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01 - LONGSHEET

(For Committee's use)

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8					FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total			
9																			
10					Detail description	EBR FTE	EBR Gen	EBR Other	EBR Total	Ch1 FTE	Ch1 Gen	Ch 1 Other	Ch 1 Total	FTE	Gen	Other	Total		
11					2023-25 Base Level - Management	112.40	\$ 79,695,064	\$ 92,905,416	\$ 172,600,480	112.40	\$ 79,695,064	\$ 92,905,416	\$ 172,600,480	0.00	\$ -	\$ -	\$ -		
12																			
13					2023-25 Ongoing Funding Changes - Management														
14					State employee salary and benefit increases	\$	1,581,002	\$ 515,391	\$ 2,096,393		1,298,730	422,595	1,721,325	-	(282,272)	(92,796)	(375,068)		
15					Section 3 - Funding transfers between Subdivisions 1, 2 and 3 and HB 1004														
16					Section 4 - Funding transfers from Subdivision 1, 2, 3 and HB 1004 to Subsection 4														
17					Section 5 - Combine appropriation of HB 1004 and other bills approved into one budget														
18																			
19					Subtotal Ongoing Funding Changes	-	1,581,002	515,391	2,096,393	-	1,298,730	422,595	1,721,325	-	(282,272)	(92,796)	(375,068)		
20																			
21					Administration														
22					Continued program changes		2,353,162	(2,857)	2,350,305		2,353,162	(361,467)	1,991,695			(358,610)	(358,610)		
23																			
24					Subtotal Administration	-	2,353,162	(2,857)	2,350,305	-	2,353,162	(361,467)	1,991,695	-		(358,610)	(358,610)		
25																			
26					Information Technology Services														
27					Continued program changes		7,154,347	11,885,615	19,039,962		7,154,347	11,885,615	19,039,962						
28					IT Underfunding		(3,512,330)		(3,512,330)		(3,512,330)		(3,512,330)						
29																			
30					Subtotal ongoing funding changes	-	3,642,017	11,885,615	15,527,632	-	3,642,017	11,885,615	15,527,632	-					
31																			

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32	Amendments to consider																		
33					CBCU - 0.5 FTE to 1.0 FTE	81,766	17,946	99,712	0.50	81,766	17,946	99,712	-	-	-	-			
34					CBCU - Temp to FTE	39,014	8,566	47,580	1.00	39,014	8,566	47,580	-	-	-	-			
35					ADA Coordinators	55,200		55,200	-	55,200	-	55,200	-	-	-	-			
36					Rent Model	842,674		842,674	-	842,674	-	842,674	-	-	-	-			
37					Reduce funding for overall agency operations				-	(19,900,262)	-	(19,900,262)	-	(19,900,262)	-	(19,900,262)			
38					Shifting Costs from 457 to HHS Admin	2,541,661		2,541,661	-	-	-	-	(5.00)	(2,541,661)	-	(2,541,661)			
39					Section 7 - Community Health Trust Fund of \$20,400,000 for replacement of CS System				-	-	-	-	-	-	-	-			
40					Section 27 - MMIS technology stack upgrade				-	-	-	-	-	-	-	-			
41					Section 28 - MMIS modularization technology project				-	-	-	-	-	-	-	-			
42					Section 29 - Carryover of Special Session appropriation for projects, financial assistance, IT upgrades, behavioral health services and SUD voucher system grants				-	-	-	-	-	-	-	-			
43					Section 33 - Carryover for COVID-19 response operating and grants chapter 27				-	-	-	-	-	-	-	-			
44					Section 34 - Carryover for COVID-19 pandemic response operating and grants chapter 28				-	-	-	-	-	-	-	-			
45									-	-	-	-	-	-	-	-			
46					Subtotal of Amendments to Consider	3,560,315	26,512	3,586,827	6.50	(18,881,608)	26,512	(18,855,096)	(5.00)	(22,441,923)	-	(22,441,923)			
47																			
48	One-time funding items																		
49					Inflation for HHS Operating	10,282,172	10,282,172	20,564,344	-	10,282,172	10,282,172	20,564,344	-	-	-	-			
50					CBCU Automation	1,000,000		1,000,000	-	1,000,000	-	1,000,000	-	-	-	-			
51					Child Support Replacement - Community Health Trust Fund		60,000,000	60,000,000	-	-	60,000,000	60,000,000	-	-	-	-			
52					Contract and Grant System - SIIF		11,000,000	11,000,000	-	-	11,000,000	11,000,000	-	-	-	-			
53					Total one-time funding changes	11,282,172	81,282,172	92,564,344	-	11,282,172	81,282,172	92,564,344	-	-	-	-			
54																			
55					Total Changes to Base Level Funding - Administration	22,418,668	93,706,833	116,125,501	6.50	(305,527)	93,255,427	92,949,900	(5.00)	(22,724,195)	(451,406)	(23,175,601)			
56																			
57					2023-25 Total Management Funding	102,113,732	186,612,249	288,725,981	118.90	79,389,537	186,160,843	265,550,380	(5.00)	(22,724,195)	(451,406)	(23,175,601)			

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58																			
59					2023-25 Base Level - Program and Policy	676.32 \$ 1,294,528,245 \$ 2,501,118,558 \$ 3,795,646,803			676.32 \$ 1,294,528,245 \$ 2,501,118,558 \$ 3,795,646,803				0.00 \$ - \$ - \$ -						
60																			
61					2023-25 Ongoing Funding Changes														
62					State employee salary and benefit increases	\$ 4,860,029 \$ 6,532,578 \$ 11,392,607			- 3,999,933 5,393,606 9,393,539				- (860,096) (1,138,972) (1,999,068)						
63																			
64					Subtotal Ongoing Funding Changes	- 4,860,029 6,532,578 11,392,607			- 3,999,933 5,393,606 9,393,539				- (860,096) (1,138,972) (1,999,068)						
65																			
66					Economic Assistance														
67					Continued program changes	14,082,853 (2,071,770) 12,011,083			- 1,094,308 2,065,084 3,159,392				- (12,988,545) 4,136,854 (8,851,691)						
68					Grant cost and caseload changes	(6,607,933) 73,479,898 66,871,965			- 6,595,560 69,004,177 75,599,737				- 13,203,493 (4,475,721) 8,727,772						
69					Subtotal Economic Assistance	- 7,474,920 71,408,128 78,883,048			- 7,689,868 71,069,261 78,759,129				- 214,948 (338,867) (123,919)						
70																			
71					Amendments to consider														
72					TANF Revitalization	7,496,368 7,496,368			- - 7,496,368 7,496,368				- - - -						
73					Grow utilization of CCAP for kids 0-3	22,000,000 22,000,000			- 22,000,000 - 22,000,000				- - - -						
74					Improve ability of lower income parents to find/choose quality childcare	12,900,000 12,900,000			- 12,900,000 - 12,900,000				- - - -						
75					Increase in CCDF funding (total award \$3,114,294 - 80% to EA)	- -			- - 2,491,435 2,491,435				- - 2,491,435 2,491,435						
76					Increase in LIHEAP funding	- -			- - 12,700,000 12,700,000				- - 12,700,000 12,700,000						
77					Agree to Engrossed SB 2012	- -			- - (3,193,841) (3,193,841)				- - (3,193,841) (3,193,841)						
78					Section 30 - Carryover for alternatives-to-abortion	- -			- - - -				- - - -						
79					Section 31 - Carryover for eligibility system project (SPACES)	- -			- - - -				- - - -						
80					Section 38 - Federal funding appeal limitation	- -			- - - -				- - - -						
81					Subtotal of Economic Assistance Amendments to Consider	- 34,900,000 7,496,368 42,396,368			- 34,900,000 19,493,962 54,393,962				- - 11,997,594 11,997,594						
82																			
83																			
84					One-time funding items														
85					Create quality tiers in CCAP reimbursement rates (EA)	3,000,000 3,000,000			- 3,000,000 - 3,000,000				- - - -						
86					Subtotal of Economic Assistance One-time Funding Items	- 3,000,000 - 3,000,000			- 3,000,000 - 3,000,000				- - - -						
87																			
88					Child Support														
89					Continued program changes	89,676 (810,974) (721,298)			- 51,381 (847,850) (796,469)				- (38,295) (36,876) (75,171)						
90																			
91					Subtotal Child Support	- 89,676 (810,974) (721,298)			- 51,381 (847,850) (796,469)				- (38,295) (36,876) (75,171)						
92																			

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93	Medical Services																		
94						11,192,893	(3,534,736)	7,658,157	-	10,064,218	(1,761,795)	8,302,423	-	(1,128,675)	1,772,941	644,266			
95						39,637,782	304,848,337	344,486,119	-	39,637,782	304,848,337	344,486,119	-	-	-	-			
96						31,500,000	(31,500,000)	-	-	31,500,000	(31,500,000)	-	-	-	-	-			
97						(10,052,678)	(14,077,610)	(24,130,288)	-	(10,052,678)	(14,077,610)	(24,130,288)	-	-	-	-			
98						6,097,851	(6,097,851)	-	-	6,097,851	(6,097,851)	-	-	-	-	-			
99								-	-	-	-	-	-	-	-	-			
100						78,375,848	249,638,140	328,013,988	-	77,247,173	251,411,081	328,658,254	-	(1,128,675)	1,772,941	644,266			
101																			
102	Amendments to consider																		
103						15,654,634	18,828,683	34,483,317	-	17,067,027	20,537,526	37,604,553	-	1,412,393	1,708,843	3,121,236			
104					1.00	92,210	92,210	184,420	-	-	-	-	(1.00)	(92,210)	(92,210)	(184,420)			
105						1,389,270	2,878,042	4,267,312	-	1,389,270	2,878,042	4,267,312	-	-	-	-			
106						6,300,000	4,200,000	10,500,000	-	6,300,000	4,200,000	10,500,000	-	-	-	-			
107					2.00	59,614	285,350	344,964	2.00	48,642	266,995	315,637	-	(10,972)	(18,355)	(29,327)			
108									-	1,362,070	1,505,446	2,867,516	-	1,362,070	1,505,446	2,867,516			
109									-	(331,180)	2,122,006	1,790,826	-	(331,180)	2,122,006	1,790,826			
110									-	-	-	-	-	-	-	-			
111									-	-	-	-	-	-	-	-			
112									-	-	-	-	-	-	-	-			
113									-	-	-	-	-	-	-	-			
114						23,495,728	26,284,285	49,780,013	2.00	25,835,829	31,510,015	57,345,844	(1.00)	2,340,101	5,225,730	7,565,831			
115																			
116	One-time funding items																		
117						2,250,000	2,250,000	4,500,000	-	2,250,000	2,250,000	4,500,000	-	-	-	-			
118									-	2,250,000	2,250,000	4,500,000	-	-	-	-			

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119																							
120					Long-Term Care																		
121						52,743,861	59,396,389	112,140,250	-	52,743,861	59,396,389	112,140,250	-	-	-	-							
122						1,000,000	(1,000,000)	-	-	1,000,000	(1,000,000)	-	-	-	-	-							
123						8,628,268	(8,628,268)	-	-	8,628,268	(8,628,268)	-	-	-	-	-							
124								-	-			-	-	-	-	-							
125						62,372,129	49,768,121	112,140,250	-	62,372,129	49,768,121	112,140,250	-	-	-	-							
126																							
127					Amendments to consider																		
128						6,173,513	4,332,672	10,506,185	-	6,753,642	4,740,891	11,494,533	-	580,129	408,219	988,348							
129									-	(2,391,028)	(1,120,629)	(3,511,657)	-	(2,391,028)	(1,120,629)	(3,511,657)							
130						1,913,100	1,526,700	3,439,800	-	1,913,100	1,526,700	3,439,800	-	-	-	-							
131						779,837	779,837	1,559,674	-	779,837	779,837	1,559,674	-	-	-	-							
132						351,000	-	351,000	-	351,000	-	351,000	-	-	-	-							
133						86,882	96,028	182,910	-	86,882	96,028	182,910	-	-	-	-							
134						280,000	-	280,000	-	280,000	-	280,000	-	-	-	-							
135						6,240,000	-	6,240,000	-	4,777,500	-	4,777,500	-	(1,462,500)	-	(1,462,500)							
136						100,000	-	100,000	-	100,000	-	100,000	-	-	-	-							
137						186,400	206,022	392,422	-	186,400	206,022	392,422	-	-	-	-							
138						138,150	-	138,150	-	138,150	-	138,150	-	-	-	-							
139						4,149,579	4,586,377	8,735,956	-	4,149,579	4,586,377	8,735,956	-	-	-	-							
140						(300,000)	-	(300,000)	-	-	-	-	-	300,000	-	300,000							
141						19,380	21,420	40,800	-	19,380	21,420	40,800	-	-	-	-							
142									-	-	-	-	-	-	-	-							
143									-	-	-	-	-	-	-	-							
144									-	-	-	-	-	-	-	-							
145									-	-	-	-	-	-	-	-							
146									-	-	-	-	-	-	-	-							
147						20,117,841	11,549,056	31,666,897	-	17,144,442	10,836,646	27,981,088	-	(2,973,399)	(712,410)	(3,685,809)							
148																							
149					One-time funding items																		
150									-	(300,000)	-	(300,000)	-	(300,000)	-	(300,000)							
151									-	(300,000)	-	(300,000)	-	(300,000)	-	(300,000)							
152																							
153					DD Council																		
154							70,974	70,974	-	-	70,967	70,967	-	-	-	(7)	(7)						
155							70,974	70,974	-	-	70,967	70,967	-	-	-	(7)	(7)						

