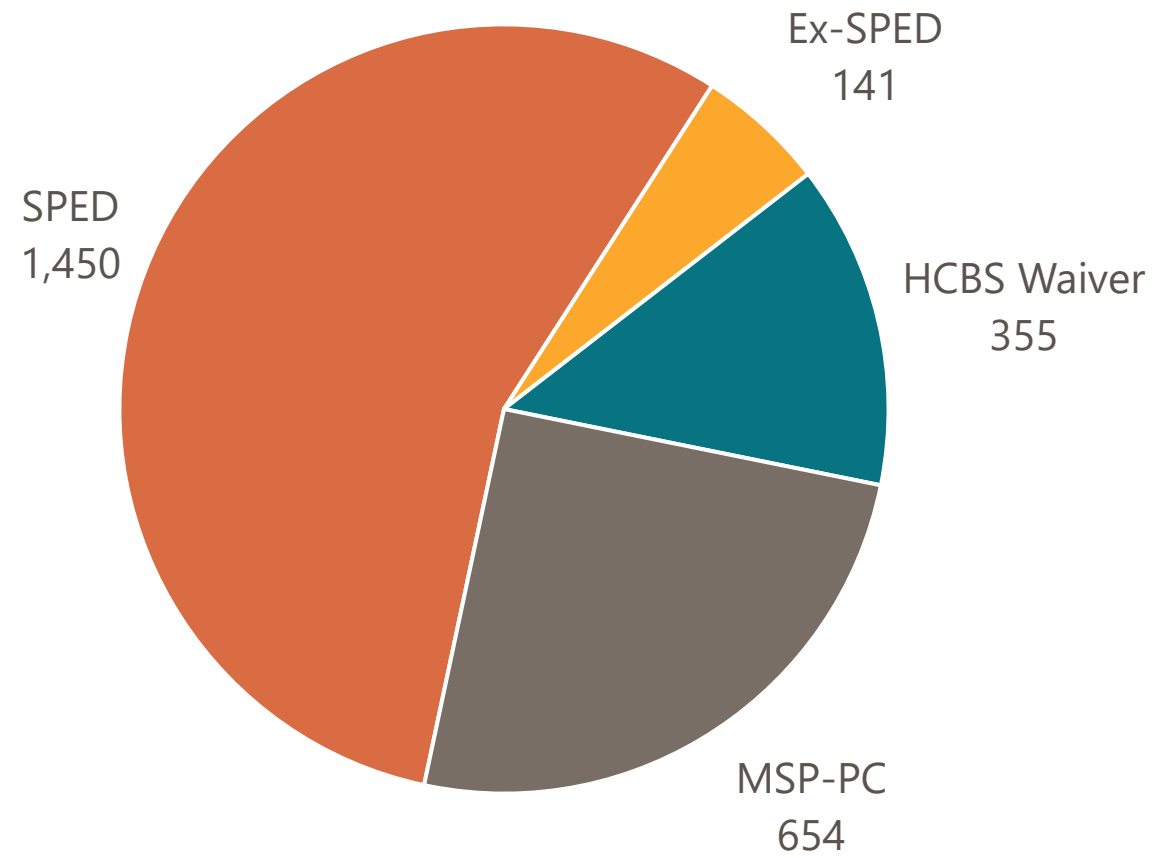
## Types of *Support Services* available via HCBS

- Adult Day Care
- Adult Foster Care
- Adult Residential Care
- Attendant Care
- Case Management
- Chore Service
- Community Support Services / Residential Habilitation
- Community Transition Services
- Companionship
- Emergency Response System
- Environmental Modification
- Extended Personal Care
- Emergency Response System
- Environmental Modification
- Family Home Care & Family Personal Care
- Home Delivered Meals
- Homemaker Services
- Non-Medical Transportation
- Personal Care Services
- Respite Care
- Specialized Equipment
- Supervision
- Supported Employment
- Transitional Care

# AGING & ADULT SERVICES

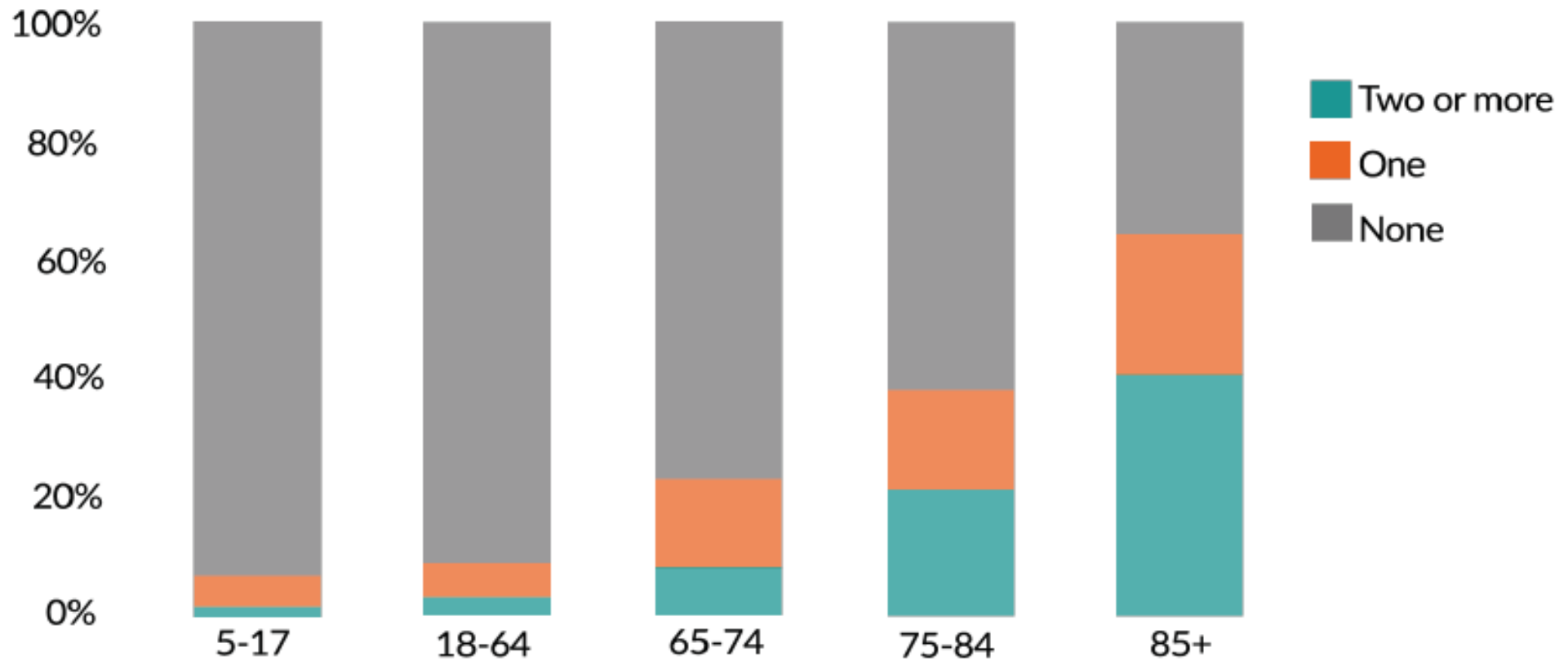
## Individuals receiving HCBS services (Nov 2020)

ND's HCBS for older adults and people with physical disabilities are coordinated by 64 HCBS case managers and delivered by 1,149 Qualified Service Providers (QSPs) who served 2,300 people ages 18-104 in 2020



Source: DHS HCBS Caseload Data Nov 2020

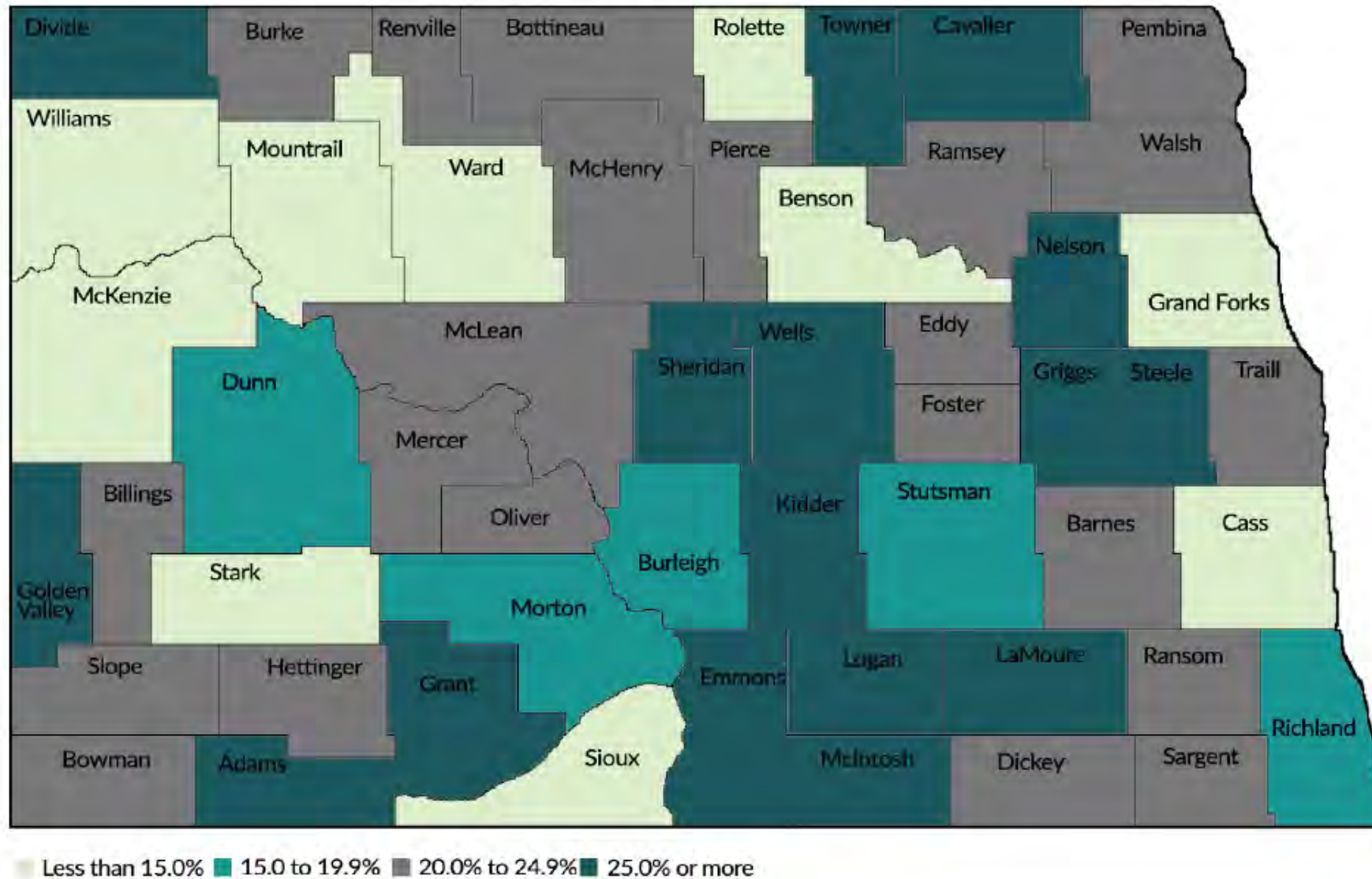
## Individuals by Detailed Age and Number of Disabilities <sup>18</sup>



Source: "The Current State of Housing in North Dakota", 2020, p.18



## Percent of Population Age 65+ <sup>19</sup>



Source: "The Current State of Housing in North Dakota", 2020, p.18

# AGING & ADULT SERVICES

## HCBS Case Managers

**64**

HCBS case managers who work in  
19 Human Service Zones across  
ND

**3,057**

Individuals served by HCBS case  
managers (Nov 2020)

**283 & 54**

On average, 283 new referrals and  
54 new cases opened for HCBS  
each month



# AGING & ADULT SERVICES

## Vulnerable Adult Protective Service (VAPS)

The program addresses the safety of vulnerable adults who are at-risk of harm due to the presence or threat of abuse, neglect, or exploitation.