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156																				
157					Aging Services															
158						590,655	8,414,390	9,005,045	-	915,153	7,584,641	8,499,794	-	324,498	(829,749)	(505,251)				
159																				
160					Subtotal Aging Services	590,655	8,414,390	9,005,045	-	915,153	7,584,641	8,499,794	-	324,498	(829,749)	(505,251)				
161																				
162					Amendments to consider															
163						112,159	41,427	153,586	-	122,649	45,302	167,951	-	10,490	3,875	14,365				
164					DOJ Coordinator - Makes sunset FTE Perm FTE	1.00			1.00											
165					HCBS Case Management - New FTE	10.00	2,350,289	2,350,289	(10.00)						(2,350,289)	(2,350,289)				
166					HCBS Generalist - New FTE	1.00	75,170	150,340		71,956	71,956	143,912		(3,214)	(3,214)	(6,428)				
167					HCBS Service Navigators - New FTE	2.00	75,170	150,340		71,956	71,956	143,912		(3,214)	(3,214)	(6,428)				
168					Quality Assurance/Compliance for Aging - New FTE	1.00	110,878	221,756		103,868	103,868	207,736		(7,010)	(7,010)	(14,020)				
169					Guardianship establishment (fee increase)		70,500	70,500		70,500		70,500								
170					Senior Meal Rate Increase		12,854,294	12,854,294		12,854,294		12,854,294								
171					Shifting Costs from 457 to HHS Aging	67.00	13,779,234	984,705	(67.00)						(13,779,234)	(984,705)	(14,763,939)			
172					Increase funding for dementia care service grant					305,000		305,000			305,000	305,000				
173					Agree to Engrossed SB 2012						697,009	697,009			697,009	697,009				
174					Section 23 - Carryover authority for vulnerable adult protection services appropriation from 2021 Special Session															
175					Section 25 - Carryover authority for money follows the person capacity program appropriation from 2021 Special Session															
176					Section 32 - Carryover exemption for Medicaid HCBS 10% plan															
177																				
178					Subtotal of Aging Amendments to Consider	82.00	27,077,405	3,637,639	5.00	13,600,223	990,091	14,590,314	(77.00)	(13,477,182)	(2,647,548)	(16,124,730)				
179																				
180					Children and Family Services															
181						6,135,387	(2,874,953)	3,260,434	-	2,979,468	416,500	3,395,968	-	(3,155,919)	3,291,453	135,534				
182					Grant cost and caseload changes	1,402,952	5,745,866	7,148,818	-	4,756,382	2,321,276	7,077,658	-	3,353,430	(3,424,590)	(71,160)				
183					FMAP Changes	(18,029)	18,029		-	(18,029)	18,029		-							
184																				
185					Subtotal Children and Family Services		7,520,310	2,888,942		7,717,821	2,755,805	10,473,626		197,511	(133,137)	64,374				
186																				
187					Amendments to consider															
188					Section 36 - Provider Inflation (4% / 4%)		4,430,167	3,425,283		4,776,326	3,663,887	8,440,213		346,159	238,604	584,763				
189					TANF Revitalization		7,496,368	(7,496,368)		7,496,368	(7,496,368)									
190					CAC Child Advocacy Center of ND		1,600,000	1,600,000		2,500,000		2,500,000		900,000		900,000				
191					Unlicensed Relative Caregiver assistance		960,000	960,000		960,000		960,000								
192					Child Protection and Response Team	4.00	1,003,280	1,003,280	(4.00)					(1,003,280)		(1,003,280)				
193					Family Voices - grants to organizations to provide family to family support services					175,000		175,000		175,000		175,000				
194					Section 24 - Carryover authority for children and family services transition program appropriation from 2021 Special Session															
195																				
196					Subtotal of CFS Amendments to Consider	4.00	15,489,815	(4,071,085)		15,907,694	(3,832,481)	12,075,213	(4.00)	417,879	238,604	656,483				

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8					FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total							
197																							
198					Behavioral Health Division																		
199						191,745	(2,479,500)	(2,287,755)	-	220,705	(2,496,747)	(2,276,042)	-	28,960	(17,247)	11,713							
200																							
201					Subtotal Behavioral Health Division	191,745	(2,479,500)	(2,287,755)	-	220,705	(2,496,747)	(2,276,042)	-	28,960	(17,247)	11,713							
202																							
203					Amendments to consider																		
204					Section 36 - Provider Inflation (4% / 4%)	1,366,916	338,976	1,705,892	-	1,494,757	370,679	1,865,436	-	127,841	31,703	159,544							
205					BHD Service Navigator - New FTE	1.00	201,743	201,743	1.00	189,272	-	189,272	-	(12,471)	-	(12,471)							
206					SUD Voucher Processor - Temp to FTE	1.00	34,674	34,674	1.00	34,674	-	34,674	-	-	-	-							
207					Pregnant Parenting Women Residential	600,000		600,000	-	600,000	-	600,000	-	-	-	-							
208					Community Connect	7,019,514		7,019,514	-	7,019,514	-	7,019,514	-	-	-	-							
209					Free Through Recovery		8,326,380	8,326,380	-	-	8,326,380	8,326,380	-	-	-	-							
210					Opioid Settlement		2,000,000	2,000,000	-	-	2,000,000	2,000,000	-	-	-	-							
211					School Grants				-	3,500,000	-	3,500,000	-	3,500,000	-	3,500,000							
212					Recovery Housing additional funding				-	1,300,000	-	1,300,000	-	1,300,000	-	1,300,000							
213					B-HERO spending authority (Funded with GEER funds)				-	-	400,000	400,000	-	-	400,000	400,000							
214					Section 12 - Supportive housing Grants for behavioral health division				-	-	-	-	-	-	-	-							
215					Section 19 - Provider process and outcomes measures for providers who receive funding from Department				-	-	-	-	-	-	-	-							
216					Section 20 - Transfer authority of appropriation for community behavioral health program				-	-	-	-	-	-	-	-							
217					Section 22 - Carryover suicide prevention grants				-	-	-	-	-	-	-	-							
218					Section 26 - Carryover authority for free through recovery program appropriation from 2021 Special Session				-	-	-	-	-	-	-	-							
219					New section amendment - to carryover SUD Voucher funding from HB1012				-	-	-	-	-	-	-	-							
220									-	-	-	-	-	-	-	-							
221									-	-	-	-	-	-	-	-							
222					Subtotal of Behavioral Health Division Amendments to Consider	2.00	9,222,847	10,665,356	2.00	14,138,217	11,097,059	25,235,276	-	4,915,370	431,703	5,347,073							
223																							
224																							
225					One-time funding items																		
226					Pregnant Parenting Women Residential - SIIF		1,000,000	1,000,000	-	-	1,000,000	1,000,000	-	-	-	-							
227					Subtotal of Behavioral Health Division One-time Funding items				-	-	1,000,000	1,000,000	-	-	-	-							
228																							
229					Vocational Rehabilitation																		
230					Continued program changes	361,265	1,822,770	2,184,035	-	425,752	1,757,792	2,183,544	-	64,487	(64,978)	(491)							
231									-	-	-	-	-	-	-	-							
232					Subtotal Vocational Rehabilitation	361,265	1,822,770	2,184,035	-	425,752	1,757,792	2,183,544	-	64,487	(64,978)	(491)							

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233																							
234					Developmental Disabilities																		
235						373,528	2,141,760	2,515,288	-	335,097	2,004,834	2,339,931	-	(38,431)	(136,926)	(175,357)							
236						(4,506,432)	(7,804,980)	(12,311,412)	-	(4,381,435)	(7,804,977)	(12,186,412)	-	124,997	3	125,000							
237						6,895,538	(6,895,538)	-	-	6,895,538	(6,895,538)	-	-	-	-	-							
238						(4,615,012)	(5,121,300)	(9,736,312)	-	(4,615,012)	(5,121,300)	(9,736,312)	-	-	-	-							
239								-	-	-	-	-	-	-	-	-							
240						-	(1,852,378)	(17,680,058)	(19,532,436)	-	(1,765,812)	(17,816,981)	(19,582,793)	-	86,566	(136,923)	(50,357)						
241																							
242					Amendments to consider																		
243						18,647,220	20,831,720	39,478,940	-	20,416,563	22,808,856	43,225,419	-	1,769,343	1,977,136	3,746,479							
244								-	-	10,223,681	11,403,366	21,627,047	-	10,223,681	11,403,366	21,627,047							
245					1.00	92,210	92,210	184,420	1.00	86,602	86,602	173,204	-	(5,608)	(5,608)	(11,216)							
246					1.00	110,878	110,878	221,756	1.00	103,868	103,868	207,736	-	(7,010)	(7,010)	(14,020)							
247						300,000		300,000	-	300,000	-	300,000	-	-	-	-							
248								-	-	808,748	-	808,748	-	808,748	-	808,748							
249								-	-	-	697,009	697,009	-	-	697,009	697,009							
250					2.00	172,370	179,406	351,776	-	-	-	-	(2.00)	(172,370)	(179,406)	(351,776)							
251								-	-	-	-	-	-	-	-	-							
252					4.00	19,322,678	21,214,214	40,536,892	2.00	31,939,462	35,099,701	67,039,163	(2.00)	12,616,784	13,885,487	26,502,271							
253																							
254					Disability Determination Services																		
255							284,045	284,045	-	-	236,892	236,892	-	-	(47,153)	(47,153)							
256								284,045	284,045	-	-	236,892	236,892	-	-	(47,153)	(47,153)						
257																							
258					Refugee Services																		
259							4,097,492	4,097,492	-	-	4,097,463	4,097,463	-	-	(29)	(29)							
260								4,097,492	4,097,492	-	-	4,097,463	4,097,463	-	-	(29)	(29)						

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261																							
262					Early Childhood Division																		
263						21,938	(828,886)	(806,948)	-	132,436	(810,984)	(678,548)	-	110,498	17,902	128,400							
264																							
265					Subtotal Early Childhood Services	21,938	(828,886)	(806,948)	-	132,436	(810,984)	(678,548)	-	110,498	17,902	128,400							
266																							
267					Amendments to consider																		
268					1.00	251,226		251,226	1.00	236,905	-	236,905	-	-	-	-	(14,321)		(14,321)				
269					1.00	251,226		251,226	-	-	-	-	(1.00)	(251,226)	-	(251,226)			(251,226)				
270						16,000,000		16,000,000	-	12,000,000	-	12,000,000	-	(4,000,000)	-	(4,000,000)			(4,000,000)				
271						2,000,000		2,000,000	-	2,000,000	-	2,000,000	-	-	-	-			-				
272						2,400,000		2,400,000	-	-	-	-	-	(2,400,000)	-	(2,400,000)			(2,400,000)				
273					26.00	4,869,909	422,954	5,292,863	-	-	-	-	(26.00)	(4,869,909)	(422,954)	(5,292,863)			(5,292,863)				
274																							
275																							
276																							
277																							
278																							
279																							
280					Subtotal of Early Childhood Division Amendments to consider	28.00	25,772,361	422,954	26,195,315	1.00	14,236,905	-	14,236,905	(27.00)	(11,535,456)	(422,954)	(11,958,410)						
281																							
282					One-time funding items																		
283							5,000,000	5,000,000	-	-	1,000,000	1,000,000	-	-	(4,000,000)	(4,000,000)			(4,000,000)				
284							7,000,000	7,000,000	-	-	5,000,000	5,000,000	-	-	(2,000,000)	(2,000,000)			(2,000,000)				
285							1,000,000	1,000,000	-	-	1,000,000	1,000,000	-	-	-	-			-				
286						3,000,000		3,000,000	-	3,000,000	-	3,000,000	-	-	-	-			-				
287																							
288					Subtotal of Early Childhood Division One-time funding changes	-	3,000,000	13,000,000	16,000,000	-	3,000,000	7,000,000	10,000,000	-	-	(6,000,000)	(6,000,000)						
289																							
290					Subtotal all ongoing funding changes	123.00	343,654,812	466,574,949	810,229,761	12.00	334,659,311	487,618,060	822,277,371	(111.00)	(8,995,501)	21,043,111	12,047,610						
291																							
292					Total Changes to Base Level Funding	123.00	343,654,812	466,574,949	810,229,761	12.00	334,659,311	487,618,060	822,277,371	(111.00)	(8,995,501)	21,043,111	12,047,610						
293																							
294					2023-25 Total Funding - Program and Policy	799.32	\$ 1,638,183,057	\$ 2,967,693,507	\$ 4,605,876,564	688.32	\$ 1,629,187,556	\$ 2,988,736,618	\$ 4,617,924,174	(111.00)	\$ (8,995,501)	\$ 21,043,111	\$ 12,047,610						
295																							

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296					2023-25 Base Level - Field Services	1,320.61 \$	179,323,957 \$	114,273,295 \$	293,597,252	1,320.61 \$	179,323,957 \$	114,273,295 \$	293,597,252	0.00 \$	- \$	- \$	- \$			
297																				
298					2023-25 Ongoing Funding Changes															
299					State employee salary and benefit increases		16,019,179	5,196,445	21,215,624	-	13,087,608	4,279,883	17,367,491	-	(2,931,571)	(916,562)	(3,848,133)			
300					Subtotal Ongoing Funding Changes	-	16,019,179	5,196,445	21,215,624	-	13,087,608	4,279,883	17,367,491	-	(2,931,571)	(916,562)	(3,848,133)			
301																				
302					Human Service Centers															
303					Continued program changes		828,956	2,176,151	3,005,107	-	828,956	2,176,151	3,005,107	-	-	-	-			
304					Adjustment needed in House for Continued Program Changes						(636,804)	(552,800)	(1,189,604)		(636,804)	(552,800)	(1,189,604)			
305					Adjustment needed - switch approp line from Institutions to Human Service Centers						(5,028,541)	-	(5,028,541)		(5,028,541)	-	(5,028,541)			
306					Subtotal Human Service Centers	-	828,956	2,176,151	3,005,107	-	(4,836,389)	1,623,351	(3,213,038)	-	(5,665,345)	(552,800)	(6,218,145)			
307																				
308																				
309					State Hospital															
310					Continued program changes		1,164,508	211,800	1,376,308	-	2,586,292	764,602	3,350,894	-	1,421,784	552,802	1,974,586			
311					Adjustment needed - switch approp line from Institutions to Human Service Centers						5,028,541	-	5,028,541		5,028,541	-	5,028,541			
312					Subtotal State Hospital	-	1,164,508	211,800	1,376,308	-	7,614,833	764,602	8,379,435	-	6,450,325	552,802	7,003,127			
313																				
314																				
315					Life Skills and Transition Center															
316					Continued program changes		2,586,559	5,050,437	7,636,996	-	2,586,559	5,050,437	7,636,996	-	-	-	-			
317					Subtotal Life Skills and Transition Center	-	2,586,559	5,050,437	7,636,996	-	2,586,559	5,050,437	7,636,996	-	-	-	-			
318																				
319																				
320					Subtotal Institutions					-	5,365,003	7,438,390	12,803,393	-	784,980	2	784,982			
321																				
322					Amendments to consider															
323					Section 36 - Provider Inflation (4% / 4%)		1,296,258		1,296,258	-	1,417,491	-	1,417,491	-	121,233	-	121,233			
324					Contract for Gen. Physician Position 24x7 Crisis Services		132,000		132,000	-	132,000	-	132,000	-	-	-	-			
325					Contract for nursing for CRU 24x7 Crisis Services		2,080,000		2,080,000	-	2,080,000	-	2,080,000	-	-	-	-			
326					Contract for On-call psychiatry 24x7 Crisis Services		3,874,500		3,874,500	-	3,874,500	-	3,874,500	-	-	-	-			
327					Expand Mobile Crisis Services - New FTE	4.00	1,115,695		1,115,695	4.00	1,061,781	-	1,061,781	-	(53,914)	-	(53,914)			
328					NW RN for Crisis Residential - New FTE	1.00	194,560		194,560	1.00	185,158	-	185,158	-	(9,402)	-	(9,402)			
329					Peer Support Specialists - Temp to FTE	16.00	1,646,475		1,646,475	16.00	1,566,897	-	1,566,897	-	(79,578)	-	(79,578)			
330					NC Behavioral Health - Temp to FTE	1.50	118,200		118,200	1.50	115,515	-	115,515	-	(2,685)	-	(2,685)			
331					NE Behavioral Health - Temp to FTE	4.00	101,270		101,270	4.00	100,323	-	100,323	-	(947)	-	(947)			
332					SC Behavioral Health - Temp to FTE	2.00	85,576		85,576	2.00	84,176	-	84,176	-	(1,400)	-	(1,400)			
333					SE - Temp to FTE	16.00	393,611		393,611	16.00	391,212	-	391,212	-	(2,399)	-	(2,399)			
334					WC Direct Care Associates - Temp to FTE	5.00	264,720		264,720	5.00	259,680	-	259,680	-	(5,040)	-	(5,040)			
335					Funding for base community behavioral services thru HSCs		34,200,815	(34,200,815)	-		-	-	-		(34,200,815)	34,200,815	-			
336					3 HSCs to become CCBHCs - New FTE					24.00	9,650,000	-	9,650,000	24.00	9,650,000	-	9,650,000			
337					Locumtenens contract cost changes - SH		2,475,200		2,475,200	-	2,475,200	-	2,475,200	-	-	-	-			
338					Funding for base community behavioral services thru State Hospital		1,827,326	(1,827,326)	-		-	-	-		(1,827,326)	1,827,326	-			

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339					Section 6 - Adjust or increase up to 50 FTE positions for field services to provide direct services			-	-	-	-	-	-	-	-	-	-	-	-
340					Section 17 - Authorize lease agreements with vendors for office suites at LRHSC and NWHSC			-	-	-	-	-	-	-	-	-	-	-	-
341					New section - language for exemption to procurement of consumables at residential units during time of low census			-	-	-	-	-	-	-	-	-	-	-	-
342					Section 18 - lease of land at SH to national guard			-	-	-	-	-	-	-	-	-	-	-	-
343					Section 10 - Capital payments relating to special assessments at the SH and LSTC.			-	-	-	-	-	-	-	-	-	-	-	-
344					Section 11 - Emergency Commission to authorize demolition of the administrative building and employee building and tunnels at theSH			-	-	-	-	-	-	-	-	-	-	-	-
345								-	-	-	-	-	-	-	-	-	-	-	-
346					Subtotal of Amendments to consider Institutions	49.50	49,806,206	(36,028,141)	13,778,065	73.50	23,393,933	-	23,393,933	24.00	(26,412,273)	36,028,141	9,615,868		
347																			
348					One-time funding items - Field Services														
349					Southeast HSC Mechanical/Safety Systems Upgrade		272,654	272,654	-	-	272,654	272,654	-	-	-	-	-	-	-
350					Southeast HSC parking lot		462,500	462,500	-	-	462,500	462,500	-	-	-	-	-	-	-
351					Funding for base community behavioral services thru HSCs			-	-	34,200,815	(34,200,815)	-	-	34,200,815	(34,200,815)	-	-	-	-
352					Funding for base community behavioral services thru State Hospital			-	-	1,827,326	(1,827,326)	-	-	1,827,326	(1,827,326)	-	-	-	-
353					State Hospital Design and construction plans		10,000,000	10,000,000	-	-	5,000,000	5,000,000	-	-	(5,000,000)	(5,000,000)	-	-	
354					Subtotal One-time funding changes	-	-	10,735,154	10,735,154	-	36,028,141	(30,292,987)	5,735,154	-	36,028,141	(41,028,141)	(5,000,000)	(5,000,000)	
355																			
356					Total Changes to Base Level Funding	49.50	70,405,408	(12,658,154)	57,747,254	73.50	77,874,685	(18,574,714)	59,299,971	24.00	7,469,277	(5,916,560)	1,552,717		
357																			
358					2023-25 Total Funding - Field Services	1,370.11	\$ 249,729,365	\$ 101,615,141	\$ 351,344,506	1,394.11	\$ 257,198,642	\$ 95,698,581	\$ 352,897,223	24.00	\$ 7,469,277	\$ (5,916,560)	\$ 1,552,717		

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8					FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total			
359																			
360					2023-25 Base Level - County Social Service Financing	156.00 \$	1,240,391 \$	188,676,995 \$	189,917,386	156.00 \$	1,240,391 \$	188,676,995 \$	189,917,386	0.00 \$	- \$	- \$	- \$	- \$	- \$
361																			
362					2023-25 Ongoing Funding Changes														
363					State employee salary and benefit increases	112,244	2,692,623	2,804,867	-	92,247	2,208,545	2,300,792	-	(19,997)	(484,078)	(504,075)			
364					Continued program changes	21,446	446,522	467,968	-	18,434	1,240,493	1,258,927	-	(3,012)	793,971	790,959			
365																			
366					Subtotal Ongoing Funding Changes	-	133,690	3,139,145	3,272,835	-	110,681	3,449,038	3,559,719	-	(23,009)	309,893	286,884		
367																			
368					One Time Funding														
369					No one-time funding items	-	-	-	-	-	-	-	-	-	-	-	-		
370					Subtotal one-time funding changes	-	-	-	-	-	-	-	-	-	-	-	-		
371																			
372					Amendments to consider														
373					Shifting Costs from 457 to HHS Admin	(5.00)	(2,541,661)	(2,541,661)	-	-	-	-	5.00	2,541,661	-	2,541,661			
374					Shifting Costs from 457 to HHS Aging	(67.00)	(13,779,234)	(984,705)	(14,763,939)	-	-	-	-	67.00	13,779,234	984,705	14,763,939		
375					Shifting Costs from 457 to HHS Early Childhood	(26.00)	(4,869,909)	(422,954)	(5,292,863)	-	-	-	-	26.00	4,869,909	422,954	5,292,863		
376					Funding shared delivery of human services with human service zones		19,816,723	3,476,783	23,293,506	-	-	-	-	-	(19,816,723)	(3,476,783)	(23,293,506)		
377					HCBS case management increased volume - New FTE				-	7.00	-	1,102,031	1,102,031	7.00	-	1,102,031	1,102,031		
378					Funding for human service zone employee increases 4/4 percent			8,337,993	8,337,993	-	-	6,240,680	6,240,680	-	-	(2,097,313)	(2,097,313)		
379					Human service zone equity adjustments					-	-	1,000,000	1,000,000	-	-	1,000,000	1,000,000		
380					Adjust spending authority including \$20 million for zone operations and \$600,000 for indigent burials					-	-	23,541,770	23,541,770	-	-	23,541,770	23,541,770		
381					Section 8 - Human Service Finance fund of \$200,000,000 for state-paid economic assistance and social and human services.					-	-	-	-	-	-	-	-		
382										-	-	-	-	-	-	-	-		
383					Subtotal of Amendments to consider - Zones	(98.00)	(1,374,081)	10,407,117	9,033,036	7.00	-	31,884,481	31,884,481	105.00	1,374,081	21,477,364	22,851,445		
384																			
385					Total Changes to Base Level Funding - County Social Service Zones	(98.00)	(1,240,391)	13,546,262	12,305,871	7.00	110,681	35,333,519	35,444,200	105.00	1,351,072	21,787,257	23,138,329		
386																			
387					2023-25 Total Funding - County Social Service Financing	58.00 \$	0 \$	202,223,257 \$	202,223,257	163.00	1,351,072	224,010,514	225,361,586	105.00	1,351,072	21,787,257	23,138,329		
388																			
389					2023-25 SB 2012 Budget Total	2,346.33 \$	1,990,026,154 \$	3,458,144,154 \$	5,448,170,308	2,359.33 \$	1,967,126,807 \$	3,494,606,556 \$	5,461,733,363	13.00 \$	(22,899,347) \$	36,462,402 \$	13,563,055		

	G	H	I	J	K	L	M	N	S	V	W	X	Y	Z	AA	AB	AC	AD	AE
1	SB 2012 Review Approval Worksheet																		
2																			
3					Legislative Base budget	Partially funded requests in EBR													
4					Fully funded requests in EBR	Total additional request to EBR													
5					Additional requests by Governor	Additional section amendments requested in SB2012													
6					Additional Amendments added during Committee Work														
7					23 -25 Executive Budget Recommendation (EBR)				23 - 25 Senate Budget				Difference 23-25 Senate to EBR						
					FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total			
8																			
390																			
391	Additional amendments presented by Legislators during budget testimony																		
392					Senator Rummel - Establish a school behavioral health prevention and early intervention grant program	31,000,000	-	31,000,000											
393					Senator Lee - Forensic examinations and interviews	1,059,000	-	1,059,000											
394					Senator Lee - Increasing grant funding for advocacy services for children	2,500,000	-	2,500,000											
395																			
396					Total Funding of Additional Amendments	- \$ 34,559,000	\$ -	\$ 34,559,000											
397																			
398	Itemized listing of the changes agency is requesting to the committee																		
399	Economic Assistance																		
400					Increase in CCDF funding (total award \$3,114,294 - 80% to EA)	-	2,491,435	2,491,435											
401					Increase in LIHEAP funding	-	12,700,000	12,700,000											
402																			
403	Medical Services																		
404					Operating Increase	1,273,656	1,776,696	3,050,352											
405																			
406	Long Term Care																		
407					Nursing Facility Value-Based Payment Program	6,000,000	6,000,000	12,000,000											
408					Personal Care with Supervision service in Waiver	-	-	-											
409					Higher Acuity Rate for individuals with complex needs	1,614,478	385,522	2,000,000											
410					Base Rate for Personal Care with Individuals with lower needs	2,277,228	1,676,292	3,953,520											
411																			
412	Aging Services																		
413					Increase the number of slots available for guardianship support from 141 to 200	177,000	-	177,000											
414					Rental assistance to meet housing requirements - DOJ Settlement	300,000	-	300,000											
415																			

	G	H	I	J	K	L	M	N	S	V	W	X	Y	Z	AA	AB	AC	AD	AE
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8					FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total			
416	Behavioral Health																		
417					1.0 FTE for 1915i Navigator	98,173	98,172	196,345											
418					Recovery Housing additional funding	1,304,456	-	1,304,456											
419					B-HERO spending authority (Funded with GEER funds)	-	400,000	400,000											
420					Additional Opioid settlement authority														
421					Brain Injury funding flexibility	-	-	-											
422					Move FTR appropriation from DOCR to HHS	-	-	-											
423					SUD provider expansion (NDCC 50-06-42)	-	-	-											
424																			
425	Early Childhood																		
426					Increase in CCDF funding (total award \$3,114,294 - 20% to ECD)	-	622,859	622,859											
427					Increase in Preschool Development Grant		20,891,168	20,891,168											
428																			
429	Human Service Centers																		
430					Add new section for language for exemption to procurement of consumables at residential units during time of low census	-	-	-											
431					Operating shortfall unfunded part of DP #3 of 13,118,475 for HSC's	976,496	-	976,496											
432					Salary underfunding and increase, unfunded part of DP #3 of 13,118,475 for HSC's	6,876,462	-	6,876,462											
433					Temp salaries, unfunded part of DP #3 of 13,118,475 for HSC's	5,265,517	-	5,265,517											
434																			
435	Institutions																		
436					SH Salary Underfunding	1,577,436	-	1,577,436											
437					Continuing Current biennium salary cost to retain employees	3,735,992	-	3,735,992											
438					Continuing Worldwide Contract	2,162,589	-	2,162,589											
439					Replacement Patient Beds	98,264	-	98,264											
440					Replacement Patient Dishware	12,000	-	12,000											
441																			
442	Human Service Zones																		
443					Amendment needed to increase 57-11 (457) to a minimum of 230M (SB2367 or SB2275)	-	-	-											
444																			