# AGING & ADULT SERVICES

## Vulnerable Adult Protective Service (VAPS)

1,695 allegations



1,418 investigations

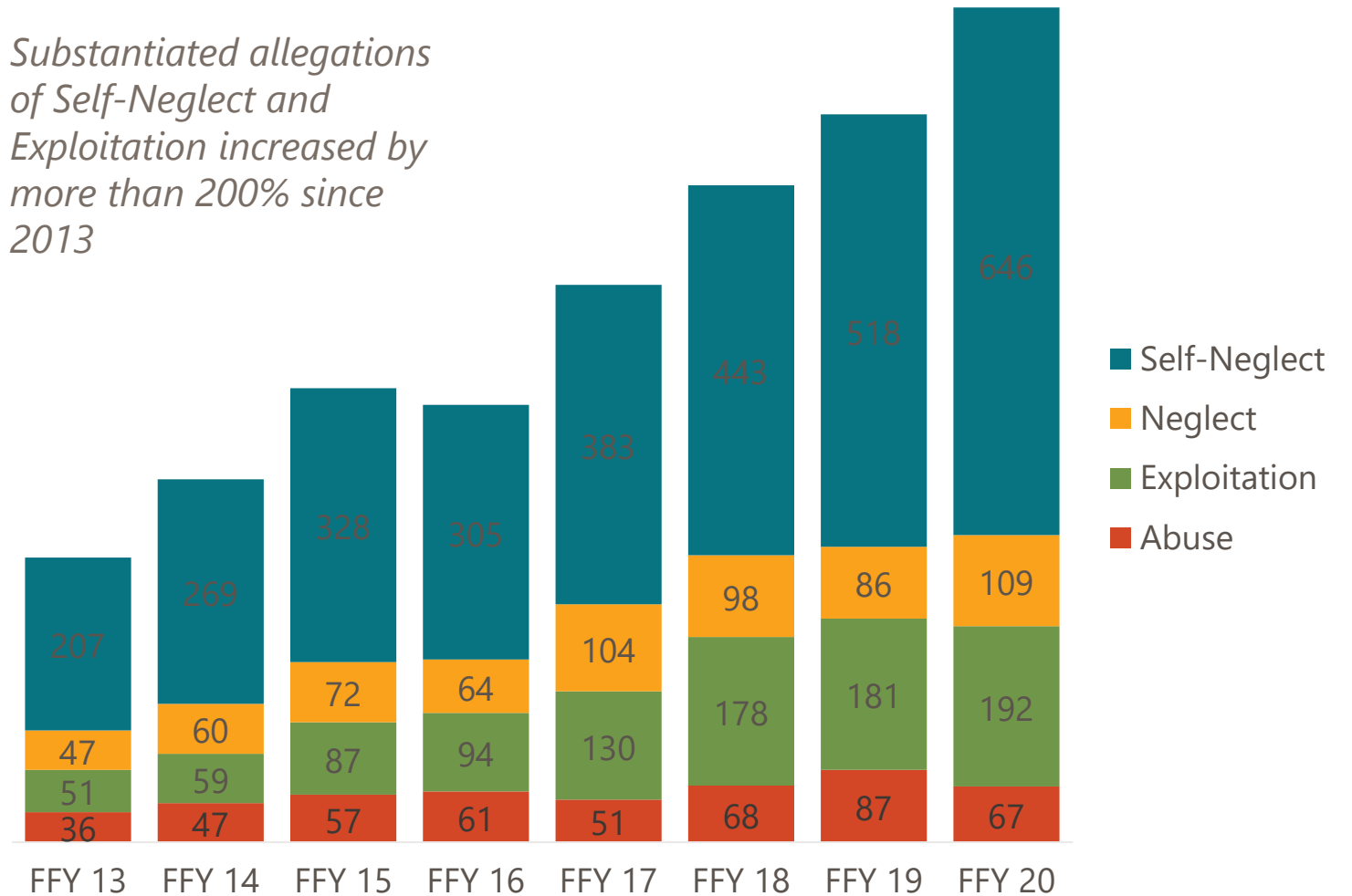


1,014 substantiated

Most common allegation:

**Self Neglect**

*Substantiated allegations of Self-Neglect and Exploitation increased by more than 200% since 2013*



# AGING & ADULT SERVICES

## Long Term Care Ombudsman

Long-Term Care Ombudsmen are advocates for resident rights. They help protect the quality of life and quality of care of anybody who lives in a nursing home, basic care or an assisted living facility.



# AGING & ADULT SERVICES

## Long Term Care Ombudsman

### ND Long Term Care System

5,635 Nursing Facility Beds\*  
676 Swing Beds  
2,054 Basic Care Beds  
3,066 Assisted Living Units

*\*In 252 facilities located in 79 communities*

### Most Common Complaints

#### Nursing Homes/Swing Bed

- Autonomy, Choice, Preference, Exercise of Rights, Privacy
- Care
- Systems/Others

#### Basic Care & Assisted Living

- Autonomy, Choice, Preference, Exercise of Rights, Privacy
- Admission, Transfer, Discharge, Eviction
- Financial, Property (Not due to Financial Exploitation)

---

**1,267**

Information and  
Consultations

**448**

Complaints  
Received

**305**

Cases  
opened

# AGING & ADULT SERVICES

## Older Americans Act (OAA)

**24,600**

Older adults served in FFY2019

Serves people age 60+  
No income limits

Voluntary contribution  
Cannot deny service due to  
unwillingness or inability to  
contribute

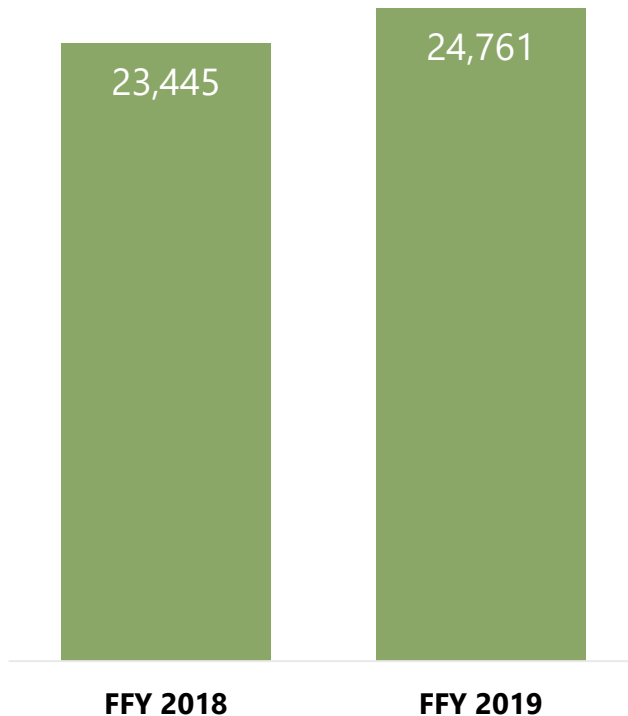
Federal, state, and local funds



# AGING & ADULT SERVICES

## Older Adults served with Older American Act Funds

Clients Served with OAA Funds  
increased by 6%



**3,919**

Clients with household  
income at or below  
**poverty** level (increase of  
5% over FFY2018)

**4,457**

Clients **over age 85**  
(increase of 2% over  
FFY2018)

**11,882**

Clients who lived in **rural**  
areas (increase of 2% over  
FFY2018)



# AGING & ADULT SERVICES

## Senior Nutrition Services

Nutrition services **reduce** hunger, **food insecurity**, malnutrition, and **promote socialization** of older adults.

Seniors with food insecurity can have many negative health consequences:

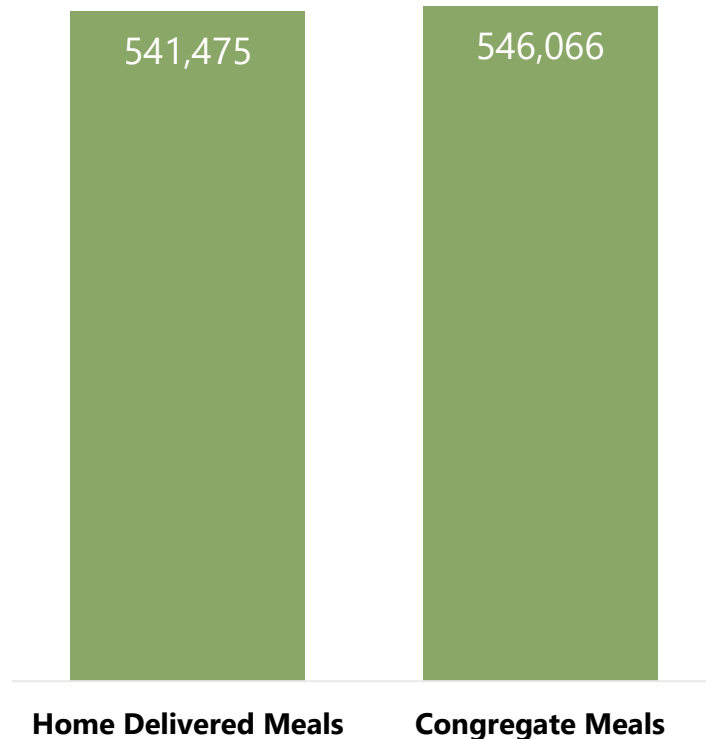
- Prolonged hospital stays
- Unintentional weight loss that can increase need for physical assistance



# AGING & ADULT SERVICES

## Older American Act Funds Nutrition Services

In 2019 people utilized home delivered and congregate meals in roughly equal rates



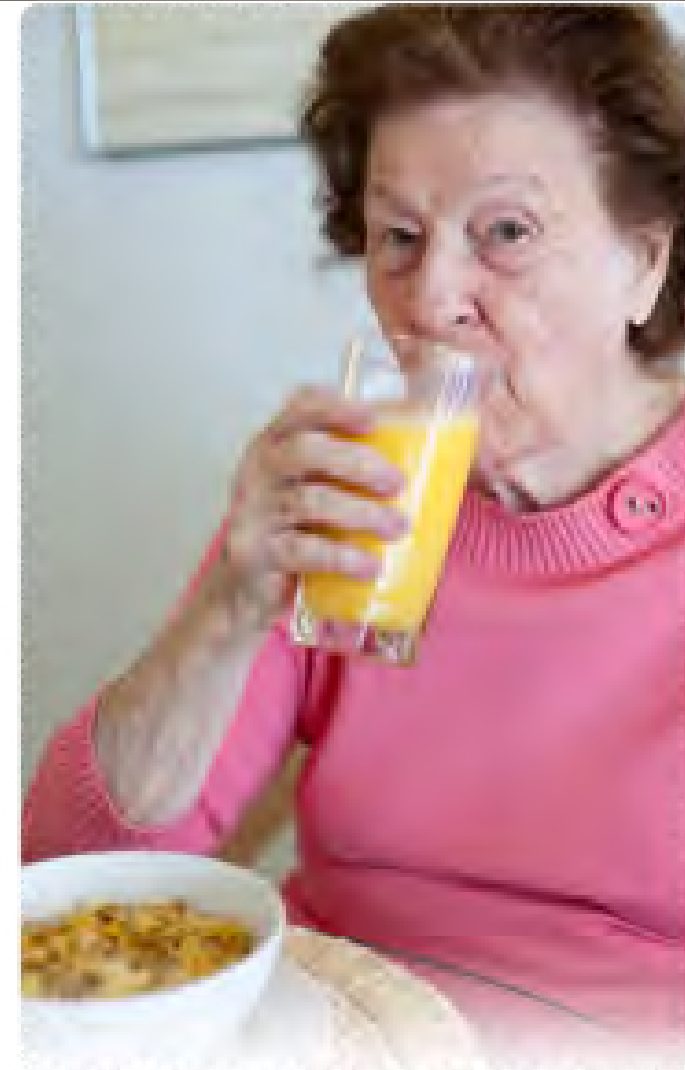
**23%**

Seniors receiving home delivered meals who are "high nutrition risk" (1,113 of 4,801 individuals served)

9.5% of the 14,311 individuals who received congregate meals in 2019 were "high nutrition risk"

**23%**

of Seniors receiving home-delivered meals have 2 or more ADL limitations (1,124 of 4,801 individuals served)



# AGING & ADULT SERVICES

## Key Changes due to COVID: Nutrition Services

The pandemic changed the way meals are delivered to older adults.

Meals options:

- Home delivered
- Pre-packaged grab-and-go
- Curbside pickup
- Frozen meal options

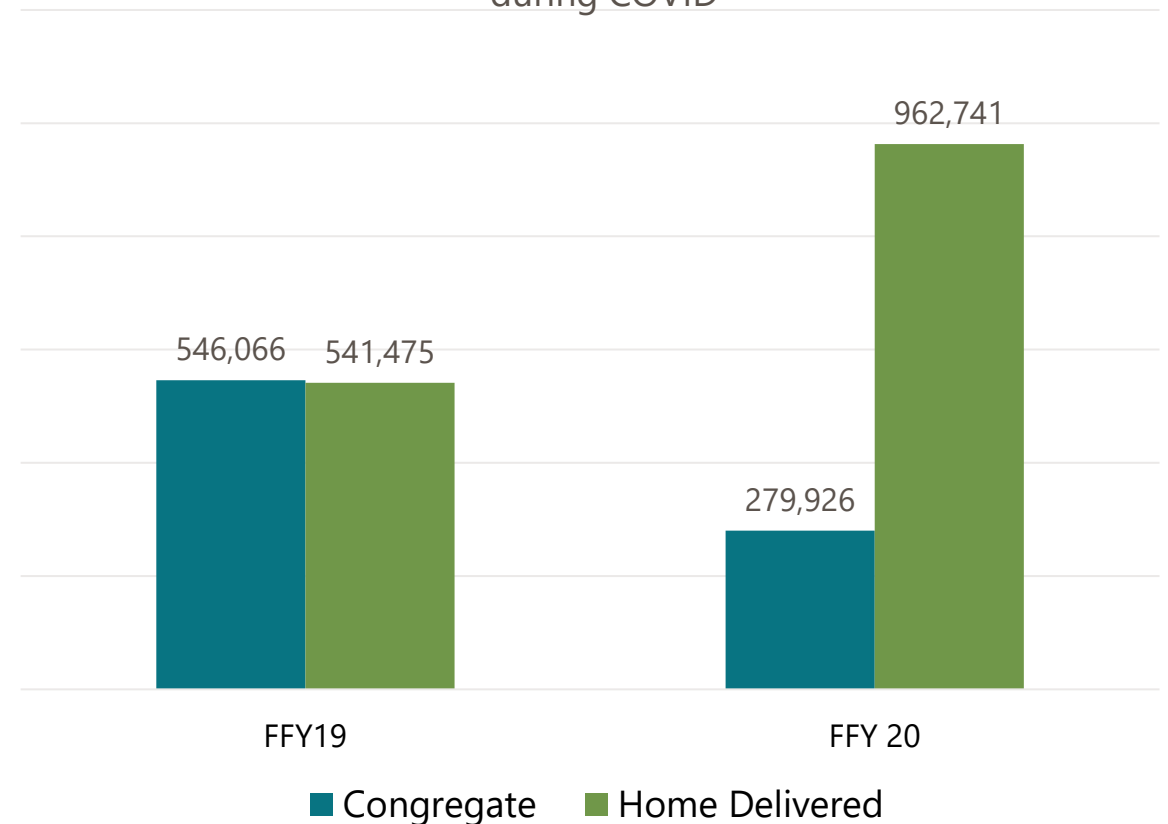
**1,242,667**

Meals served FFY2020 increased by 14% over FFY2019

**9,362**

Consumers served

Nutrition services shifted toward home-delivered meals during COVID



# AGING & ADULT SERVICES

## Key Changes due to COVID: Nutrition Services

### Home-Delivered Meals

Increased per meal rate from \$4.60 to \$7.00 to account for increased administrative costs