	G	H	I	J	K	L	M	N	S	V	W	X	Y	Z	AA	AB	AC	AD	AE
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6					Additional Amendments added during Committee Work														
7					23 -25 Executive Budget Recommendation (EBR)				23 - 25 Senate Budget				Difference 23-25 Senate to EBR						
8					FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total			
445	Unfunded decision package items																		
446					BL Crisis Services - Behavioral Modification Specialist	1.00	179,240	-	179,240										
447					Increased access to HCBS services thru addition of QSPs (using HSZ FTE pool)	9.00	-	1,129,176	1,129,176										
448					Strategic Comms partner to strategic agency initiatives (HCBS/DOJ/Youth)	1.00	255,454	-	255,454										
449					Family Peer Support (First Episode Psychosis program)	4.00	389,584	-	389,584										
450					LR Behavioral Health FTE Temp to FTE	2.00	117,458	-	117,458										
451					Mental Health Specialist	1.00	-	182,642	182,642										
452					NW Medication Aide - Temp convert to FTE	1.00	44,618	-	44,618										
453					Professional Recruiter Contract; focus on BH needs		200,000		200,000										
454					SUD Team FTE	1.00	173,402		173,402										
455					Medicaid-related service infrastructure for maternal/infant health	3.00	278,512	278,512	557,024										
456					Increase Community Spousal Limit for Medicaid		4,212,000	4,212,000	8,424,000										
457					Assisted Living Changes				-										
458					LTC Ombudsman staff	0.70	128,588		128,588										
459					Resident Liaison FTEs	2.00	207,736	207,736	415,472										
460					VAPS staff to meet increased demand	2.50		95,820	95,820										
461					FFT to Rural Areas	4.00	895,968		895,968										
462					MST Expand to Bismarck WC	5.00	1,119,960		1,119,960										
463					SE Drug Court demand	2.00	447,984		447,984										
464					Strategic Comms partner to strategic agency initiatives (early childhood/workforce)	1.00	255,452		255,452										
465					Senior Meals Rate Increase (pre-pkg)		3,000,000	-	3,000,000										
466					WCHSC and Bismarck Public Sch partnership	4.00	895,968		895,968										
467					Add camps/clubs/social skills to Autism Waiver		93,955	103,845	197,800										
468					Transformation Managers (support 2256 et al)	2.00	358,296	78,656	436,952										
469					Community Engagement Specialist	1.00		182,642	182,642										
470					DD Admin temp to FTE	1.00	20,002	20,528	40,530										
471					DDPM temps to FTE	8.00	165,001	171,735	336,736										
472					Fiscal (AP Mgr / Data Analyst)	2.50	481,193	105,799	586,992										
473					SNAP Program Specialist	1.00	98,920	98,920	197,840										
474					Special Lawsuit Funding		250,000		250,000										
475					VR temp to FTE (Williston)	1.00	20,633	76,237	96,870										
476					Tribal Health Initiative staff	2.00	407,130	-	407,130										
477					Culture/engagement resource	1.00	209,467	45,991	255,458										
478					Employee Health/Safety/Wellness/Risk Mgmt	1.00	179,150	39,326	218,476										
479					HSC business partner HR support	1.00	179,150	39,326	218,476										
480					Internal-focused Comms	1.00	209,476	45,982	255,458										
481					Team Engagement / Mgr Support	1.00	218,472	-	218,472										
482					Total Rewards resource/comp resource	1.00	209,476	45,982	255,458										
483					MMIS / SPACES liaison	1.00	127,726	127,726	255,452										
484					myAvatar System Recovery		25,000		25,000										
485					Planning necessary to sunset legacy systems (used for elig pre-SPACES)		3,200,000	4,800,000	8,000,000										
486					Process Automation for SIS Assessment		50,000		50,000										
487					Retire Legacy Inpatient EHR System (AIMS)		1,000,000		1,000,000										
488					Retire Legacy Outpatient EHR System (ROAP)		1,000,000		1,000,000										
489					SIS Assessment - 2nd addition		200,000		200,000										
490					System analysts to support Therap and interfaces (Aging and DD)	2.00	236,516	236,516	473,032										

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4					Fully funded requests in EBR	Total additional request to EBR													
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6					Additional Amendments added during Committee Work														
7					23 -25 Executive Budget Recommendation (EBR)				23 - 25 Senate Budget				Difference 23-25 Senate to EBR						
8					FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total	FTE Positions	General Fund	Other Funds	Total			
491					Child Care R&R database (SPO-required re-procurement WLS)	15,000	-	15,000											
492					Early Childhood QRIS / Workforce Registry (SPO required re-procurement Insight)	15,000,000	-	15,000,000											
493					HR Payouts	953,418	492,895	1,446,313											
494																			
495					Total Funding of Additional Budget Requests	72.70	71,459,652	59,860,136	131,319,788										
496																			
497																			
498					Total Funding of Amendments and Additional Requests	72.70	\$ 106,018,652	\$ 59,860,136	\$ 165,878,788										
499																			
500																			
501					2023-2025 SB 2012 Budget including other Requests	2,419.03	\$ 2,096,044,806	\$ 3,518,004,290	\$ 5,614,049,096										
502																			

Adjustments Needed to Engrossed SB 2012

Budget Area	23 -25 Executive Budget Recommendation (EBR)			23 - 25 Senate Budget			Difference 23-25 EBR to Senate		
	General Fund	Other Funds	Total	General Fund	Other Funds	Total	General Fund	Other Funds	Total
Management									
Administration	2,353,162	(2,857)	2,350,305	2,353,162	(361,467)	1,991,695	-	358,610	358,610
Information Technology Services	7,154,347	11,885,615	19,039,962	7,154,347	11,885,615	19,039,962	-	-	-
Total Management	\$ 9,507,509	\$ 11,882,758	\$ 21,390,267	\$ 9,507,509	\$ 11,524,148	\$ 21,031,657	\$ -	\$ 358,610	\$ 358,610
Program & Policy									
Economic Assistance	7,474,920	71,408,128	78,883,048	7,689,868	67,875,420	75,565,288	(214,948)	3,532,708	3,317,760
Child Support	89,676	(810,974)	(721,298)	51,381	(847,850)	(796,469)	38,295	36,876	75,171
Medical Services	11,192,893	(3,534,736)	7,658,157	9,733,038	360,211	10,093,249	1,459,855	(3,894,947)	(2,435,092)
DD Council		70,974	70,974	-	70,967	70,967	-	7	7
Aging Services	590,655	8,414,390	9,005,045	915,153	8,281,650	9,196,803	(324,498)	132,740	(191,758)
Children and Family Services	7,538,339	2,870,913	10,409,252	7,735,850	2,737,776	10,473,626	(197,511)	133,137	(64,374)
Behavioral Health Division	191,745	(2,479,500)	(2,287,755)	220,705	(2,496,747)	(2,276,042)	(28,960)	17,247	(11,713)
Vocational Rehabilitation	361,265	1,822,770	2,184,035	425,752	1,757,792	2,183,544	(64,487)	64,978	491
Developmental Disabilities	(4,132,904)	(5,663,220)	(9,796,124)	(4,046,338)	(5,103,134)	(9,149,472)	(86,566)	(560,086)	(646,652)
Disability Determination Services		284,045	284,045	-	236,892	236,892	-	47,153	47,153
Refugee Services		4,097,492	4,097,492	-	4,097,463	4,097,463	-	29	29
Early Childhood Division	21,938	(828,886)	(806,948)	132,436	(810,984)	(678,548)	(110,498)	(17,902)	(128,400)
Total Program & Policy	\$ 23,328,527	\$ 75,651,396	\$ 98,979,923	\$ 22,857,845	\$ 76,159,456	\$ 99,017,301	\$ 470,682	\$ (508,060)	\$ (37,378)
Human Service Centers									
Human Service Centers	828,956	2,176,151	3,005,107	(4,836,389)	1,623,351	(3,213,038)	5,665,345	552,800	6,218,145
Total Human Service Centers	\$ 828,956	\$ 2,176,151	\$ 3,005,107	\$ (4,836,389)	\$ 1,623,351	\$ (3,213,038)	\$ 5,665,345	\$ 552,800	\$ 6,218,145
Institutions									
State Hospital	1,164,508	211,800	1,376,308	7,614,833	764,602	8,379,435	(6,450,325)	(552,802)	(7,003,127)
Life Skills and Transition Center	2,586,559	5,050,437	7,636,996	2,586,559	5,050,437	7,636,996	-	-	-
Total Institutions	\$ 3,751,067	\$ 5,262,237	\$ 9,013,304	\$ 10,201,392	\$ 5,815,039	\$ 16,016,431	\$ (6,450,325)	\$ (552,802)	\$ (7,003,127)
Human Service Zones	\$ 21,446	\$ 446,522	\$ 467,968	\$ 18,434	\$ 1,240,493	\$ 1,258,927	\$ 3,012	\$ (793,971)	\$ (790,959)
Total SB2012	\$ 37,437,505	\$ 95,419,064	\$ 132,856,569	\$ 37,748,791	\$ 96,362,487	\$ 134,111,278	\$ (311,286)	\$ (943,423)	\$ (1,254,709)

**ENGROSSED SB2012
NEW FTE REQUEST SUMMARY**

Section	Current Budget FTE 2021-2023	HHS Decision Package Request	Executive Budget Request Approved	Senate Changes	Net Changes in Engrossed SB 2012	Engrossed SB2012 Temp to FTE	Total Temp	General Temp	Other Temp	Engrossed SB2012 - New FTE	Total New	General New	Other New
ADMINISTRATION-SUPPORT	112.40	20.00	6.50	(5.00)	1.50	1.00	47,580	39,016	8,564	0.50	99,712	81,766	17,946
ECONOMIC ASSISTANCE	49.80	1.00											
CHILD SUPPORT	161.20				-								
MEDICAL SERVICES	90.50	16.00	3.00	(1.00)	2.00					2.00	315,637	48,642	266,995
DD COUNCIL	1.00				-								
AGING SERVICES	45.70	22.20	15.00	(10.00)	5.00	2.00	71,956	71,956		3.00	351,648	175,824	175,824
CHILDREN AND FAMILY SERVICES	33.00		4.00	(4.00)	-								
BEHAVIORAL HEALTH DIVISION	37.00	5.00	2.00		2.00	1.00	34,674	34,674		1.00	189,272	189,272	
VOCATIONAL REHABILITATION	85.00	1.00			-								
DEVELOPMENTAL DISABILITIES	127.12	12.00	4.00	(2.00)	2.00					2.00	380,940	190,470	190,470
DISABILITY DETERMINATION SRVCS	23.00				-								
REFUGEE SERVICES	4.00	2.00			-								
EARLY CHILDHOOD	19.00		2.00	(1.00)	1.00					1.00	236,905	236,905	
STATE-WIDE HSC MANAGEMENT*	11.00	2.00	2.00	24.00	26.00					26.00	10,180,891	10,180,891	
NORTHWEST HSC	35.05	6.00	4.00		4.00	2.00	195,862	195,862		2.00	450,603	450,603	
NORTH CENTRAL HSC	93.70	4.50	3.50		3.50	3.50	311,377	311,377					
LAKE REGION HSC	44.50	7.00	2.00		2.00	2.00	195,862	195,862					
NORTHEAST HSC	105.10	11.00	6.00		6.00	6.00	296,185	296,185					
SOUTHEAST HSC	133.90	26.50	18.00		18.00	18.00	587,074	587,074					
SOUTH CENTRAL HSC	56.00	8.00	4.00		4.00	4.00	280,038	280,038					
WEST CENTRAL HSC	92.00	19.00	7.00		7.00	7.00	455,542	455,542					
BADLANDS HSC	59.00	4.00	3.00		3.00	2.00	195,862	195,862		1.00	265,445	265,445	
STATE HOSPITAL	319.52				-								
LIFE SKILLS & TRANSITION CNTR	303.34				-								
HUMAN SERVICE ZONE FUND (457)	156.00			7.00	7.00					7.00			1,102,031
Total DHS	2,265.33	167.20	81.00	13.00	94.00	48.50	2,672,012	2,663,448	8,564	45.50	12,471,053	11,819,818	1,753,266
PUBLIC HEALTH	210.50	33.00	5.00		5.00	5.00	115,102	65,094	50,008				
Grand Total HHS	2,475.83	200.20	86.00	13.00	99.00	53.50	2,787,114	2,728,542	58,572	45.50	12,471,053	11,819,818	1,753,266

Human Service Zone Fund (457) FTE Transfer Requests
(Funding Source Change from HSZ Fund to General Fund)

	Transfer Request in EBR	Senate Change	Net Changes in Engrossed SB 2012
Aging (HCBS Case Managers)	67.00	(67.00)	-
Early Childhood Services	26.00	(26.00)	-
Administration	5.00	(5.00)	-
Human Service Zone Fund	(98.00)	98.00	-

Current Vacancies as of March 2023:	261.95
Filled; not yet began employment:	45.8
Employees departed in February:	28
* 24 CCBH positions	

**SALARIES AND BENEFITS BY MAJOR DIVISION
SB 2012 & HB 1004**

Division	Base	Enhancements	Total	Salary Increase*	Equity	Grand Total
MANAGEMENT	\$ 27,413,848	\$ 4,429,670	\$ 31,843,518	\$ 486,204	\$ 9,405,000	\$ 41,734,722
PROGRAM AND POLICY	121,917,110	19,701,397	141,618,507	1,974,615		143,593,122
PUBLIC HEALTH DIVISION	37,201,358	17,340,323	54,541,681	550,292		55,091,973
HUMAN SERVICE CENTERS	121,419,280	18,166,186	139,585,465	3,974,293		143,559,758
STATE HOSPITAL	66,842,164	9,481,846	76,324,010			76,324,010
LIFE SKILLS & TRANSITION CNTR	40,600,567	14,326,246	54,926,812			54,926,812
HUMAN SERVICE ZONES	26,977,885	5,550,431	32,528,316	520,997		33,049,313
General Fund	\$ 252,211,672	\$ 28,212,915	\$ 280,424,587	\$ 4,309,045	\$ 6,160,091	\$ 290,893,723
Federal Funds	145,185,786	37,324,702	182,510,488		3,244,909	185,755,397
Other Funds	44,974,752	23,458,481	68,433,234	3,197,356	-	71,630,590
Total Funds	\$ 442,372,211	\$ 88,996,098	\$ 531,368,309	\$ 7,506,401	\$ 9,405,000	\$ 548,279,710

Other Additions	Base	Enhancements	Total	Salary Increase	Equity	Grand Total
Zone Employees *		\$ 161,644,201	\$ 161,644,201	\$ 2,094,767	\$ 3,500,000	\$ 167,238,968
HSC Salary Cost to continue		12,141,979	12,141,979	-		12,141,979
State Hospital Cost to continue		5,313,428	5,313,428	-		5,313,428
General Fund	\$ -	\$ 17,455,407	\$ 17,455,407			\$ 17,455,407
Federal Funds	-	-	-			-
Other Funds	-	161,644,201	161,644,201	2,094,767	3,500,000	167,238,968
Total Funds	\$ -	\$ 179,099,608	\$ 179,099,608	\$ 2,094,767	\$ 3,500,000	\$ 184,694,375

*Zone employees are budgeted in grants. If they become state employees, they would be budgeted in salaries.

Total Salaries & Benefits	Base	Enhancements	Total	Salary Increase	Equity	Grand Total
General Fund	\$ 252,211,672	\$ 45,668,322	\$ 297,879,994	\$ 4,309,045	\$ 6,160,091	\$ 308,349,130
Federal Funds	145,185,786	37,324,702	182,510,488	-	3,244,909	185,755,397
Other Funds	44,974,752	185,102,682	230,077,435	5,292,123	3,500,000	238,869,558
Total Funds	\$ 442,372,211	\$ 268,095,706	\$ 710,467,917	\$ 9,601,168	\$ 12,905,000	\$ 732,974,085

*This moves the 4/4 salary increase to 6/4

**Engrossed SB 2012
UNDERFUNDING AND OPERATING
2023 - 2025**

Type of Underfunding	2023-25 Base Budget	Increase/ (Decrease)	Executive Budget Recommendation	Increase/ (Decrease)	Engrossed SB 2012
Medicaid	(24,130,288)	(24,130,288)	(24,130,288)		(24,130,288)
DHS Operating			-	(19,900,262)	(19,900,262)
Developmental Disabilities	(9,736,312)	(9,736,312)	(9,736,312)		(9,736,312)
Salary - HSC's and State Hospital	(4,468,507)	(4,468,507)	(4,468,507)		(4,468,507)
Information Technology	(3,512,330)	(3,512,330)	(3,512,330)		(3,512,330)
General Fund	(22,648,527)	(22,648,527)	(22,648,527)	(19,900,262)	(42,548,789)
Federal Funds	(19,198,910)	(19,198,910)	(19,198,910)		(19,198,910)
Other Funds			-		-
Total Funds	(41,847,437)	(41,847,437)	(41,847,437)	(19,900,262)	(61,747,699)

Division	2023-25 Base Budget	Increase/ (Decrease)	Executive Budget Recommendation	Increase/ (Decrease)	Engrossed SB 2012
ADMINISTRATION-SUPPORT	9,828,056	31,897,534	41,725,590	(27,507,345)	14,218,245
INFORMATION TECHNOLOGY SERVICES	142,281,293	86,527,632	228,808,925	-	228,808,925
ECONOMIC ASSISTANCE	10,001,932	(215,682)	9,786,250	-	9,786,250
CHILD SUPPORT	3,560,804	(890,045)	2,670,759	-	2,670,759
MEDICAL SERVICES	57,436,270	16,998,496	74,434,766	1,394,018	75,828,784
DD COUNCIL	241,944	(7,164)	234,780	-	234,780
AGING SERVICES	23,449,640	20,987,813	44,437,453	499,081	44,936,534
CHILDREN AND FAMILY SERVICES	6,173,064	115,010	6,288,074	-	6,288,074
BEHAVIORAL HEALTH POLICY	56,684,267	12,074,086	68,758,352	1,769,278	70,527,630
VOCATIONAL REHABILITATION	7,392,388	901,304	8,293,692	-	8,293,692
DEVELOPMENTAL DISABILITIES	8,689,454	2,360,701	11,050,155	1,596,690	12,646,845
DISABILITY DETERMINATION SERVICES	1,368,026	171,113	1,539,138	-	1,539,138
REFUGEE SERVICES	442,363	129,668	572,031	-	572,031
EARLY CHILDHOOD	575,522	10,416	585,938	(93,285)	492,653
HUMAN SERVICE CENTERS	15,641,235	6,414,929	22,056,164	4,962	22,061,126
STATE HOSPITAL	12,740,962	2,755,465	15,496,427	-	15,496,427
LIFE SKILLS & TRANSITION CNTR	8,000,305	1,575,785	9,576,090	-	9,576,090
HUMAN SERVICE ZONES	4,188,890	(3,720,080)	468,810	1,362,785	1,831,595
General Fund	170,731,660	71,160,420	241,892,080	(25,339,137)	216,552,943
Federal Funds	176,356,593	63,704,364	240,060,957	3,045,558	243,106,515
Other Funds	21,608,161	43,222,196	64,830,357	1,319,762	66,150,120
Total Funds	368,696,414	178,086,980	546,783,394	(20,973,816)	525,809,578

* Of the total Operating costs, 188,197,743 of which 84,421,044 is general fund for service contracts to vendors

IMPACT of INCREASE to PROVIDER INFLATION
 2023 - 2025 Biennium

1% and 1% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
MEDICAL SERVICES	\$ 4,226,015	\$ 5,085,088	\$ 9,311,103
LONG TERM CARE - BASIC CARE*	591,805	277,362	869,167
LONG TERM CARE - HCBS SERVICES*	1,079,871	896,085	1,975,957
DEVELOPMENTAL DISABILITIES DIVISION	5,053,255	5,645,181	10,698,436
REMAINING SERVICES	1,736,420	785,400	2,521,820
TOTAL	\$ 12,687,366	\$ 12,689,116	\$ 25,376,482

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ (11,428,619)	\$ (13,743,595)	\$ (25,172,214)
(1,592,879)	(746,360)	(2,339,239)
(2,908,958)	(2,412,864)	(5,321,822)
(13,599,212)	(15,186,539)	(28,785,751)
(4,676,085)	(2,113,653)	(6,789,738)
\$ (34,205,753)	\$ (34,203,011)	\$ (68,408,764)

2% and 2% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
MEDICAL SERVICES	\$ 8,479,190	\$ 10,203,038	\$ 18,682,228
LONG TERM CARE - BASIC CARE*	1,187,578	556,587	1,744,165
LONG TERM CARE - HCBS SERVICES*	2,166,931	1,798,158	3,965,088
DEVELOPMENTAL DISABILITIES DIVISION	10,140,433	11,328,384	21,468,817
REMAINING SERVICES	3,484,433	1,576,072	5,060,505
TOTAL	\$ 25,458,564	\$ 25,462,239	\$ 50,920,803

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ (7,175,444)	\$ (8,625,645)	\$ (15,801,089)
(997,106)	(467,134)	(1,464,241)
(1,821,898)	(1,510,792)	(3,332,691)
(8,512,034)	(9,503,336)	(18,015,370)
(2,928,072)	(1,322,981)	(4,251,053)
\$ (21,434,555)	\$ (21,429,888)	\$ (42,864,443)

3% and 2% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
MEDICAL SERVICES	\$ 11,360,716	\$ 13,661,439	\$ 25,022,155
LONG TERM CARE - BASIC CARE*	1,582,959	741,701	2,324,660
LONG TERM CARE - HCBS SERVICES*	2,890,987	2,397,898	5,288,885
DEVELOPMENTAL DISABILITIES DIVISION	13,514,402	15,091,485	28,605,887
REMAINING SERVICES	4,647,108	2,100,471	6,747,579
TOTAL	\$ 33,996,172	\$ 33,992,994	\$ 67,989,166

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ (4,293,918)	\$ (5,167,244)	\$ (9,461,162)
(601,725)	(282,020)	(883,746)
(1,097,842)	(911,052)	(2,008,894)
(5,138,065)	(5,740,235)	(10,878,300)
(1,765,397)	(798,582)	(2,563,979)
\$ (12,896,947)	\$ (12,899,133)	\$ (25,796,081)

3% and 3% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
MEDICAL SERVICES	\$ 12,759,528	\$ 15,353,851	\$ 28,113,379
LONG TERM CARE - BASIC CARE*	1,787,319	837,676	2,624,995
LONG TERM CARE - HCBS SERVICES*	3,261,178	2,706,217	5,967,395
DEVELOPMENTAL DISABILITIES DIVISION	15,261,536	17,049,609	32,311,145
REMAINING SERVICES	5,244,034	2,372,017	7,616,051
TOTAL	\$ 38,313,595	\$ 38,319,370	\$ 76,632,965

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ (2,895,106)	\$ (3,474,832)	\$ (6,369,938)
(397,365)	(186,045)	(583,411)
(727,651)	(602,733)	(1,330,384)
(3,390,931)	(3,782,111)	(7,173,042)
(1,168,471)	(527,036)	(1,695,507)
\$ (8,579,524)	\$ (8,572,757)	\$ (17,152,281)

4% and 3% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
MEDICAL SERVICES	\$ 15,654,634	\$ 18,828,683	\$ 34,483,317
LONG TERM CARE - BASIC CARE*	2,184,684	1,023,721	3,208,406
LONG TERM CARE - HCBS SERVICES*	3,988,829	3,308,950	7,297,779
DEVELOPMENTAL DISABILITIES DIVISION	18,652,467	20,831,720	39,484,187
REMAINING SERVICES	6,412,505	2,899,053	9,311,558
TOTAL	\$ 46,893,119	\$ 46,892,127	\$ 93,785,247

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ -	\$ -	\$ -
-	-	-
-	-	-
-	-	-
-	-	-
\$ -	\$ -	\$ -

4% and 4% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
MEDICAL SERVICES	\$ 17,067,027	\$ 20,537,526	\$ 37,604,553
LONG TERM CARE - BASIC CARE*	2,391,028	1,120,629	3,511,657
LONG TERM CARE - HCBS SERVICES*	4,362,614	3,620,263	7,982,877
DEVELOPMENTAL DISABILITIES DIVISION	20,416,563	22,808,856	43,225,419
REMAINING SERVICES	7,015,228	3,173,235	10,188,463
TOTAL	\$ 51,252,460	\$ 51,260,508	\$ 102,512,969

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ 1,412,393	\$ 1,708,843	\$ 3,121,236
206,344	96,907	303,251
373,785	311,313	685,098
1,764,096	1,977,136	3,741,232
602,723	274,182	876,905
\$ 4,359,341	\$ 4,368,381	\$ 8,727,722

*Long Term Care cost to continue includes an inflationary estimate based on the skilled market index for skilled nursing facilities, therefore nursing facilities are not included in the calculation.

IMPACT of INCREASE to PROVIDER INFLATION
 2023 - 2025 Biennium

IMPACT of INFLATIONARY INCREASE to DEVELOPMENTAL DISABILITIES RATES

INCREASE FROM THE LEGISLATIVE BASE			
SCENARIO	GENERAL	OTHER	TOTAL
Exec. Recommendation (EBR)			
Year 1 - 4% Year 2 - 3%	\$ 18,652,467	\$ 20,831,720	\$ 39,484,187
Year 1 - 4% Year 2 - 4%	20,416,563	22,808,856	43,225,419
Year 1 - 5% Year 2 - 4%	23,824,457	26,609,978	50,434,435
Year 1 - 6% Year 2 - 4%	27,232,351	30,411,100	57,643,451
Year 1 - 7% Year 2 - 4%	30,640,244	34,212,222	64,852,467
NDCP 11% amendment			
Year 1 - 15% Year 2 - 4%	57,903,394	64,621,199	122,524,593

INCREASE FROM THE EXECUTIVE BUDGET RECOMMENDATION		
GENERAL	OTHER	TOTAL
\$ -	\$ -	\$ -
1,764,097	1,977,136	3,741,232
5,171,990	5,778,258	10,950,248
8,579,884	9,579,380	18,159,264
11,987,778	13,380,502	25,368,280
39,250,927	43,789,479	83,040,406

IMPACT of INFLATIONARY INCREASE to PROSPECTIVE PAYMENT SYSTEM (PPS) HOSPITALS

1% and 1% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
NET INPATIENT HOSPITAL	\$ 1,522,647	\$ 1,463,523	\$ 2,986,170
NET OUTPATIENT HOSPITAL	502,883	604,346	1,107,229
TOTAL	\$ 2,025,530	\$ 2,067,869	\$ 4,093,399

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ (4,130,034)	\$ (3,969,052)	\$ (8,099,086)
(1,364,215)	(1,638,699)	(3,002,914)
\$ (5,494,249)	\$ (5,607,751)	\$ (11,102,000)

2% and 2% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
NET INPATIENT HOSPITAL	\$ 3,054,814	\$ 2,936,209	\$ 5,991,023
NET OUTPATIENT HOSPITAL	1,008,906	1,212,482	2,221,388
TOTAL	\$ 4,063,720	\$ 4,148,691	\$ 8,212,411

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ (2,597,867)	\$ (2,496,366)	\$ (5,094,233)
(858,192)	(1,030,563)	(1,888,755)
\$ (3,456,058)	\$ (3,526,929)	\$ (6,982,988)

3% and 2% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
NET INPATIENT HOSPITAL	\$ 4,106,234	\$ 3,946,144	\$ 8,052,378
NET OUTPATIENT HOSPITAL	1,356,365	1,629,224	2,985,589
TOTAL	\$ 5,462,599	\$ 5,575,368	\$ 11,037,967

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ (1,546,446)	\$ (1,486,431)	\$ (3,032,878)
(510,733)	(613,821)	(1,124,554)
\$ (2,057,179)	\$ (2,100,252)	\$ (4,157,432)

3% and 3% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
NET INPATIENT HOSPITAL	\$ 4,596,500	\$ 4,418,059	\$ 9,014,559
NET OUTPATIENT HOSPITAL	1,518,069	1,824,408	3,342,477
TOTAL	\$ 6,114,570	\$ 6,242,466	\$ 12,357,036

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ (1,056,181)	\$ (1,014,516)	\$ (2,070,697)
(349,028)	(418,638)	(767,666)
\$ (1,405,209)	\$ (1,433,154)	\$ (2,838,363)

4% and 3% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
NET INPATIENT HOSPITAL	\$ 5,652,681	\$ 5,432,575	\$ 11,085,256
NET OUTPATIENT HOSPITAL	1,867,098	2,243,045	4,110,143
TOTAL	\$ 7,519,779	\$ 7,675,620	\$ 15,195,399

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ -	\$ -	\$ -
-	-	-
\$ -	\$ -	\$ -

4% and 4% Provider Rate Increase			
DIVISION	GENERAL	OTHER	TOTAL
NET INPATIENT HOSPITAL	\$ 6,147,706	\$ 5,909,072	\$ 12,056,778
NET OUTPATIENT HOSPITAL	2,030,372	2,440,123	4,470,496
TOTAL	\$ 8,178,079	\$ 8,349,195	\$ 16,527,274

Difference from the Executive Budget Request		
GENERAL	OTHER	TOTAL
\$ 495,026	\$ 476,497	\$ 971,523
163,274	197,078	360,353
\$ 658,300	\$ 673,575	\$ 1,331,875

Another day, another \$1.3 Million. ND will spend \$1.3 Million a day on Medicaid Expansion in the 2023-2025 biennium budget.

- ND spends \$3.560 Billion on Medicaid. \$3.560 Billion in the 2023-2025 biennium budget is **20% of the State of North Dakota's \$8 Billion health spend.** (Source: CMS | *National Health Expenditures*)
- **ND is in the top tier of states** for Medicaid physician pay rates. (Source: Kaiser | *Medicare to Medicaid Fee Index*)
- **ND ranks highest in Medicaid Expansion** annual per capita expenditures. (Source: *Medicaid.gov*)
- ND Medicaid **Expansion currently covers 35,000 North Dakotans** or 4.4 percent of the State's 800,000 citizens. It is one revenue source for medical providers.
- **Medicaid Expansion participants will receive the same benefits and services,** regardless of changes to budget or provider rates.
- Traditional Medicaid helps pay for medical services for qualifying low-income adults, children, pregnant women, older adults and people with disabilities. Traditional Medicaid has different federal poverty levels (FPL) depending on which category an individual qualifies for.
- Medicaid Expansion is available to qualifying low-income individuals between 19-64 with household incomes up to 138% of the federal poverty level (FPL), which is an annual income of \$20,121 for a household of one and \$27,214 for a household of two.