### Funding

FFCRA	\$1.2 M
CARES	\$2.4 M
ND CARES	\$1.1 M



# NORTH DAKOTA OLDER AMERICANS ACT NUTRITION SITES

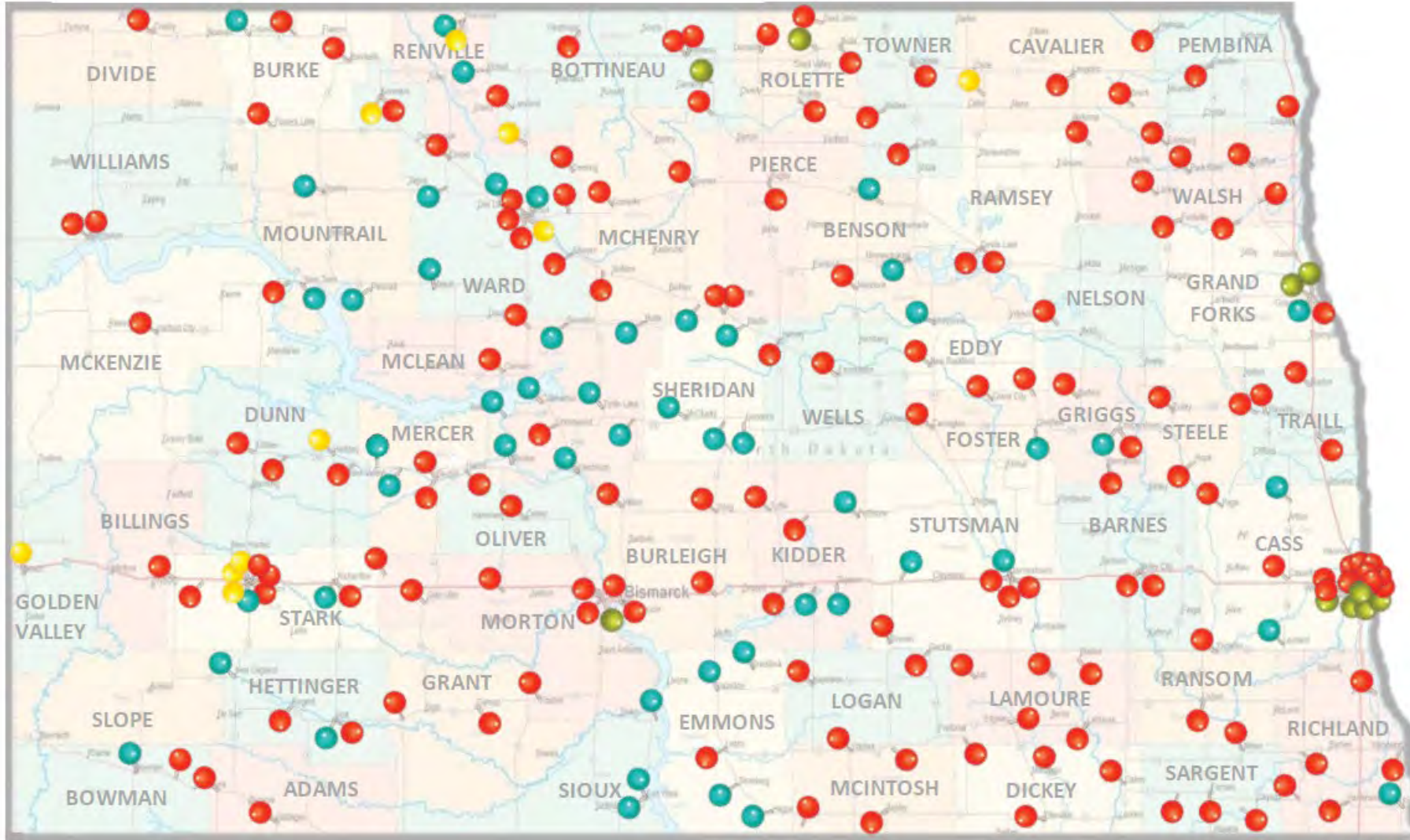
## MAP LEGEND:

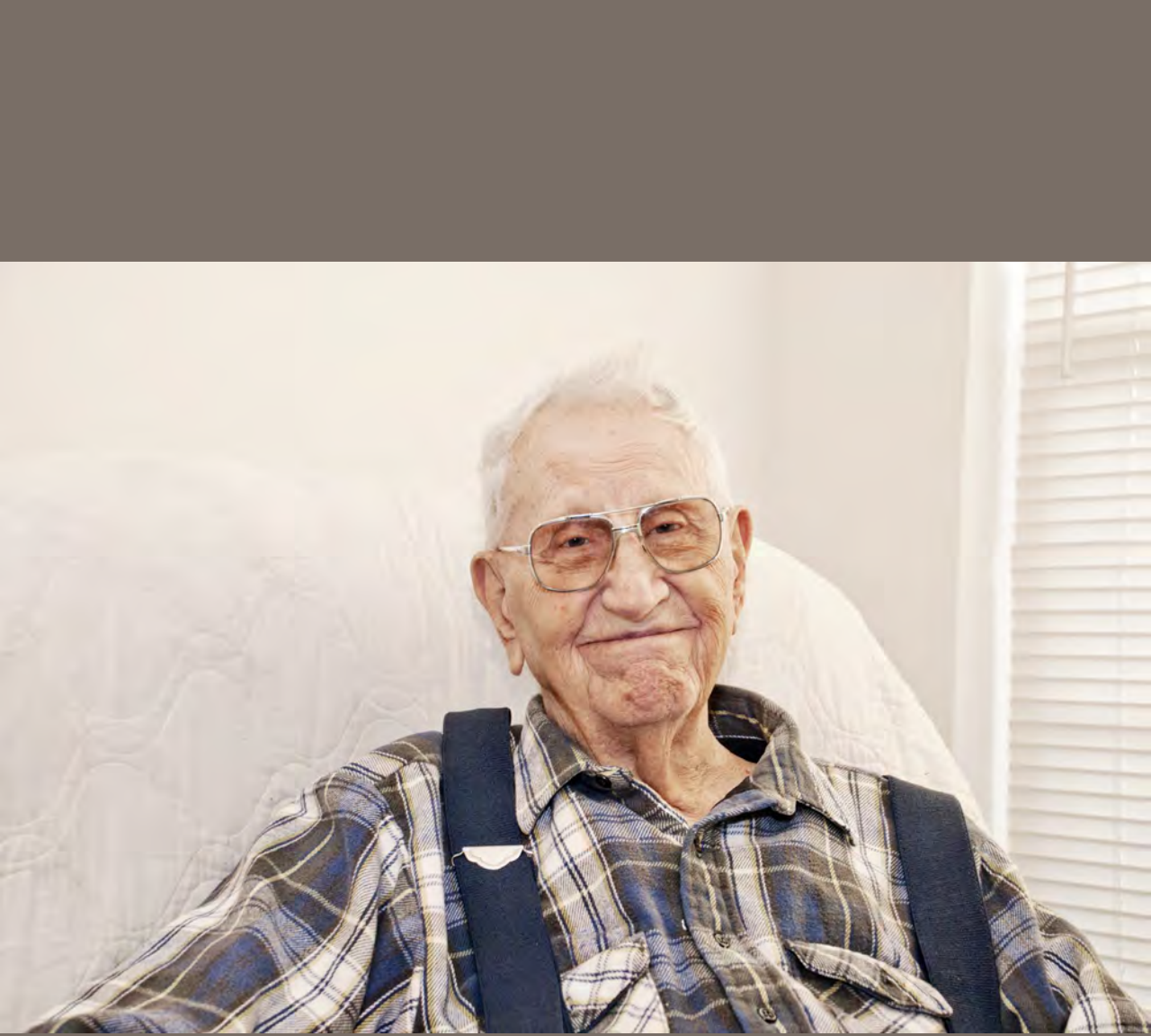
- Congregate Nutrition Sites Only
- Home Delivered Meals (HDM) Only
- Both Congregate and HDM Options
- Café 60 Nutrition Sites

## STATE TOTAL:

219

- 09 Congregate Nutrition Sites Only
- 51 Home Delivered Meals (HDM) Only
- 149 Both Congregate and HDM Options
- 10 Café 60 Nutrition Sites



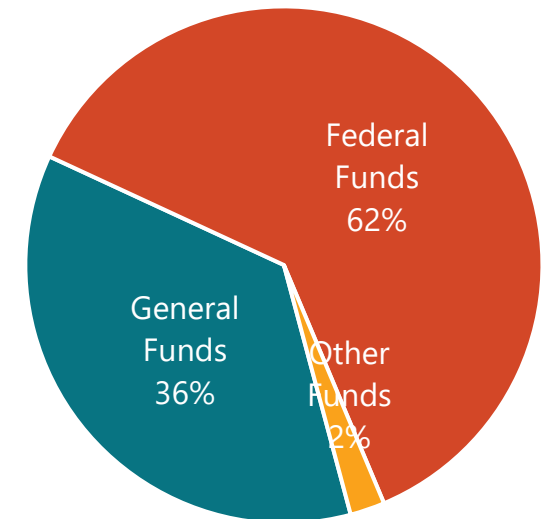


# Aging & Adult Services Budget Summary

<b>19-21 Budget</b>	<b>\$31,214,295</b>	<b>44.0 FTE</b>
<b>21-23 Budget (exec)</b>	<b>\$34,452,766</b>	<b>44.0 FTE</b>
<b>21-23 Budget (House)</b>	<b>\$35,738,774</b>	<b>45.0 FTE</b>

+1 FTE for DOJ data/reporting support plus funds for DOJ-related rental assistance and senior employment innovation grant

- Implementation of in-reach and out-reach and centralized intake for home and community-based services
- Continuation of Money Follows the Person
- Various programmatic and operating efficiencies



# ND STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

## Purpose / Mission

The Council advocates for policy changes that promote choice, independence, productivity and inclusion for all North Dakotans with developmental disabilities. The Council provides funding for and supports projects and activities that maximize opportunities in these areas for consumers and families.

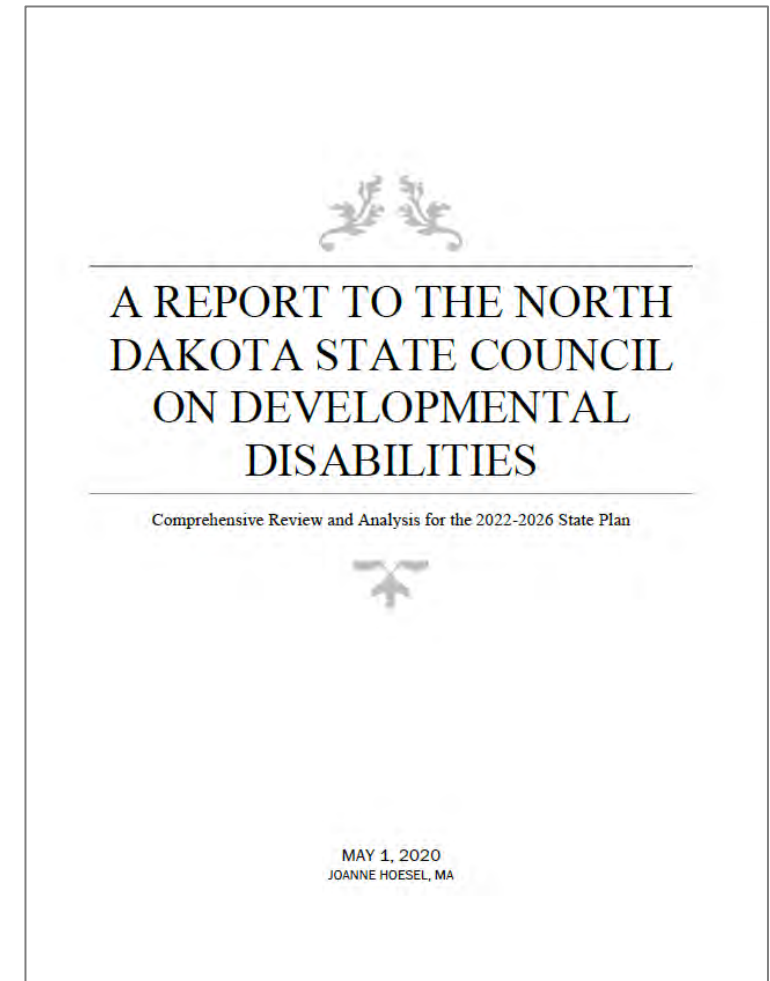


# ND STATE COUNCIL ON DEVELOPMENTAL DISABILITIES

## Key Findings: 2022-26 State Plan Comprehensive Review and Analysis

The following recommendations are offered as a roadmap for system improvement and present a range of possible options for consideration.

1. Fetal Alcohol Syndrome
2. Immunizations
3. Telehealth for IDD
4. Money Follows the Person
5. Culturally appropriate services
6. Infant Development services
7. Rental Assistance
8. Supported Decision-Making
9. Special Needs child care

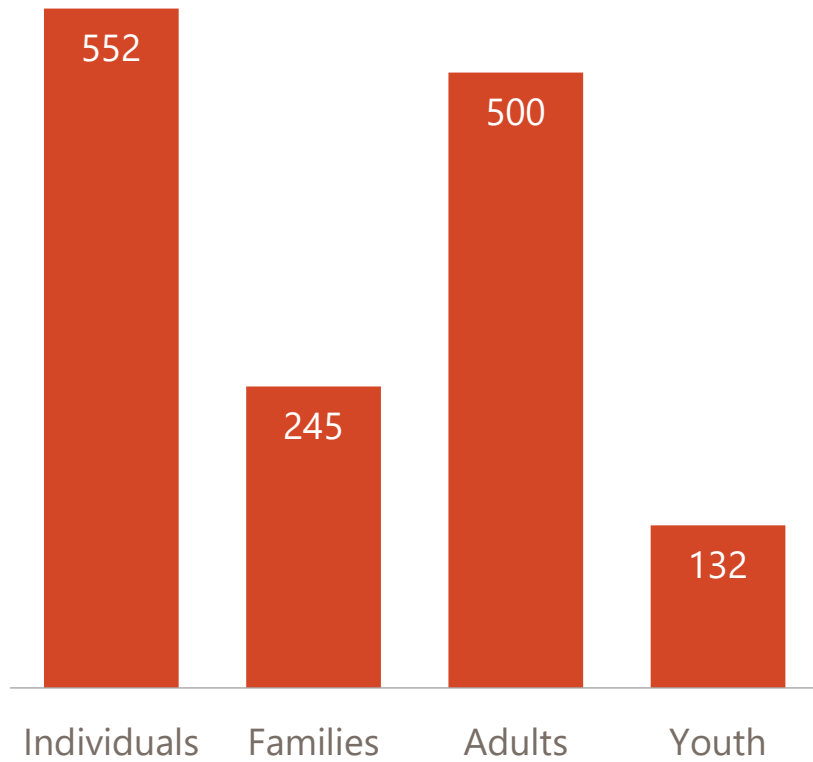




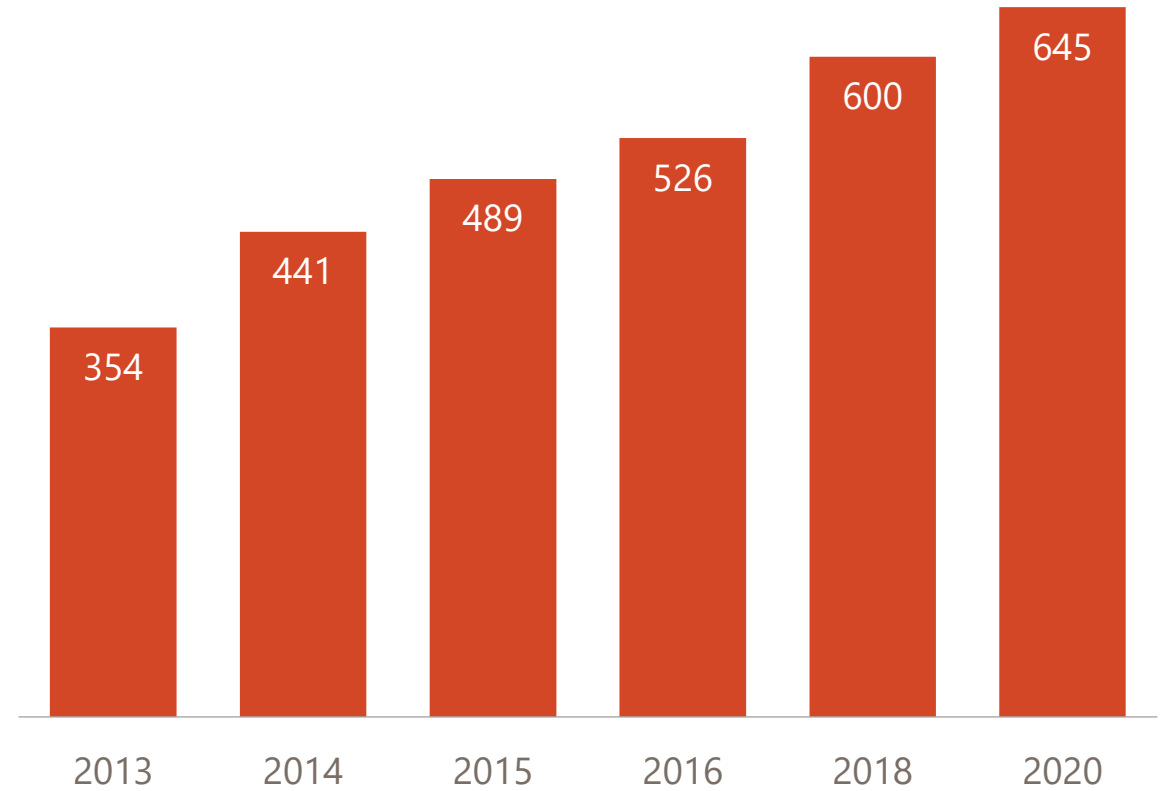
# DEVELOPMENTAL DISABILITIES COUNCIL

## Individuals Engaged in Training and Advocacy

People Trained Through 5-Year Plan Goals



People Active in System Advocacy



# DISABILITY DETERMINATION SERVICES

## Purpose / Mission

The Council advocates for policy changes that promote choice, independence, productivity and inclusion for all North Dakotans with developmental disabilities. The Council provides funding for and supports projects and activities that maximize opportunities in these areas for consumers and families.



# SSDI DETERMINATIONS AND PAYMENTS

## Disability Determination Services

**\$17.5 million**

monthly SSDI payments  
(Sept 2020)

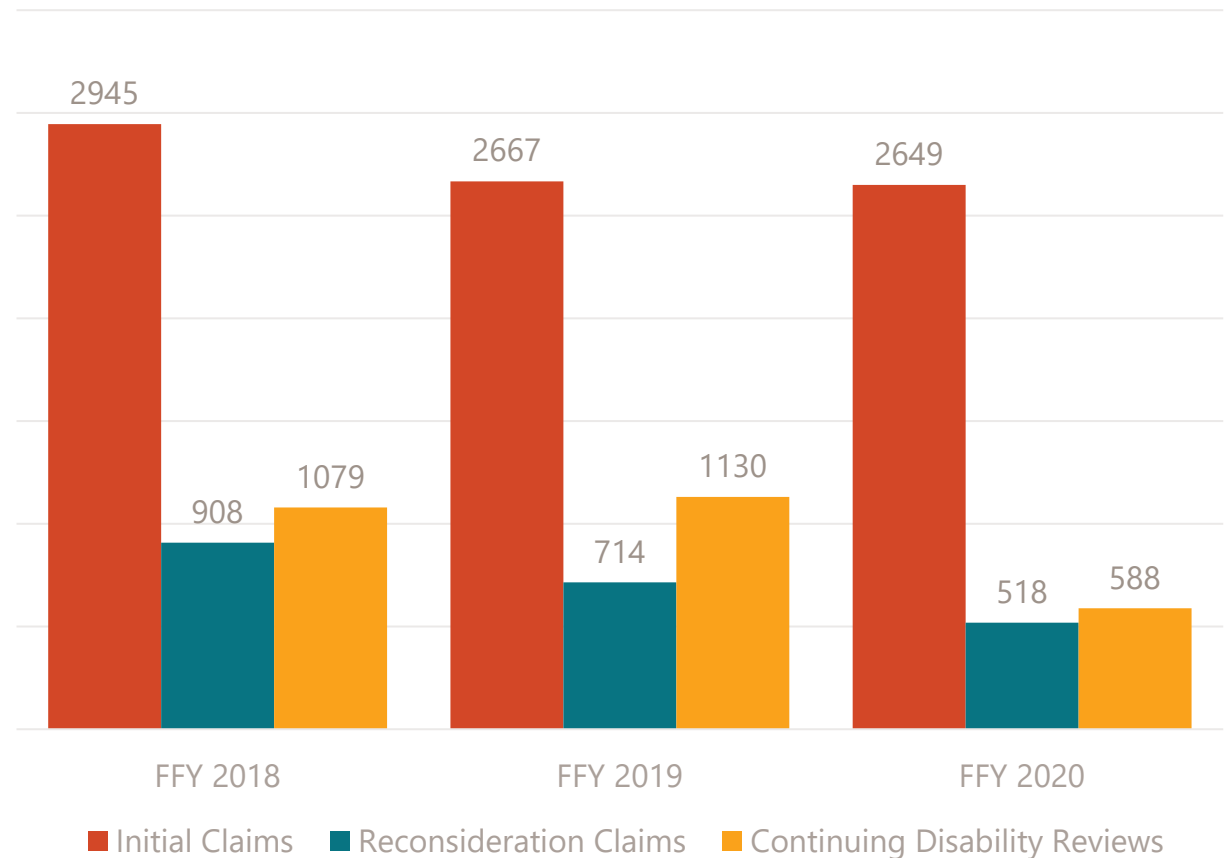
*Social Security Disability Payments*

**\$4.1 million**

Monthly SSI payments to  
blind/disabled residents  
(Sept 2020)

*Supplemental Security Income*

Decisions completed



# VOCATIONAL REHABILITATION DIVISION

## Program Purpose

Assists North Dakotans with disabilities to enter or re-enter the workforce through individualized services

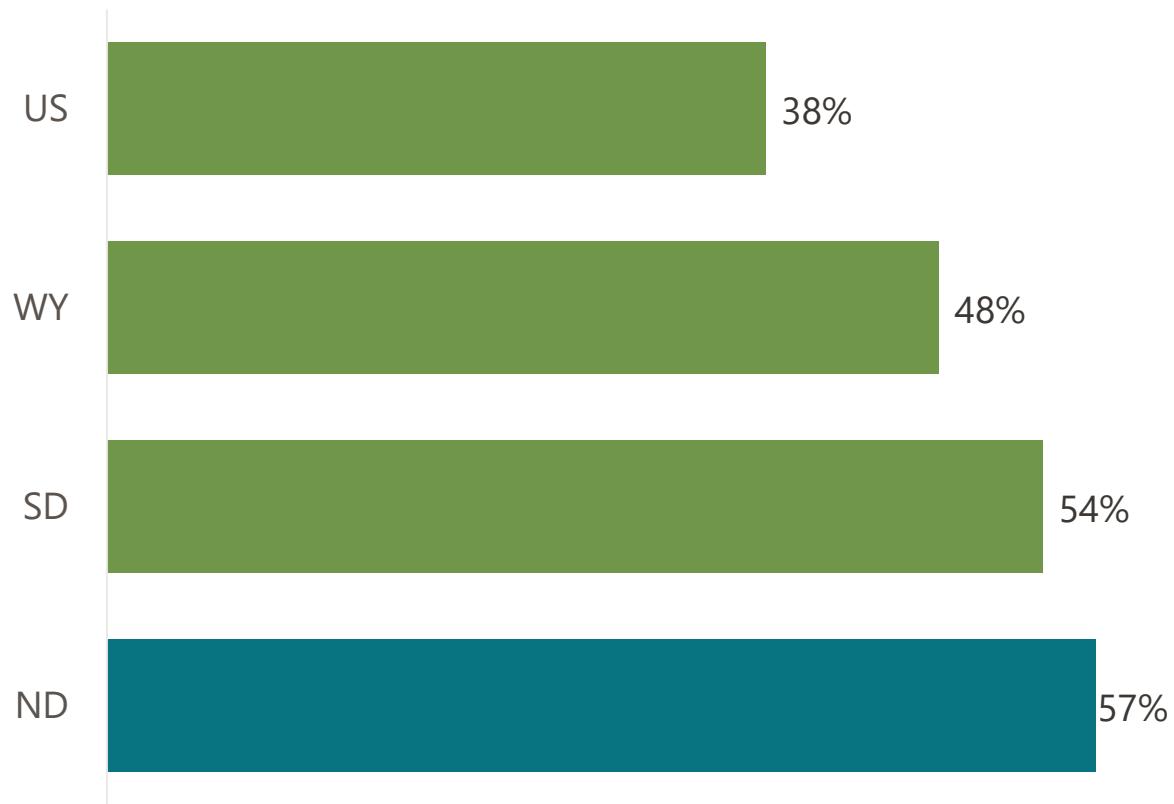
- Assess skills and abilities
- Identify a vocational goal
- Develop an individualized plan to achieve employment
- Provide services that result in competitive integrated employment