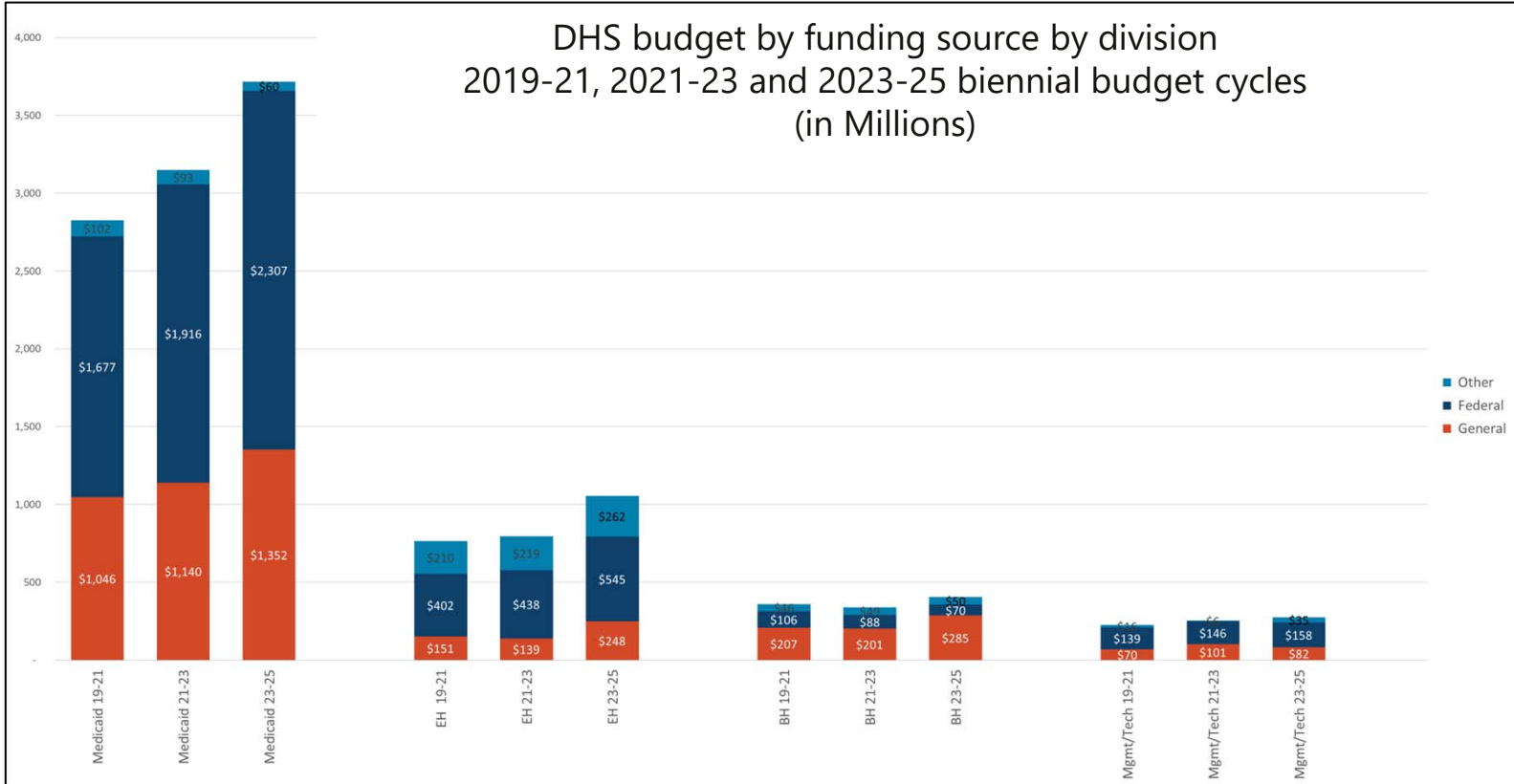
Most supplemental payments are funded by state-based hospital taxes, which can be up to 6% of total revenue.

- Supplemental payments are additional payments to providers to provide financial support and are not made in exchange for services to Medicaid participants.
- Most hospital supplemental payments are funded by state-based hospital taxes, which can be up to 6% of total revenue. (Source: *Title 42 Code of Federal Regulations*)
- CMS requires that state hospital taxes be broad based, uniformly imposed and that all hospitals pay the tax. Taxes may negatively impact some hospitals because while all are required to pay the tax, some may not receive a supplement payment. (Source: Kaiser | *States and Medicaid Provider Taxes or Fees*)
- ND Medicaid's total supplement payment amount in 2021 was \$1.4M. (Source: *Medicaid and CHIP Payment and Access Commission | Annual-Analysis-of-Disproportionate-Share-Hospital-Allotments-to-States*)

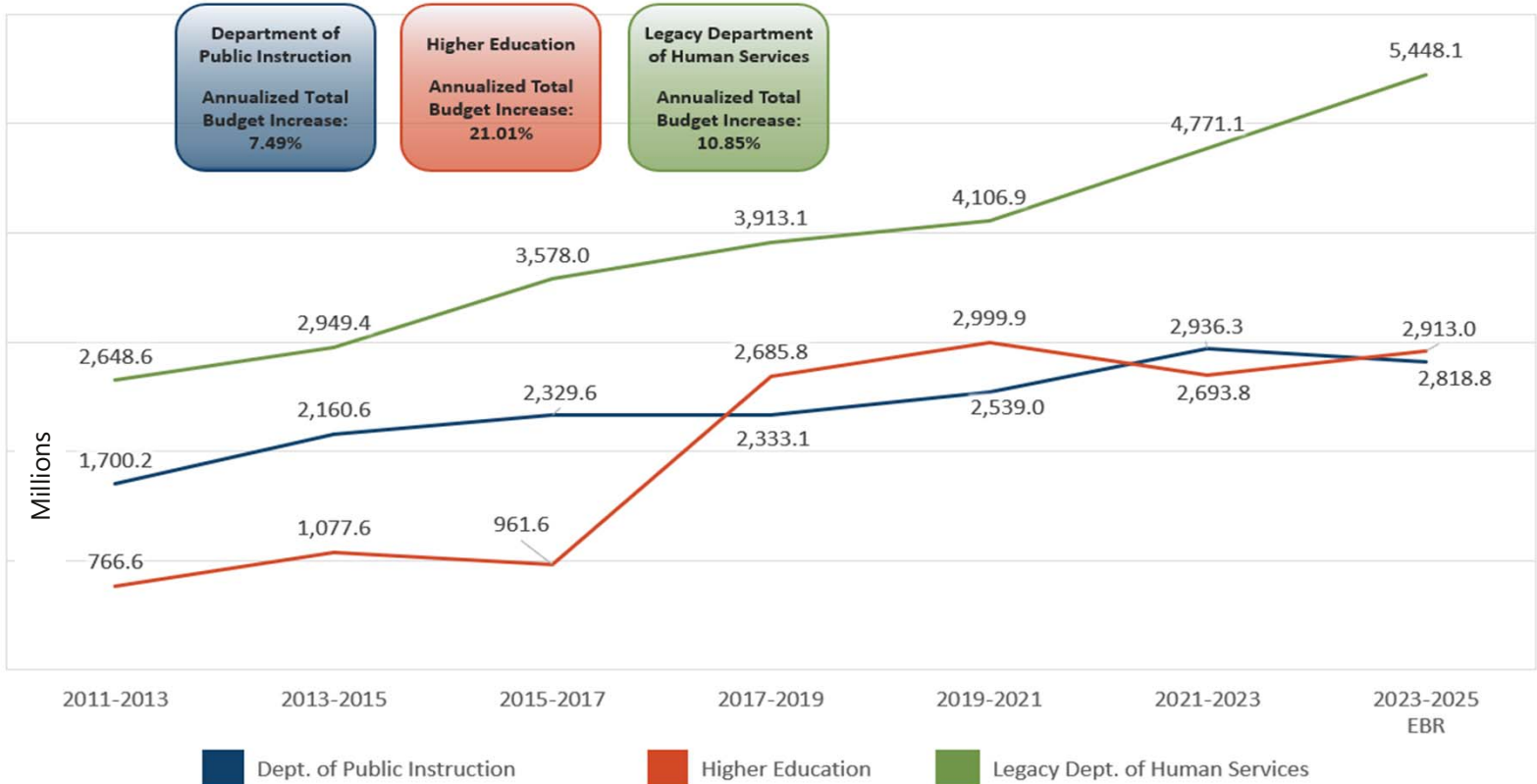
ND Medicaid Budget

Information Brief

Medicaid, long-term care and developmental disability **represent 64% of SB 2012 budget** for the 2023-25 biennium.



Reducing the Medicaid Expansion budget will help bend the curve on budget increases.



Engrossed SB 2012 Medicaid Expansion Budget Option 1

Information Brief

Component A General Fund savings: \$11 Million

Where do the savings come from?

- Reduces Expansion budget estimate by **\$11 Million** based on current utilization information.
- Impacts HHS only.

Description	General Fund	Other Funds	Total Funds	Average Cost of Premiums per Month	Change in Premiums from EBR	Average Number of Premiums per Month
Executive Budget Request (EBR) - Managed Care Expansion	\$94,255,028	\$848,295,256	\$942,550,284	\$1,320.01	0%	29,752
Budget Estimate Update (Reduction) - 24 month impact	(11,075,387)	(99,678,486)	(110,753,873)			
Managed Care Expansion Budget After Reassessment	\$83,179,641	\$748,616,770	\$831,796,411	\$1,164.92	-12%	29,752

Component B General Fund savings: \$25 Million

Where do the savings come from?

- Aligns Expansion rates with Medicaid Traditional reimbursement rates for an additional **\$25 Million**.
- Impacts HHS, Blue Cross Blue Shield of ND and Providers.
- No change to benefits or services provided to ND Medicaid Expansion participants.
- These funds may be reallocated to other needed programs and services, such as Behavioral Health.

Managed Care Expansion Budget After Reassessment	\$83,179,641	\$748,616,770	\$831,796,411	\$1,164.92	-12%	29,752
Managed Care Expansion Reimbursement at Traditional Rate (Reduction) - 18 month impact	(25,475,752)	(229,281,767)	(254,757,519)			
Managed Care Expansion Budget at Traditional Rates	\$57,703,889	\$519,335,003	\$577,038,892	\$808.13	-39%	29,752

Medicaid Expansion Budget Option 1

➤ **Total General Fund savings: \$36 Million** (\$11M + \$25M)

Engrossed SB 2012 Medicaid Expansion Budget Option 2

Information Brief

Component A General Fund savings: \$11 Million

Where do the savings come from?

- Reduces Expansion budget estimate by **\$11 Million** based on current utilization information.
- Impacts HHS only.

Description	General Fund	Other Funds	Total Funds	Average Cost of Premiums per Month	Change in Premiums from EBR	Average Number of Premiums per Month
Executive Budget Request (EBR) - Managed Care Expansion	\$94,255,028	\$848,295,256	\$942,550,284	\$1,320.01	0%	29,752
Budget Estimate Update (Reduction) - 24 month impact	(11,075,387)	(99,678,486)	(110,753,873)			
Managed Care Expansion Budget After Reassessment	\$83,179,641	\$748,616,770	\$831,796,411	\$1,164.92	-12%	29,752

Component B General Fund savings: \$17 Million

Where do the savings come from?

- Aligns Expansion rates **with 125%** of Medicaid Traditional reimbursement rates for an additional **\$17 Million**.
- Impacts HHS, Blue Cross Blue Shield of ND and Providers.
- No change to benefits or services provided to ND Medicaid Expansion participants.
- These funds may be reallocated to other needed programs and services, such as Behavioral Health.

Managed Care Expansion Budget After Reassessment	\$83,179,641	\$748,616,770	\$831,796,411	\$1,164.92	-12%	29,752
Managed Care Expansion Reimbursement at 125% Traditional Rate (Reduction) - 18 month impact	(17,114,813)	(154,033,318)	(171,148,131)			
Managed Care Expansion Budget at 125% of Traditional Rates	\$66,064,828	\$594,583,452	\$660,648,280	\$925.23	-30%	29,752

Medicaid Expansion Budget Option 2

➤ **Total General Fund savings: \$28 Million (\$11M + \$17M)**

What are the impacts of reducing the Medicaid Expansion budget?

Impacts to ND Medicaid Expansion participants

- **No impact to Medicaid Expansion participants.** Medicaid Expansion benefits and services remain the same.
- Some Medicaid Expansion providers could choose to not contract with the managed care organization.
- Currently, ND Medicaid provider networks are strong with provider coverage and access across the state.

Impact to Providers

- It will take 6 months to implement, with 18 months of impact to providers.
- For Option 1: Medicaid Expansion providers will experience an approximate 40% rate reduction on 35,000 Medicaid Expansion participants, which represent 4.4% of the state's 800,000 population. For Option 2: Medicaid Expansion providers will experience an approximate 30% rate reduction.
- **Developmental Disability providers will not be impacted** by a reduction to the Medicaid Expansion budget.
- Long-term care providers will not be impacted.
- Traditional Medicaid will not be impacted. Traditional Medicaid covers 100,000 North Dakotans or 12% of ND's population.

Impacts to ND's medical industry

- ND will move toward more sustainable health care cost growth. By comparison, ND pays more for Medicaid Expansion provider rates than any other state.
- As Medicaid provider rates increase, pressure is put on the commercial side to increase rates to align pricing. Reducing the Medicaid Expansion budget will help mitigate continued increases in health care costs for all North Dakotans.
- In 2019, ND's medical industry spending was \$8 Billion. Budget option 1 will take out \$254M, which is a 3% reduction in total industry spending. Budget option 2 will take out \$171M, which is a 2% reduction.

According to the ND Hospital and Insurance Study, hospitals, commercial, Medicare and Medicaid revenue appears to be showing sizable growth.

North Dakota Hospital and Insurance Study Highlights

The study was led by former Illinois Insurance Commissioner Jennifer Hammer, former Wisconsin Deputy Commissioner J.P. Wieske, and former CBO and current Horizon Government Affairs Economist Jeff Lemieux.