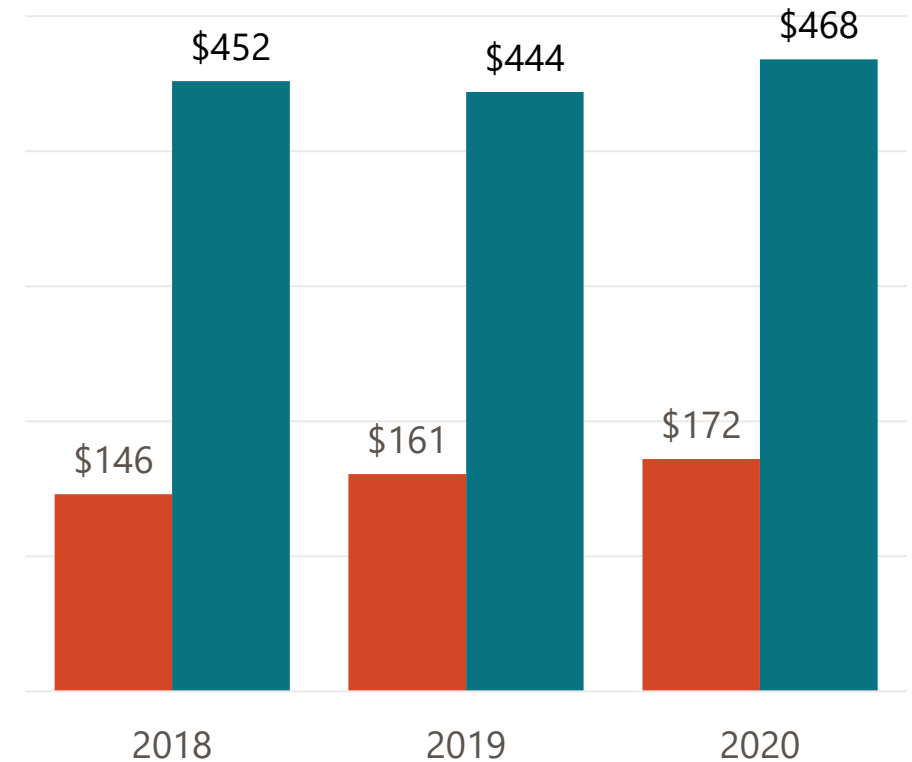
# VOCATIONAL REHABILITATION DIVISION

## What's driving us

ND is 1<sup>st</sup> in the US in terms of % of people with disabilities who are employed



Average Weekly Wage of VR Clients at Application vs. Placement

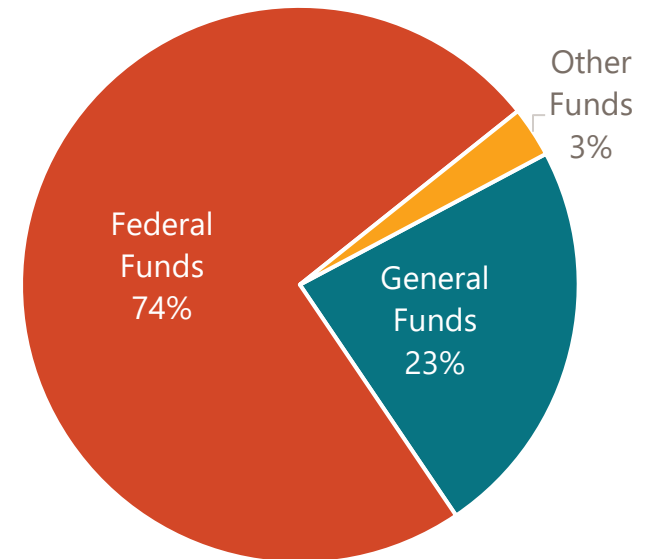




# Vocational Rehab Budget Summary

19-21 Budget	\$31,853,039	85.0 FTE
21-23 Budget (exec)	\$30,528,323	85.0 FTE
21-23 Budget (House)	\$32,420,755	85.0 FTE

- Restoration of grant to recreational facility and to Centers for Independent Living
- Operating efficiencies related to travel and occupancy



# CHILD SUPPORT Program Purpose

The purpose of the Child Support program is to help parents meet the needs of their children by securing appropriate and sustainable child support.



# CHILD SUPPORT

## Return on Investment

Every **\$1.00 spent** on Child Support generated **\$6.58 for family recipients**

Every **\$1.00 in state General Funds spent** on Child Support generates **\$20.00 in support for family recipients**

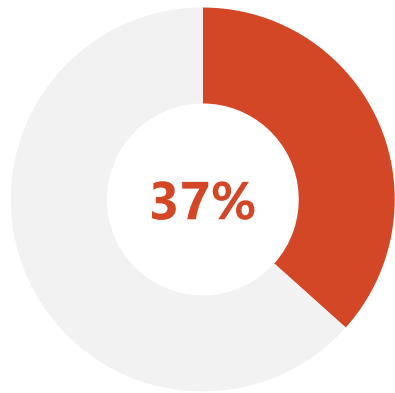




# CHILD SUPPORT

## Who we serve

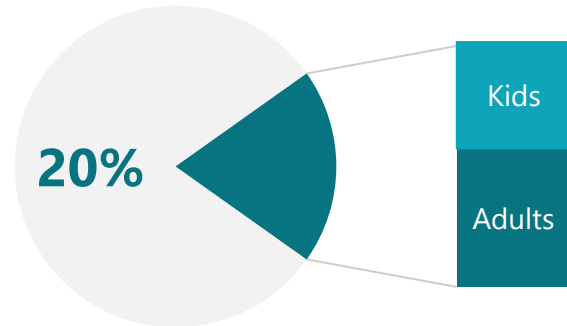
65,999



### 1 in 3 ND kids

In 2020, 65,999 children received child support services. That is more than 1 of every 3 children under age 18 in the state.

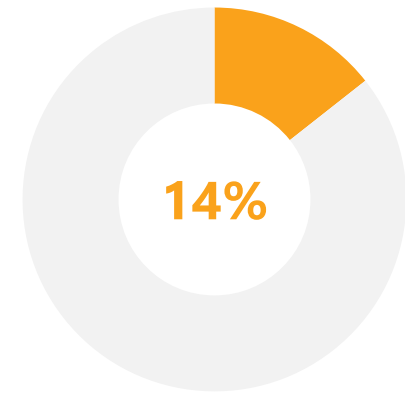
149,720



### 1 in 5 North Dakotans

149,720 people received child support services in North Dakota in 2020.

83,721



### 1 in 7 ND adults

In 2020, 83,721 parents received child support services. That means 1 of every 7 adults (age 18+) in the state has a connection to the child support division.

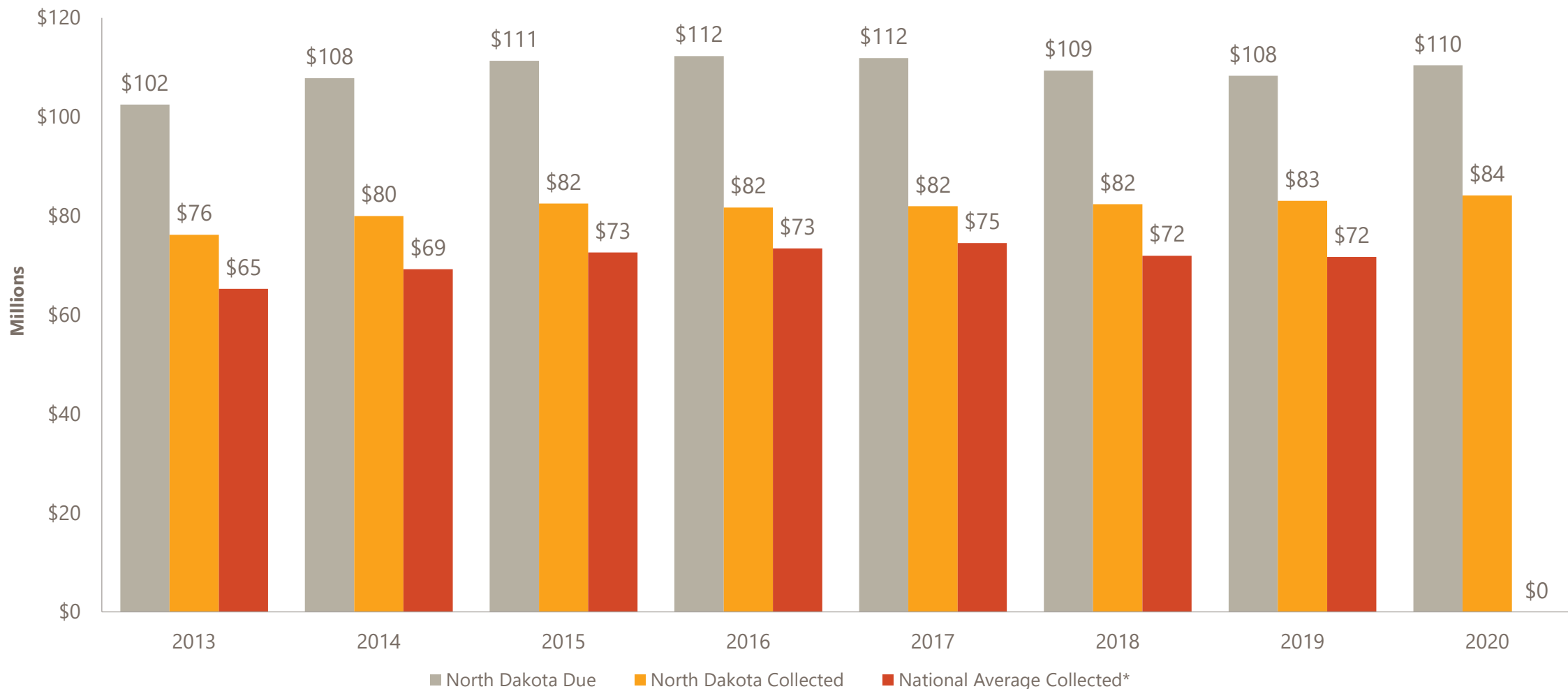
# CHILD SUPPORT DIVISION

## Supporting Family Stability & Economic Health

When child support is received, a child is able to grow up in a more secure and stable environment.



# ND CHILD SUPPORT COLLECTIONS TYPICALLY EXCEED NATIONAL AVERAGES BY ABOUT 10%



	2013	2014	2015	2016	2017	2018	2019	2020
<b>North Dakota</b>	74.3%	74.2%	74.1%	72.8%	73.2%	75.3%	76.7%	76.2%
<b>National Average</b>	63.7%	64.2%	65.2%	65.4%	66.6%	65.8%	66.2%	N/A

\*National average performance applied to North Dakota's current support due.

# CHILD SUPPORT

## Supporting Family Stability & Economic Health

**18,000**

More than 18,000 families who are owed child support are not receiving the program's services

**\$25 million**

More than \$25 million in child support per year is not received in the month when it is due

**\$250 million**

More than \$250 million is owed in past-due support in full-service cases and nearly \$400 million total in all cases



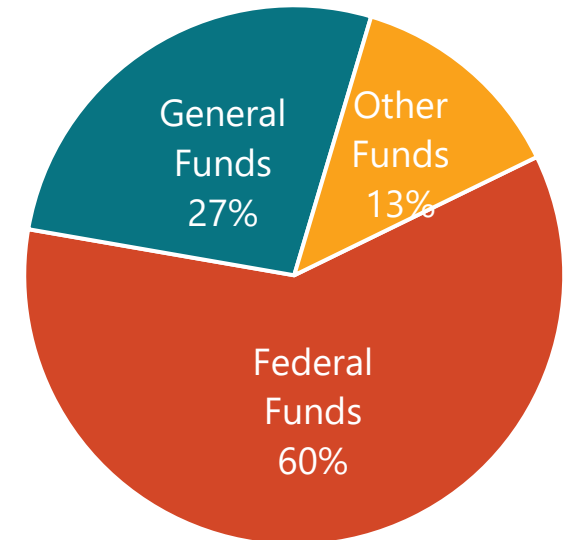
# Child Support Budget Summary

19-21 Budget	\$29,805,507	157.7 FTE
21-23 Budget (exec)	\$30,539,102	157.7 FTE
21-23 Budget (House)	\$30,477,361	157.7 FTE

- Operating efficiencies related to travel and occupancy

## NOTE:

SB2002 includes shift in responsibility for entry of various child support information into the shared computer system from Clerks of Court to Child Support. Requesting consideration of DHS need for resources to accept responsibility for the work.



# ECONOMIC ASSISTANCE

## Program Purpose

The Economic Assistance team **helps** lower income **North Dakotans** when they **are struggling to make ends meet** by **connecting** them to **resources** that can **help meet** their **basic needs, preventing** greater and more damaging **crises**.



# ECONOMIC ASSISTANCE

## Federal Programs



Child Care Assistance  
Program (CCAP)



Low-Income Home  
Energy Assistance  
Program (LIHEAP)



Supplemental Nutrition  
Assistance Program  
(SNAP)



Temporary Assistance  
for Needy Families  
(TANF) Program

# ECONOMIC ASSISTANCE

## What We Do

### Program Administration

- Federal Compliance
- State Plan
- State Law & Administrative Rules
- Federal Reporting
- Federal & State Agreements

### Eligibility System Support

- Program and Policy Support
- Training
- Benefit Issuance
- Integrated Eligibility System Development and Maintenance

### Program Integrity and Performance

- Program Monitoring
- Federal and State Quality Reviews
- Federal and State Audits
- Performance Improvement



# Connecting North Dakotans to economic assistance is a partnership

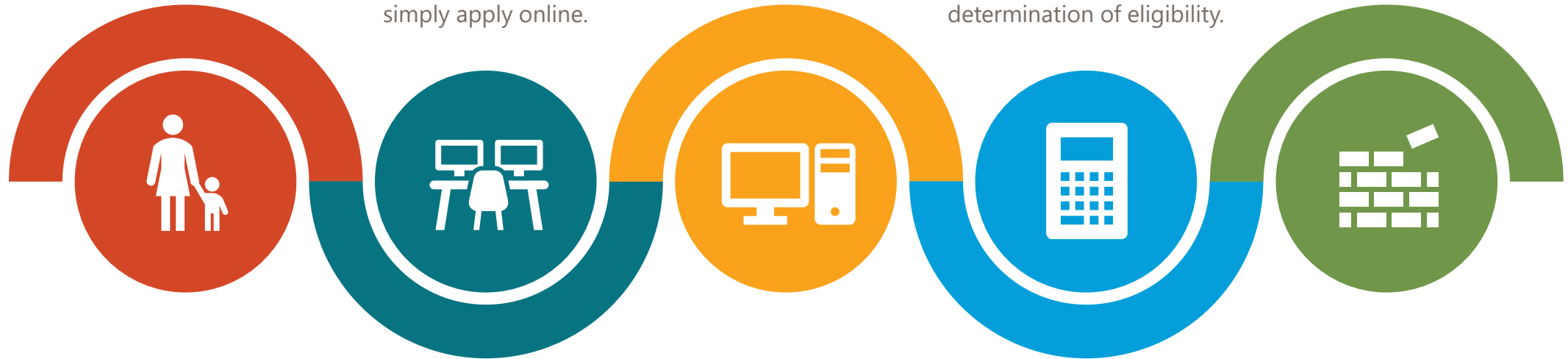
The state and Human Service Zones work together to deliver help to low and moderate-income families

## Contact Human Service Zone

The local applicant can contact their human service zone directly or they can simply apply online.

## Determine eligibility

An eligibility worker will review the information, reach out if needed, and make a determination of eligibility.



## Person decides to apply

Making ends meet is getting more difficult every month so the applicant makes the decision to reach out for help.

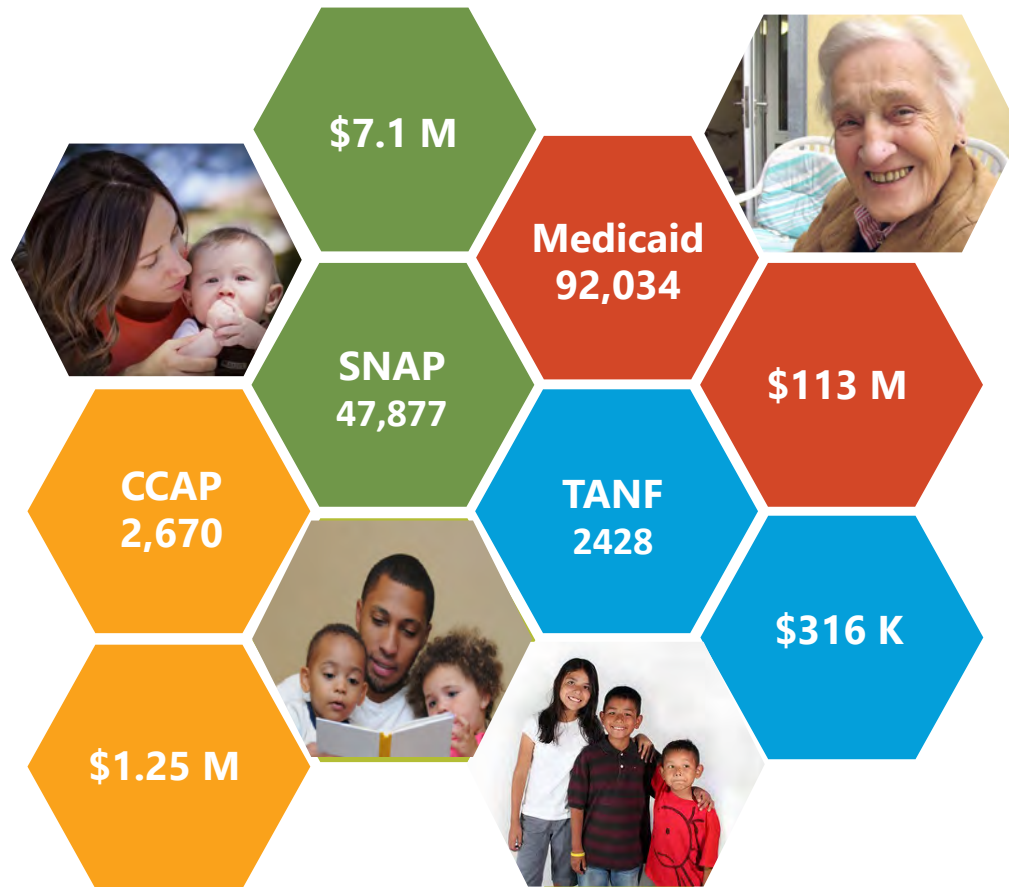
## Gather information

The applicant can enter as much info as they can in the SPACES self-service portal.

## Issue benefits

If the applicant is eligible to receive assistance, the state will issue the benefit in the appropriate manner.

# 140,000 - 150,000 North Dakotans utilize SPACES to access economic assistance in North Dakota each year



119,763 people in 68,287 households have a Medicaid record in SPACES



73,262 people in 34,795 households have a SNAP record in SPACES



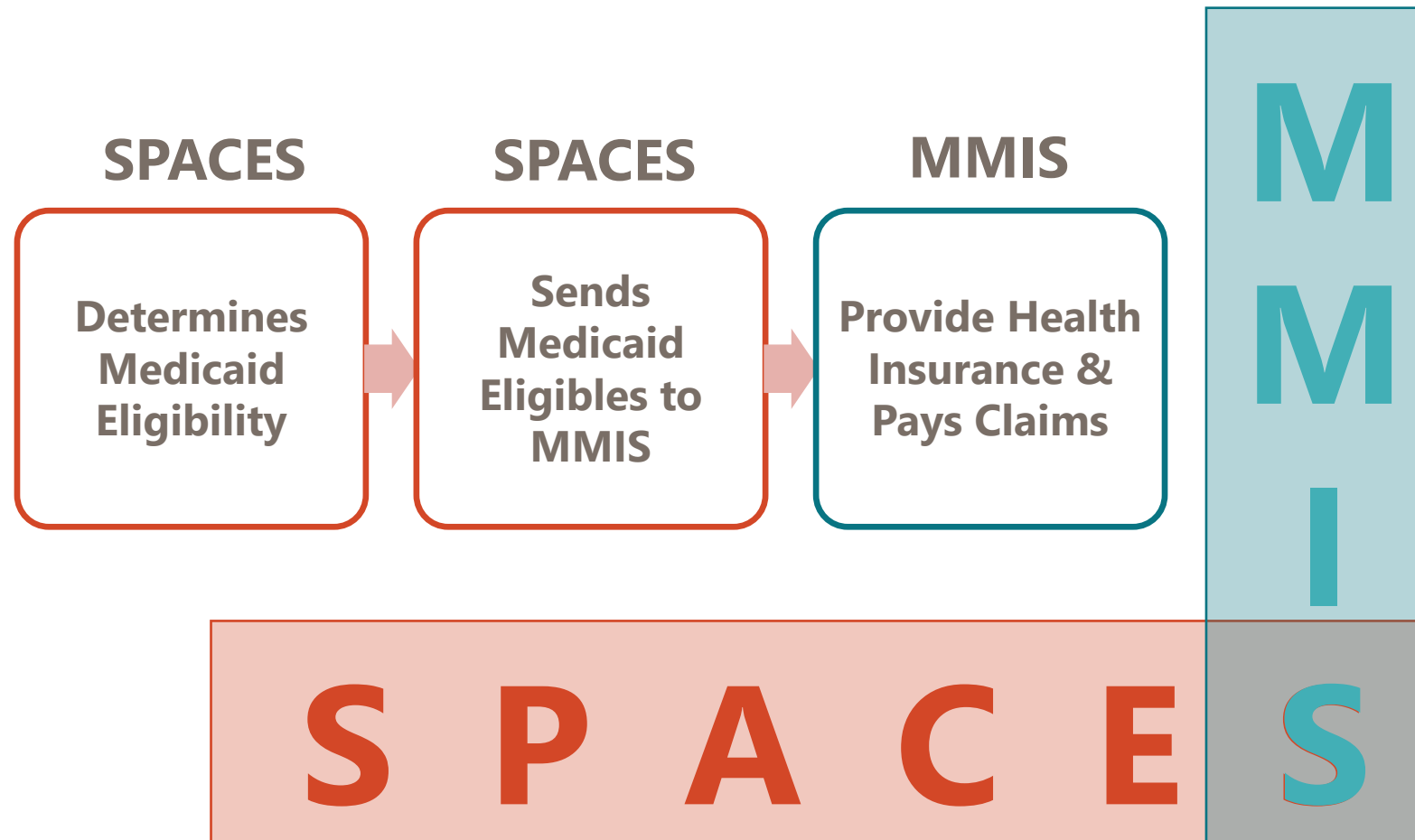
5,124 people in 1,981 households have a TANF record in SPACES



4,946 people in 2,960 households have a CCAP record in SPACES

Average Monthly Individuals/Benefits (FY20)

# Two major technology platforms work together to connect low-income North Dakotans to resources



SPACES interfaces with more than 50 systems, including:

- Child Support
- Social Security
- Vital Records
- IRS
- EBT & EPC Systems
- ND PeopleSoft

**145,000**

**North Dakotans**

**\$1,472,000,000**

**Economic Assistance**

# ECONOMIC ASSISTANCE

## State Median Income for ND households 2020

Many federal assistance programs are designed to help individuals and families who earn less than 60% of State median income (SMI).

60% SMI is roughly equivalent to 200% of the federal poverty level.

Household Size	30% SMI		60% SMI		100% SMI	
	Annual Income	Hourly Wage	Annual Income	Hourly Wage	Annual Income	Hourly Wage
1	\$ 15,720	\$ 7.56	\$ 31,440	\$ 15.12	\$ 52,400	\$ 25.19
2	\$ 20,562	\$ 9.89	\$ 41,124	\$ 19.77	\$ 68,540	\$ 32.95
3	\$ 25,398	\$ 12.21	\$ 50,796	\$ 24.42	\$ 84,660	\$ 40.70
4	\$ 30,234	\$ 14.54	\$ 60,468	\$ 29.07	\$ 100,780	\$ 48.45
5	\$ 35,070	\$ 16.86	\$ 70,140	\$ 33.72	\$ 116,900	\$ 56.20
6	\$ 39,912	\$ 19.19	\$ 79,824	\$ 38.38	\$ 133,040	\$ 63.96
7	\$ 40,818	\$ 19.62	\$ 81,636	\$ 39.25	\$ 136,060	\$ 65.41
8	\$ 41,724	\$ 20.06	\$ 83,448	\$ 40.12	\$ 139,080	\$ 66.87

*Hourly wage based on assumption of 2,080 hours of work / year (full time equivalent)*

# EVERY OCCUPATION HAS A DIFFERENT EARNING PROFILE, WHICH HELPS US UNDERSTAND WHO MAY BE ELIGIBLE FOR ASSISTANCE

Sampling of occupations by average wage (2019)



Less than \$12 / hr	\$12 - \$20 / hour	\$20 - \$28 / hour	\$28 - \$35 / hour
Waiter/Waitress	Pharmacy tech	Carpenter	School counselor
Child care worker	Home health	Loan processor	Rotary drill oper
Dishwasher	PT assistant	Legal secretary	HR specialist
Bartender	Hair stylist	Correctional officers	Accountant
Cafeteria worker	Retail	Auto service tech	Real Estate Sales
Short order cook	Farmworker	Surgical tech	PR specialist
Cashiers	Restaurant cook	Roofer	Counselor
Clerical assistant	Data entry	Lic Practical Nurse	Registered Nurse
Personal care aide	EMTs & paramedics	Dental assistant	Computer network specialist
	Carpet installers	Firefighter	Construction supervisor
	Maintenance workers	Surgical assistant	Dental hygienist
	Nursing assistant	Clergy	Architecture occ
	Laborer	Social worker	Speech pathologist
	Substitute teacher	Police	
	Office/accounting clerk	Hotel manager	
	Light truck driver	Roustabout	
	Extraction helper	Heavy truck driver	

# ECONOMIC ASSISTANCE

## Child Care Assistance Program (CCAP)

CCAP helps pay a portion of the **cost of childcare** for working families or families in training or education programs.

Families can earn up to **60% of state median income** and be eligible for assistance.