The study highlighted a number of important issues in the North Dakota Hospital market including:

- **Hospital Utilization.** North Dakota has seen an increase in hospital usage. North Dakota Hospitals are seeing longer hospital stays than the national average, and utilization is growing faster in North Dakota than most of the rest of the country.
- **Hospital Expenses.** Hospital Expenses are ranking higher than the national average (usually top 5) and continuing to grow at higher than national average rates (also top 5 rankings)
- **Hospital Operating Revenue.** North Dakota hospitals are seeing high revenue and high revenue growth.
- **Medicare Revenue.** Medicare revenue is also very high and growing for North Dakota Hospitals
- **Hospital Reimbursement.** Private hospital reimbursement based on Medicare rates grew from 170 percent of Medicare in 2010 to over 200 percent of Medicare in 2018.
- **Acute Care vs. Critical Access Hospitals.** Critical access hospitals appear to be reimbursed at a much lower rate (149% of Medicare) than acute care hospital (211% of Medicare)
- **Premiums.** North Dakota premiums are largely average as compared to national average.
- **Claims.** Insurer claims are averaging slightly higher than the national average and are growing at higher than the national average.
- **Administrative costs.** Insurer administrative expenses remain low, but the administrative expenses are growing at a very fast rate.

The data clearly shows a number of warning signs in the North Dakota market. For the Hospitals, Commercial, Medicare, and Medicaid revenue appears to be showing sizable growth. Hospitals appear to be offering more services and longer stays. In health insurance, administrative costs have grown substantially - though still generally at or below the national average. These trends bear watching. In chart below, we pull out a number of important measures that policymakers should pay attention to.

According to the ND Hospital and Insurance Study, hospitals, commercial, Medicare and Medicaid revenue appears to be showing sizable growth.

North Dakota Measure	50-State Comparison
<p>Hospital Revenue and Expense Growth 7.5 - 8% Per Year (Table 2)</p> <p>Much higher than any measure of inflation, wage or economic growth.</p>	<p>3rd Highest Growth in hospital expenses in the U.S. (Table 18)</p> <ul style="list-style-type: none"> 84% growth during the 2010-2017 period. Average yearly growth of 7.9%. North Dakota ranks 3rd in growth of expenses.
<p>Commercial payments to hospitals rose from 170% of Medicare to 207% of Medicare (Table 9)</p>	<p>7th Highest commercial payment rate to hospitals (Table 24)</p> <p>4th Highest growth of hospital revenues (Tables 20 & 21)</p> <p>Commercial payment rates relative to Medicare ranks North Dakota 7th in the US (Table 24)</p> <p>Ranked 4th in annual growth of revenues. Growing at 7.4% annually (Table 20 & 21)</p>
<p>Patient hospital utilization grew 1 - 2% (Table 1)</p>	<p>Inpatient hospital days grew in North Dakota while nationally they declined. (Table 13)</p> <p>3rd Highest Length of hospital stay in the country (Table 15)</p> <p>Inpatient days are growing (1.3%) while nationally they are shrinking (-0.3%). (Table 13)</p> <p>Length of stay is high (3rd in US) and is growing faster than the rest of the country (1.6% to 0.4%) (Table 15)</p>
<p>Salaries Rose 4% per year Expenses rose 3% per year (Table 5 & 6)</p>	<p>8th Highest average hospital salaries in the nation (Table 22)</p>

From ND Insurance Commissioner Jon Godfred's testimony to House Appropriation's – Human Resources Division, April 5, 2023.

THE FMAP

The Federal Medical Assistance Percentage

WHAT IS THE FMAP?

The Federal Medical Assistance Percentage (FMAP) rates are used in determining the amount of federal matching funds for state expenditures for assistance payments for certain social services, and state medical and medical insurance expenditures.

AT HHS, THESE RATES APPLY TO:



Traditional Medicaid Services



Long-Term Care Services*



Medicaid Wavier Services**



Child Welfare/ IV-E Foster Care & Subsidized Adoption

*Excluding state programs SPED (Service Payments to Elderly and Disabled) and expanded SPED.

**Including Home and Community Based Services, Developmental Disabilities Services and 1915(i) Services.

BY THE NUMBERS

Federal Matching Assistance Percentage (N.D.)

FMAP follows the federal fiscal year from Oct-Sept	Rate
Oct. 1, 2019 - Sept. 30, 2020	50.05%
Oct. 1, 2020 - Sept. 30, 2021	52.40%
Oct. 1, 2021 - Sept. 30, 2022	53.59%
Oct. 1, 2022 - Sept. 30, 2023	51.55%
Oct. 1, 2023 - Sept. 30, 2024	53.82%

COVID FMAP Increase of 6.2% to FMAP	Rate
Jan. 1, 2020 - Sept. 30, 2020	56.25%
Oct. 1, 2020 - Sept. 30, 2021	58.60%
Oct. 1, 2021 - Sept. 30, 2022	59.79%
Oct. 1, 2022 - March 31, 2023***	57.75%

*** The enhanced COVID FMAP will be phased out in 2023. The 2024 FMAP (without an enhancement) will be effective 1/1/2024.

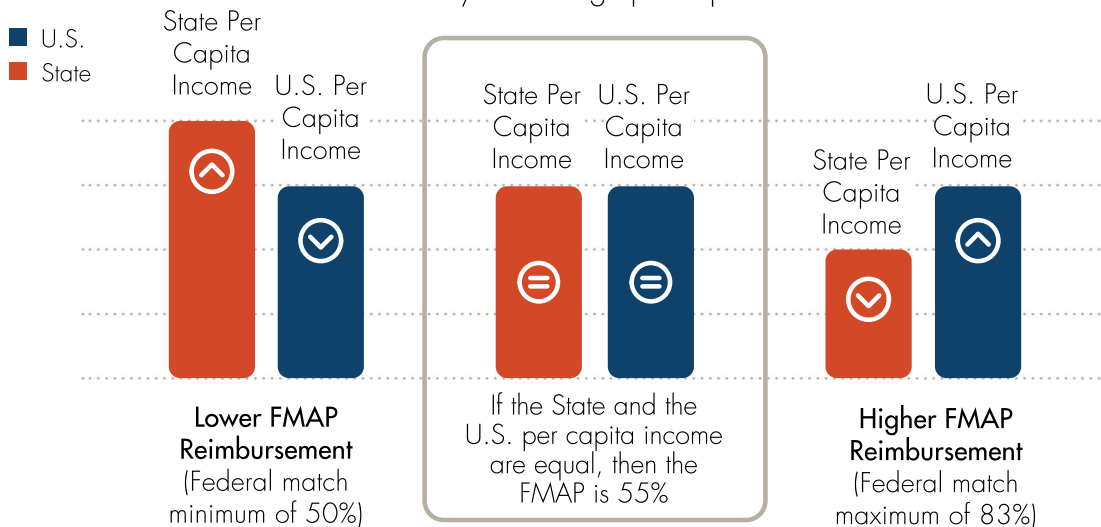
FEDERAL FISCAL YEAR EFFECTIVE DATES EQUAL:



The FMAP is calculated each federal fiscal year and is effective Oct. 1 through Sept. 30 each year.

HOW FMAP WORKS...

The FMAP formula compares a state's three year average per capita income relative to the U.S. three year average per capita income.



Outlier Payment Summary for LSTC to Provider Transitions

Executive Summary on Developmental Disabilities Outlier Payments

- The imminent risk of harm criteria is not required for clients that are transitioning from the LSTC back to community providers. This is done to facilitate the provider in obtaining additional staff hours for the client that results in additional financial compensation to transition the client for the provider.
- This is available for up to 12 months after transition
- After the 12 months Outlier payments are available, must demonstrate need
- An Outlier payment can be requested for all clients in DD anytime

See specific sections of the Development Disabilities Policy below.

Additional questions can be directed to Tina Bay, Director of Developmental Disabilities at 701-328-8966 or tbay@nd.gov

Developmental Disabilities Policy and Specific Related Sections

Here is the link to the complete policy for Developmental Disabilities:

<https://www.hhs.nd.gov/sites/www/files/documents/DHS%20Legacy/outlier-policy.pdf>

If a client's needs exceed the hours identified by the multiplier calculation the client may qualify for an Outlier Request if they meet all four of the following criteria:

1. Meet one of the medical or behavioral qualifiers outlined below;
2. Poses an imminent risk of harm to the health and safety of self and/or others*;
3. Support needs exceed hours identified by the multiplier calculation; and
4. Other mitigation options were pursued and/or implemented prior to a request for additional support hours (i.e. shared staffing, positive reinforcement, environmental change/modification, etc.).

For those transitioning from the LSTC or SH we have removed the requirement of #2 (imminent risk of harm). Page 4 & 5 of the policy contains the language regarding the exception for clients coming from the LSTC or SH.

Life Skills Transition Center (LSTC) or the North Dakota State Hospital (NDSH) qualifiers:

If a client coming from the LSTC or the NDSH **returns to the previous provider**, he/she must have been in the LSTC or the NDSH for a minimum of **6 months** to qualify for consideration as an Outlier Request. This 6-month timeframe is not

Outlier Payment Summary for LSTC to Provider Transitions

applicable for delays in discharge (i.e., time to find staff, obtaining new home, etc.) when the reason for the continued stay is not related to the reason for admission.

If the client is leaving the LSTC or the NDSH and **enrolling with a new provider**, there is **no minimum timeframe**. Clients coming from the LSTC or the NDSH are not required to meet the imminent risk condition. Transitions from the LSTC and NDSH do not automatically qualify for outlier approval. The team will need to **demonstrate how the client's needs are in excess of the approved assessment score hours**.

Requests for outlier consideration may be made at any time after the client leaves the LSTC or the NDSH, but the availability of Outlier Request consideration expires after 12 months (if the request is made two months after leaving the LSTC or the NDSH, it still expires 12 months after leaving the LSTC or the NDSH). After 12 months, the client must meet one of the medical or behavioral qualifiers in order to be considered as an Outlier Request. Clients leaving the LSTC or the NDSH may still qualify for an Outlier Request consideration under one of the other criteria.



Engrossed Senate Bill 2012

House Appropriations – Human Resources Division Committee
Representative Jon Nelson, Chairman

Behavioral Health Division, **Human Service Centers** | March 28, 2023



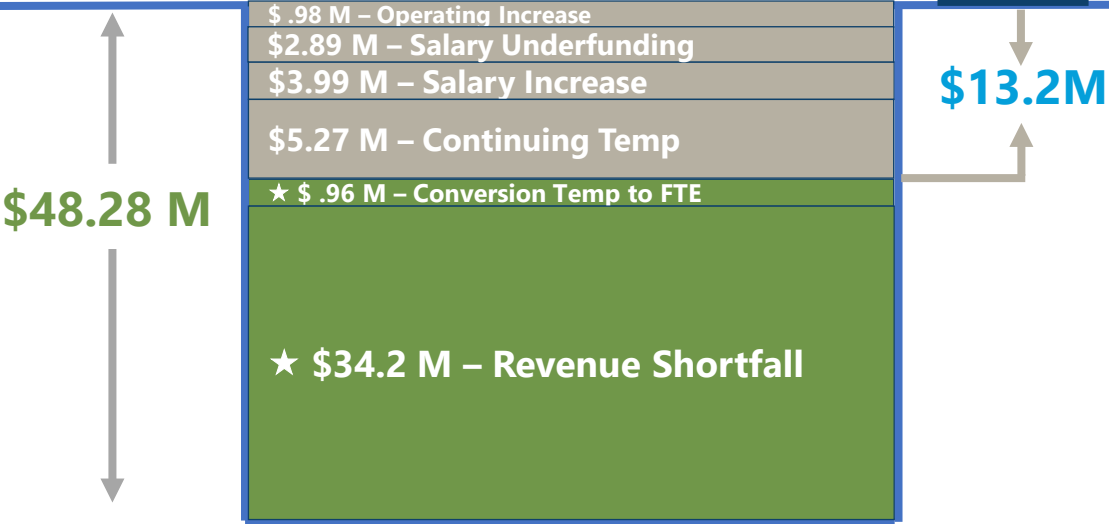
Health & Human Services

Human Service Center

Engrossed Senate Bill 2012



Current State



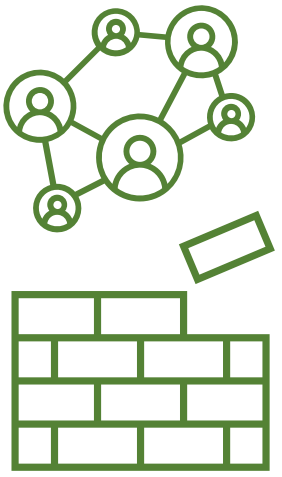
Maintain Current Service Delivery Level (*Cost to Continue*)

RAW	Budgeted amount	Amendment Description	FTE association
335/351	\$34,200,815	Revenue Shortfall	NA
330-334	\$963,377	Conversion of long term temporary staff to FTE	28.5
431	\$976,496	Operating increase for 8 clinics	NA
432	\$3,985,391	Salary Increase for 8 clinics	NA
	\$2,891,071	Salary Underfunding	NA
433	\$5,265,517	Continuing Temporary staff services	NA