# ECONOMIC ASSISTANCE

## Child Care Assistance Program (CCAP)

**2,780**

Average number of children served per month

**\$1.3 million**

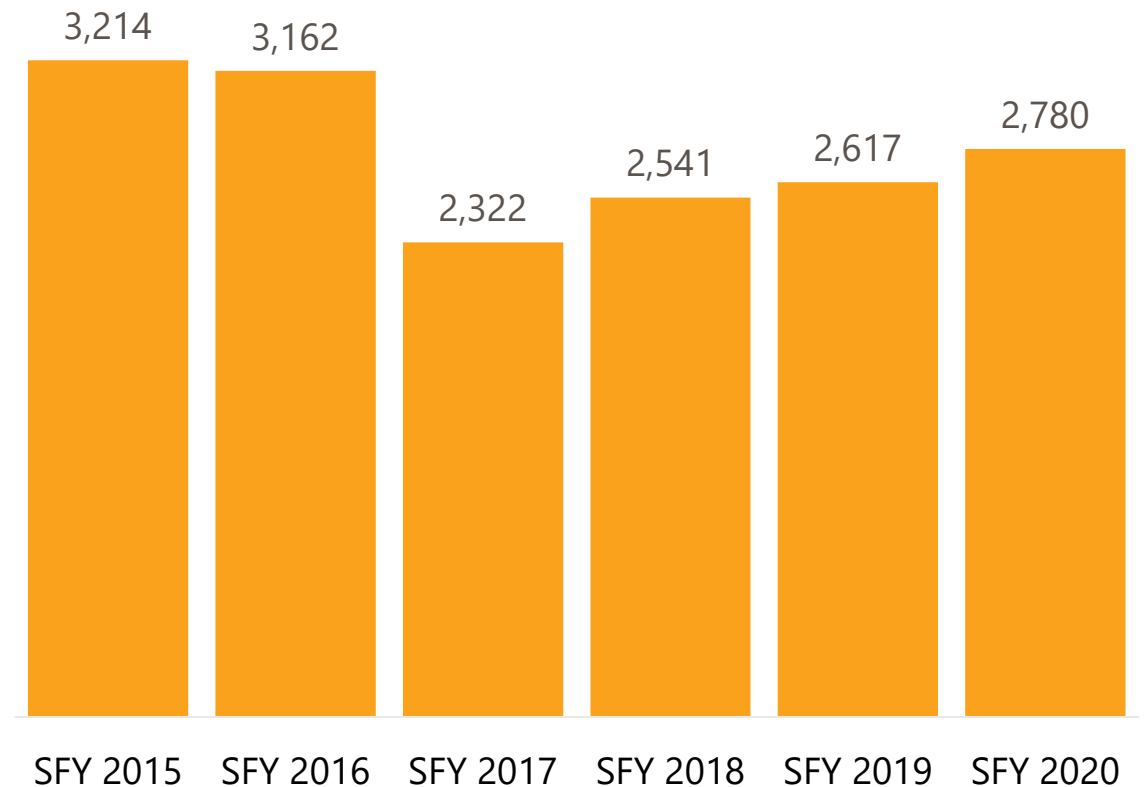
Support to families

**\$466**

Average payment per child per month

SFY2020

Average number of children served per month





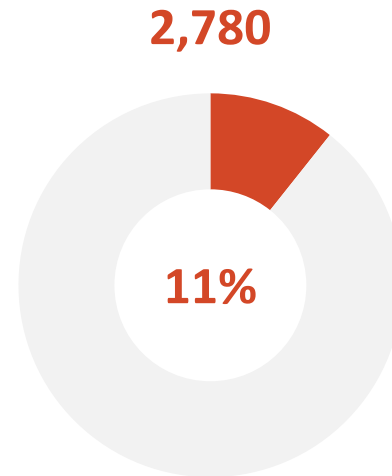
# ECONOMIC ASSISTANCE

## Child Care Assistance

73%

### Parents in workforce

73% of the 44,237 North Dakota households who have children younger than age 5 likely have at least some need for child care as all available parents are in the workforce



### 1 in 10 eligible children

26,000 ND children age 13 or younger live in households where parent earnings are less than 200% of the federal poverty level. 2,780 children (**11% of potentially eligible**) are **currently served** by CCAP in our state.

40,769

### 7% receive CCAP

1,500+ approved child care providers are licensed to serve 40,769 children each year. In 2020, an average of 2,780 of those licensed slots served children who received assistance

# ECONOMIC ASSISTANCE

## Low Income Home Energy Assistance Program (LIHEAP)

**LIHEAP** helps households with **home heating costs** by paying a portion of their heating bills, **and** with **improving** their home's overall **energy efficiency**.

Families can earn up to **60% of state median income** and be eligible for assistance.



# ECONOMIC ASSISTANCE

## Low Income Home Energy Assistance Program (LIHEAP)

**12,785**

Households served last heating season

**\$12 million**

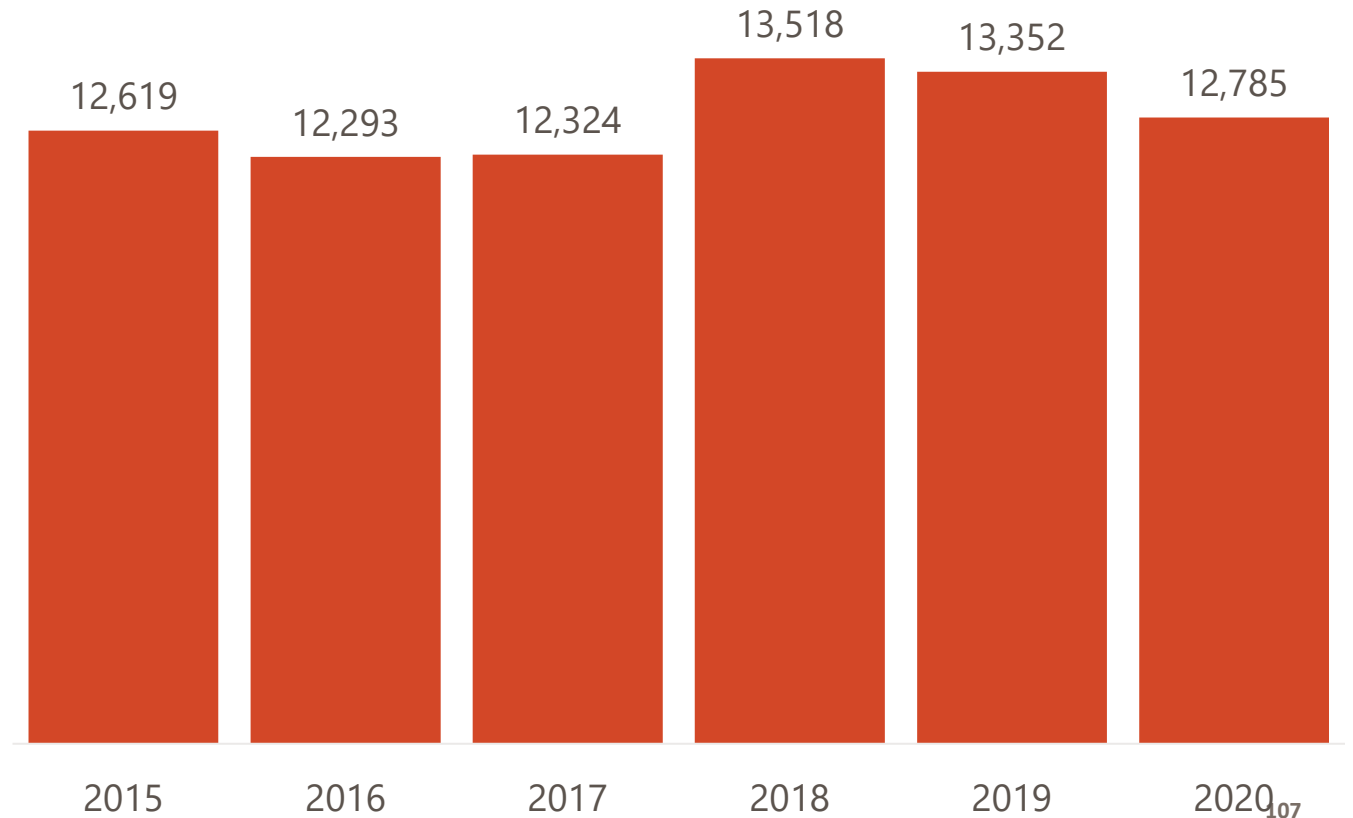
Support to households

**\$930**

Average payment per household per heating season

SFY2020

Average Households served per Heating Season (Oct-May)



# ECONOMIC ASSISTANCE

## Supplemental Nutrition Assistance Program (SNAP)

Provides nutrition benefits to supplement the food budget of lower income families so they can purchase healthy food and move towards self-sufficiency

Families can earn up to **60% of state median income** and be eligible for assistance.



# ECONOMIC ASSISTANCE

## Supplemental Nutrition Assistance Program (SNAP)

**520**

### **SNAP is a partnership**

520 retailers in North Dakota are authorized to accept SNAP payments from eligible households

**\$1.00 → \$1.54**

### **Local economies benefit**

Beyond helping families gain access to nutritious food, SNAP offers local economic benefits as well. Each \$1.00 in SNAP generates \$1.54 in local economic activity.

**1/3**

### **Boosting family food budgets**

SNAP provides nutrition assistance to people of all ages and circumstances.

36% - children under 18

35% - aged or disabled

35% - have earned income

# ECONOMIC ASSISTANCE

## Supplemental Nutrition Assistance Program (SNAP)

**48,323**

Average number of individuals in served in 23,178 households

**\$6.5 million**

Support to households

**\$280**

Average payment per household per month

SFY2020

**Average households served per month**



# ECONOMIC ASSISTANCE

## Temporary Assistance to Needy Families (TANF)

TANF provides assistance to needy families with children who are deprived of parental support or care.

Which means that a parent is absent due to divorce, separation, death or one or both parents are aged or disabled.



# ECONOMIC ASSISTANCE

## Temporary Assistance to Needy Families (TANF)

**945**

Average number of families served per month

**81%**

Of beneficiaries are children

**52%**

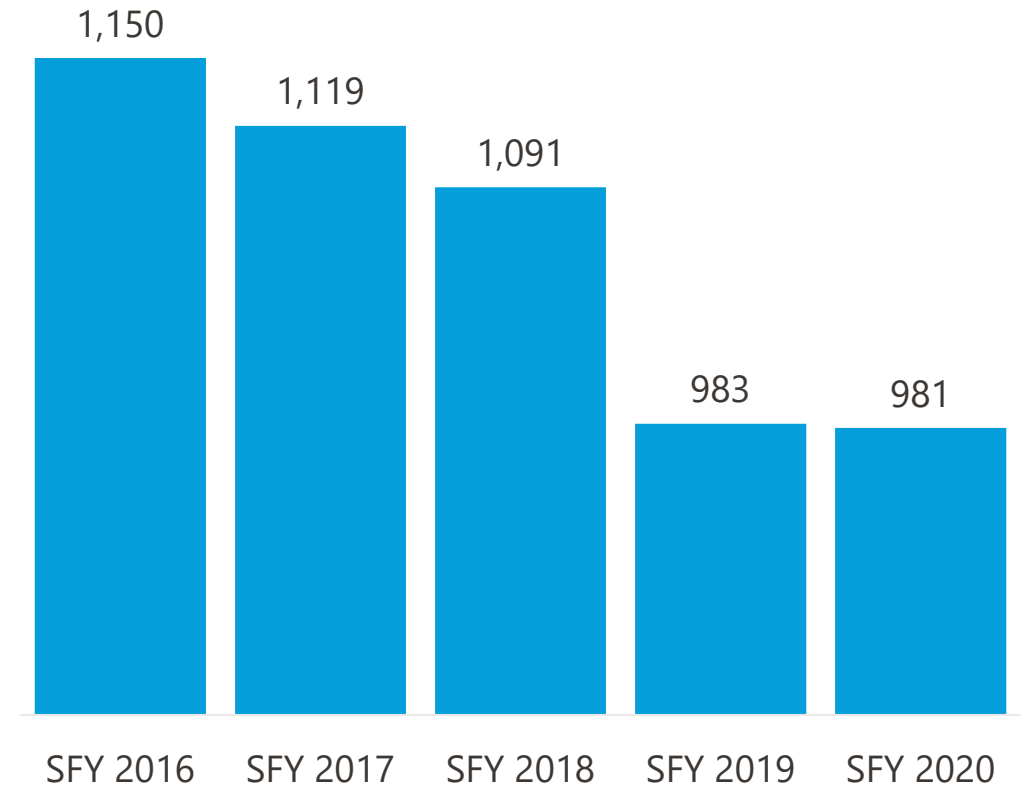
Of ND TANF cases are child only cases (children in the care of a non legally responsible caretaker)

**\$297**

Average benefit per family per month

SFY2020

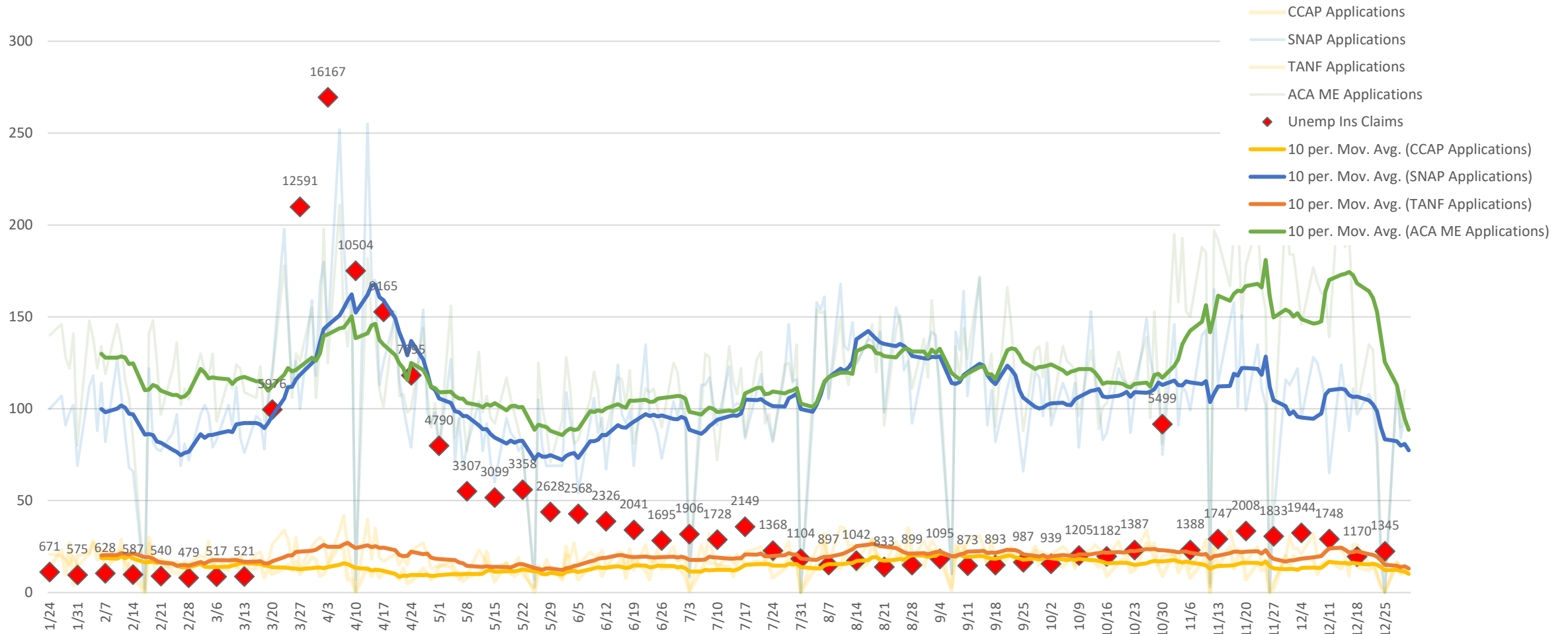
**Average households served per month**





# ECONOMIC ASSISTANCE APPLICATIONS DURING 2020

Daily applications remained above pre-COVID levels throughout 2020 with peaks in April, August and November/December



# ECONOMIC ASSISTANCE

## COVID 19 - Emergency Food and Energy Assistance

### Pandemic EBT (P-EBT)

- Issued SNAP benefits to children eligible for free or reduced-price school meals who did not receive those meals due to school closure.
- Delivered info to families in partnership with DPI.
- Approximately 36,750 children received \$9.5 million in SNAP benefits due to COVID school closure March-May 2020.

**\$9.5 million**

### SNAP Emergency Assistance

- Provides the maximum SNAP benefit to all SNAP eligible household starting in March 2020.
- An average of 15,000 households receive \$2.6 million in additional benefits per month.
- Optional program benefit is authorized each month by USDA FNS.

**\$26 million**

### Pandemic LIHEAP (P-LIHEAP)

- Provided one-time help with the cost of electric utility bills for qualifying households.
- Payments were issued directly to participants' electric utility providers.
- Assistance available to households eligible in 2019-20 heating season
- Assisted 6,500 households as of 12-31-20

**\$3 million**

# ECONOMIC ASSISTANCE

## COVID 19 - Child Care Assistance Program (CCAP)

- Allowed for more than 40 absence hours per month due to illness, quarantine and provider closures
- Allowed families to maintain eligibility as they were seeking employment (both at application and re-review)
- Extended payment request deadlines and aligned with Child Care Emergency Operating Grant (CEOG)



# ECONOMIC ASSISTANCE

## COVID 19 - SNAP Enhancement Grants

Grant program to help ND grocers update their point-of-sale systems and websites to enable online and by-phone ordering and delivery, improving access to food for both SNAP beneficiaries and community residents

Through Dec 2020 assisted grocery stores with system upgrades in:

- Minot
- Ruthville
- Mohall
- Newtown
- Michigan
- Scranton



# ECONOMIC ASSISTANCE

## COVID 19 - Emergency Rent Bridge (ERB)

**1,410**

Rental assistance to 1,500 households in 33 counties

**\$520**

Average amount of rental assistance per household per month

**\$2.9 million**

Total CRF funds distributed through 12-31 for ERB, paid to 486 housing providers



# FEDERAL CARES ACT FUNDS AVAILABLE THROUGH DHS FOR COVID RESPONSE

Topical summary of emergency assistance to support basic needs (thru 12/21/20)

## Child Care

Child Care Em Op Grnt \$48.9 MM (CRF)  
Child Care Assistance \$6 MM (CCDBG-CV)

## Behavioral Health

Mental Health Grant \$2 MM (SAMHSA)  
Crisis Counseling \$1.1MM (SAMHSA)  
Community BH \$1.7 MM (CRF)  
HSC/Rural \$3.5 MM

## Food Assistance

P-EBT \$10 MM (USDA-CV)  
P-SNAP \$25.7 MM (USDA FNS)  
Sr Meals \$3.6 MM (OAA-CV)  
Sr Meals \$1.1 MM (CRF)  
Food Bank \$430k (FEMA)

## Housing

ERB \$2.9 MM (CRF)  
Homeless Coord \$  
Rent Assistance \$6.5 MM (CDBG-CV)

## Energy Assistance

P-LIHEAP \$5.2 MM (ACF)

## Child Welfare

IV-E FMAP \$2.5 MM (ACF)  
Violence Prev \$80k  
CW Svcs \$76k

## Medical Services

FMAP \$85 MM (CMS)  
Family caregiver \$500k

## Aging Services

Fam Caregiver \$500k  
ADRL ACL \$305k  
Supportive svc \$1 MM  
Ombudsman \$100k  
Sr Employ \$889k (SECEP)  
SNF Air Pur \$2.6 MM (CRF)

## Ops & PPE

Connect Karts \$100k (CRF)  
QSP PPE \$50k (CRF)  
SNAP Access \$250k (CRF)  
Data tools/Ops \$3.5 MM (CRF)

<b>Total Available</b>	<b>\$215,678,868</b>
<b>Total Spent</b>	<b>\$142,181,611</b>
<i>(thru 12/21/20)</i>	

# FEDERAL CRRSA FUNDS TO BECOME AVAILABLE FOR COVID -19 RESPONSE VIA HB1394

Federal Pandemic Relief Bill (CRRSA) signed 12-27-20

## Child Care

- Child Care Assistance Program through (CCDBG via ACF/HHS) - \$19,448,230

## Housing

- Rental Assistance (US Treasury) - \$200,000,000
- Low Income Household Water Assistance (OCS/ACF/HHS) - \$

## Food Assistance

- P-EBT (for families eligible for free or reduced lunch in school) (SNAP via FNS/USDA) - \$32,500,000
- Enhanced SNAP benefit eligibility (SNAP via FNS/USDA) - \$33,600,000
- P-SNAP Increased benefit (SNAP via FNS/USDA) - \$14,400,000

## Aging Services

- Supportive services (OAA via ACL/HHS) - \$840,000
- Long term care Ombudsman (ACL/HHS) - \$20,000
- Adult Protective Services (ACL/HHS) - \$704,100

## Child Welfare

- Chafee Foster Care / Successful Transitions to Adulthood (ACF/HHS) - \$1,391,000
- Safe Stable Families (ACF/HHS) - \$90,000

## + Behavioral Health

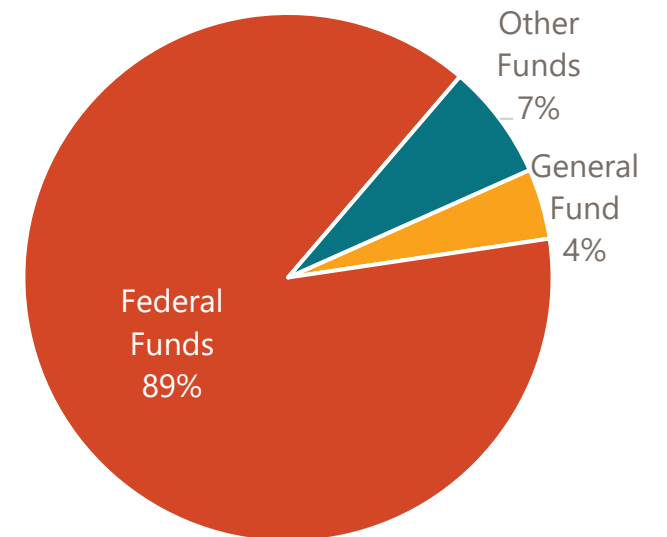
## + FMAP



# Economic Assistance Budget Summary

19-21 Budget	\$259,846,264	39.80 FTE
21-23 Budget (exec)	\$274,998,084	39.80 FTE
21-23 Budget (House)	\$274,960,587	39.80 FTE

- Administer federal COVID relief funds for low and moderate-income households
- Integrate department's housing assistance initiatives into the administration of economic assistance resources



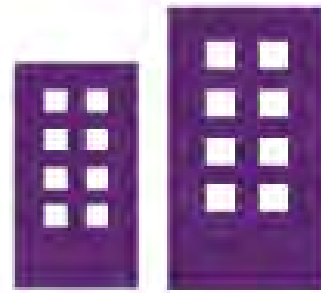


# SOCIAL DETERMINANTS OF HEALTH

The social determinants of health are the conditions in which we are born, we grow and age, and in which we live and work. The factors below impact on our health and wellbeing.



Childhood experiences



Housing



Education



Social support



Family income



Employment



Our communities



Access to health services

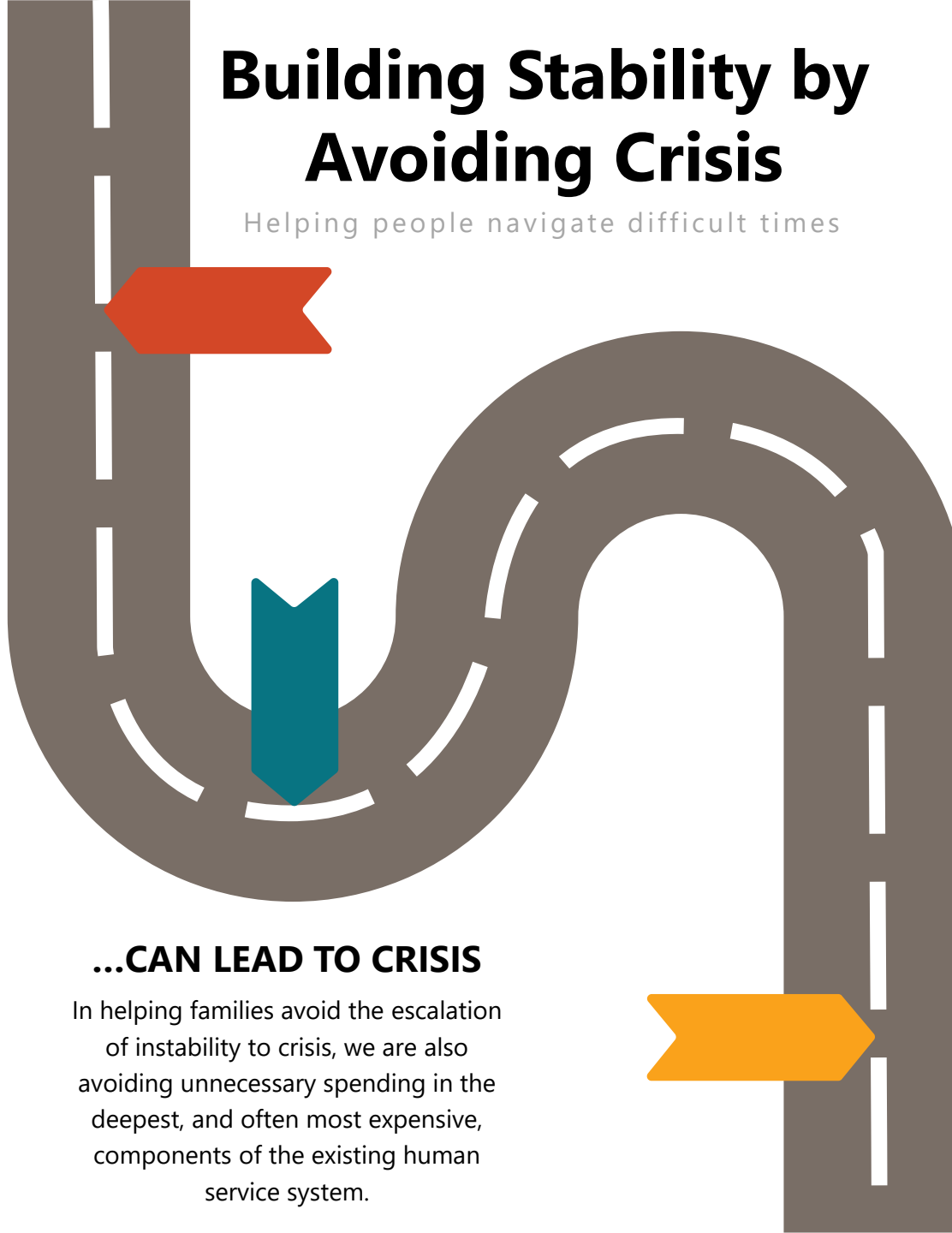
Source: NHS Health Scotland

# Building Stability by Avoiding Crisis

Helping people navigate difficult times

## DISRUPTION

When families experience disruption, their ability to be a fully engaged, productive member of the community and the workforce is compromised.



## ...CAN LEAD TO CRISIS

In helping families avoid the escalation of instability to crisis, we are also avoiding unnecessary spending in the deepest, and often most expensive, components of the existing human service system.

## SERVICES SUPPORT STABILITY

Intervening early will both save money and strengthen families. It will allow us to reserve deep end services for the times when they are truly needed, and help people avoid deepening their journey into crisis by diverting from institutions, keeping families together, and helping and sure that people have a place to call home.

# Return On Investment





## Contact Information

Cory Pedersen, Children & Family Services

Tina Bay, Developmental Disabilities Division

Nancy Nikolas-Maier, Aging & Adult Services

Julie Horntvedt, Developmental Disabilities Council

Sheri Seil, Disability Determination Services

Damian Schlinger, Vocational Rehabilitation

Jim Fleming, Child Support Division

Michele Gee, Economic Assistance