Human Service Center

Engrossed Senate Bill 2012

Amendments to Stabilize



★ 3 HSC's to Become CCBHC's – 9.65M

★ Crisis Service: Stabilizing– 8.9 M

Supportive Vendor Proposals

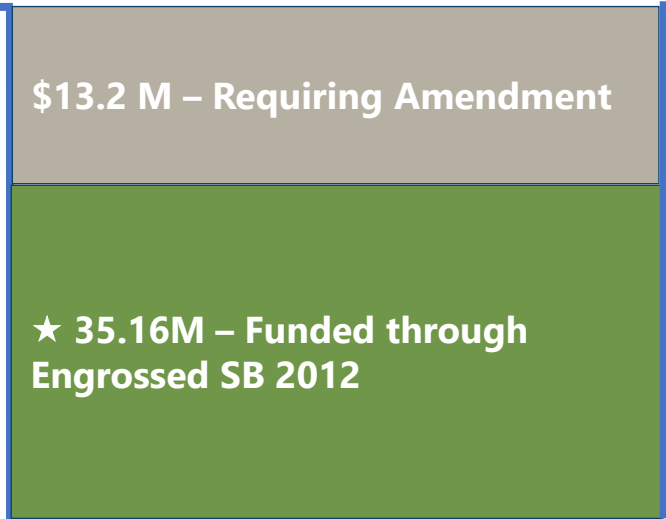


Avel e-Care – 2.6M



Telepsychiatry – 2M

\$48.28 M



Cost to Continue

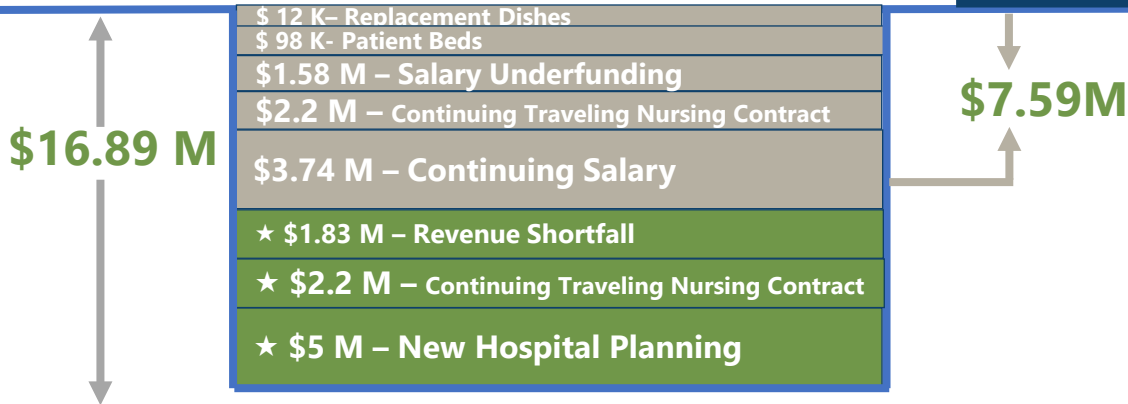
★ Included in Engrossed Senate Bill 2012

Stabilize

RAW	Budgeted amount	Amendment Description	FTE association
324-329	\$8,900,336	Crisis Service Stabilization	21
336	\$9,650,000	3 HSC's to become CCBHC's	24
NA	\$2,600,000	Avel E-Care	NA
NA	\$2,000,000	Telepsychiatry to Jails	NA

North Dakota State Hospital

Engrossed Senate Bill 2012



★ Included in Engrossed Senate Bill 2012

North Dakota State Hospital

Engrossed Senate Bill 2012

RAW	Budgeted amount	Amendment Description
337	\$2,475,200	Locumtenens contract cost changes
338/352	\$1,827,326	Funding for base community behavioral health services thru NDSH
353	\$5,000,000	State Hospital design and construction plans
436	\$1,577,436	Salary underfunding
437	\$3,735,992	Continuing current biennium salary costs to retain staff
438	\$2,162,589	Continuing Worldwide Contract(traveling nursing)
439	\$98,264	Replacement of patient beds
440	\$12,000	Replacement of patient dishware

SB 2149

Funding Need

Need	Proposal	Biennium Cost
Expanding Mobile Crisis Service Beyond 45 Mile Radius	Technology to 47 Acute Care and Critical Access Hospitals for telehealth assessment and support	\$117,500
Expanding Mobile Crisis Service Beyond 45 Mile Radius	6 FTE for expanded service delivery	\$1,250,000
Increasing efficiency, safety, and breadth of crisis service work	Integrate real-time GPS technology between Call Center and Mobile Crisis Team	\$500,000
Increasing call center capacity for 988	Upgrades for call center operating cost needs, and additional part time and full time employees	\$2,009,000.18
		\$3,876,500.18



Engrossed Senate Bill 2012

House Appropriations – Human Resources Division Committee
Representative Jon Nelson, Chairman

Behavioral Health Division, **Human Service Centers** | April 3, 2023

NORTH
Dakota
Be Legendary.

| Health & Human Services

First Engrossed SB 2012

CCBHC

	One Region	Two Regions (Large/Small)	Three Regions (two large, one small)
Budget ask	\$5,500,000	\$7,350,000	\$9,650,000
FTE ask	9	16	24

Costs to cover:

- Assessment
- Consultation
- Health Record requirements
- Contracting with local health care
- Training
- Service delivery costs
- Medical supports
- Transportation assistance

FTE Positions to include:

- Peer Supports
- Case Managers
- Project Director
- Regional Coordinators
- Licensed Addiction Counselors

10 - CHILD CARE

(For Committee's use)

Federal Poverty Limit (FPL) Scenarios Related to SB 2071

Each scenario assumes 18 months of impact.

Total persons expected to be eligible is gradually added through the 18 month period at a cost of \$399 per member per month.

Calculation to increase FPL up to 170%		Calculation to increase FPL up to 175%		Calculation to increase FPL up to 180%	
162% FPL to 170% FPL	139	162% FPL to 175% FPL	228	162% FPL to 180% FPL	317
Total Cost related to Pregnant Women	\$704,235	Total Cost related to Pregnant Women	\$1,137,150	Total Cost related to Pregnant Women	\$1,596,399
System Costs	\$8,800	System Costs	\$8,800	System Costs	\$8,800
Total General	\$333,190	Total General	\$536,661	Total General	\$752,508
Total Federal	\$379,845	Total Federal	\$609,289	Total Federal	\$852,691
Total	\$713,035	Total	\$1,145,950	Total	\$1,605,199
2025-2027 Estimated Cost		2025-2027 Estimated Cost		2025-2027 Estimated Cost	
Total Cost related to Pregnant Women	\$1,331,064	Total Cost related to Pregnant Women	\$2,183,328	Total Cost related to Pregnant Women	\$3,035,592
General	\$625,600	General	\$1,026,164	General	\$1,426,728
Federal	\$705,464	Federal	\$1,157,164	Federal	\$1,608,864
Increase From 2023 -2025 Biennium to 2025-2027 Biennium		Increase From 2023 -2025 Biennium to 2025-2027 Biennium		Increase From 2023 -2025 Biennium to 2025-2027 Biennium	
General	\$294,610	General	\$491,703	General	\$676,420
Federal	\$332,219	Federal	\$554,475	Federal	\$762,773
Total	\$626,829	Total	\$1,046,178	Total	\$1,439,193

12 - AMENDMENTS

(For Committee's use)

13 - OTHER

(For Committee's use)



GLOSSARY OF TERMINOLOGY

North Dakota Health and Human Services

GLOSSARY OF TERMINOLOGY

INTERNAL IDENTIFIERS

The following are commonly used terms referring to the HHS organizational structure:

Business Partner – Team members within the Business Divisions that provide strategic business functions across HHS. These include the Finance Division, Human Resources Division, Communications Division, and Legal Division.

Center of Excellence – A body that provides leadership, best practices, research, support and/or training around a specific focus area across program the Program and Business Divisions. The Department has Centers of Excellence for functions including Project Management, Process Improvement, Change Management, and Quality Management.

Division – Program and policy or business vertical; collection of sections or functions (e.g., Public Health Division, Human Resources Division).

Executive Director – Leader of a Programmatic or Business division within HHS.

Function – Subunit of business division (e.g., External Communications function within the Communications Division, Budget Management function within the Finance Division).

Office of Transformation – A function within the Deputy Commissioner’s Office that is responsible for the improvement of existing workflows or processes in the Department.

Section – A singular subset of a division (e.g., Early Childhood Section, Aging Services Section).

PARTNERS, PROVIDERS AND PEOPLE WE SERVE

The following are commonly used terms referring to the partners, providers, and people we serve:

Basic Care Facility – Licensed residential facility that provides room and board and services to individuals who need health, social, or personal care services but do not require extensive medical services.

Care Coordinator (child welfare) – Case manager in a child and family case involving severe emotional disturbance.

Child Care Provider – Person, group of persons, or agency responsible for the education and supervision of the child/children in their care in exchange for money, goods, or services.

CNA – Certified Nurse Aide. An individual who has successfully complete the requirements for the certified nurse aide training and competency evaluation program to provide nursing services to residents. CNAs must be entered on the Public Health Division nurse aide registry as a certified nurse aide.

Community Health Worker – Members of the communities they live in who work either for pay or as volunteers in association with the local health care system. Community health workers often provide services such as case management, client education, follow-up care, health screening, informal counseling, and more.

Childcare Licensor – Authorized agent responsible for processing childcare licensure applications, completing onsite facility inspections, and issuing licenses as appropriate

CMS – Centers for Medicare & Medicaid Services - Federal agency which oversees Medicare, Medicaid, and the Children's Health Insurance (CHIP).

Eligibility Worker – Person responsible for gathering information and determining whether an individual is eligible to various public assistance programs.

Human Service Centers – There are eight regional human service centers that provide counseling and mental health services, substance abuse treatment, disability services, and other human services to a multi-county area.

Human Service Zones – Local offices in the counties (formerly known as county social service offices) that have professionals on site who can help people who need these services and supports: Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), heating assistance, Medicaid, including children's health services; basic care assistance; child care assistance; in-home and community-based services and supports for elderly and disabled individuals; personal care assistance; child welfare (foster care, child protection services, child care licensing and related services); and referrals to other local resources and programs.

ICF/IID – Intermediate Care Facility for Individuals with Intellectual Disabilities. Institution that provides, in a protected residential setting, evaluation, supervision, coordination, and health/rehabilitative services to individuals with intellectual disabilities to help each individual function at their greatest ability.

Licensed Child Care Providers – Facilities required to maintain at least minimum standards related to physical size of the facility, safety features, cleanliness, staff qualifications, and staff-to-child ratios. See the definitions of the licensed childcare provider categories: licensed family childcare, licensed group childcare, licensed child center, licensed preschools, licensed school-age programs, and multiple license facility. (Unlicensed childcare provider categories include self-declared providers, formerly called "self-certified," approved relative providers, and registered in-home providers).

Licensed Child Care Center – Provider of care for 19 or more children in a facility, depending on usable space and staff-to-child ratio. Children are often grouped by age.

Licensed Family Child Care – Provider of care for seven or fewer (plus two additional school age children) children in a private residence.

Licensed Group Child Care – Provider of care for up to 30 children in a home or other type of facility, depending on usable space and staff-to-child ratio.

Licensed Preschools – Provider of part-time educational and socialization experiences for children aged two years to kindergarten for no more than three hours per day.

Licensed School-Age Programs – Provider of care for 19 or more school-age children when school is not in session.

Life Skills and Transition Center – State-operated, comprehensive support agency serving people with intellectual and developmental disabilities in Grafton.

LPHU – Local Public Health Unit. One of 28 independent units working in partnership with the North Dakota Department of Health to provide personal and population-based health services to residents in their city and/or county jurisdictions.

MCO – Managed Care Organization. Health care company or a health plan that provides for the delivery of health benefits and additional services to Medicaid beneficiaries through contracted arrangements with Medical Services. This contract helps to improve health plan performance, health care quality, and outcomes while reducing Medicaid program costs.

Peer Support Specialist – Person that uses their lived experience to assist others on their journey to recovery and wellness related to recovery from a mental health disorder, substance use disorder, brain injury, or any combination thereof. They work to help others become and stay engaged in the recovery process by using their lived experience, and skills learned in formal Peer Support training.

PRTF – Psychiatric Residential Treatment Facility. One of six facilities that provide children and adolescents with a comprehensive 24-hour therapeutic environment integrating group living, educational services, and a clinical program based upon an interdisciplinary clinical assessment and an individualized treatment plan that meets the needs of the child and family.

Qualified Service Provider (QSP) – Agency or independent contractor that agrees to meet standards for services and operations established by the Department to provide home and community-based long-term care services to older people and individuals with physical or intellectual disabilities.

Registered Providers – Child care providers who are eligible to participate in the Child Care Assistance Program (CCAP) and who are generally registered by tribal entities. These child care providers may be licensed by tribal entities and subject to their licensing criteria but are not licensed by the state.

SNF – Skilled Nursing Facility. A facility which provides inpatient skilled nursing care and related services to patients who require medical, nursing, or rehabilitative services but does not provide the level of care or treatment available in a hospital. SNFs are licensed by the state and certified by the Centers for Medicare & Medicaid Services (CMS) to participate in the Medicare/Medicaid programs.

State Child Protection Team – Multidisciplinary team of staff members from public and private agencies (determined by law) that makes the determination whether child abuse or neglect is indicated in cases of suspected institutional child abuse or neglect.

Self-Declared Child Care Providers – Providers of care for five or fewer children of which no more than three may be under the age of 24 months. These providers are not licensed. They are eligible to participate in the Child Care Assistance Program and the USDA Child and Adult Food Program after meeting some basic training requirements and after a pre-approval inspection.

State Hospital – Hospital that provides short-term acute inpatient psychiatric and substance abuse treatment, intermediate psycho-social rehabilitation services, forensic services, and safety net services for adults. The hospital also provides residential addiction treatment services for adult male and female clients referred to the Tompkins Rehabilitation Center.

Substance Abuse Treatment Provider – Provider who is licensed by the Behavioral Health Division to operate addiction treatment programs.

Substance Exposed Newborn – Infant younger than 28 days of age at the time of the initial report of child abuse or neglect who is identified as being affected by substance abuse or withdrawal symptoms or as having a fetal alcohol spectrum disorder.

Obligee – Person to whom a child support obligation is owed. It may also be an entity to which a child support obligation is owed.

Obligor – Person who is obliged to pay child support.

Partner – Refers to individuals rendering medical care, including physicians, nurse practitioners, physician assistants, and others.

People Served – Previously used to refer to clients, customers, patients.

Provider – Refers to organizations providing health and/or human services to one or more patients.

PROGRAMS AND SERVICES

The following are commonly used terms referring to the programs and services administered by HHS:

CARES – Coalition of over 40 service providers and partners who provide a network of support to Service Members, Veterans, Families, and Survivors. ND CARES attempts to resolve barriers or gaps in services to ensure those serving, who has served, families and survivors receive the behavior health care and assistance they need.

CCAP – Child Care Assistance Program. Program that provides help paying for child care costs to low-income families that are working or participating in education or training activities.

CFS – Children and Family Services Division of the Department. CFS has administrative responsibility for the policies and procedures relating to children and families and is responsible for program supervision and technical assistance for the delivery of public child welfare services.

CHIP – Children’s Health Insurance Program. Comprehensive health coverage for children 18 years of age and younger. To qualify, a child’s family must have a modified adjusted gross income that is greater than the Medicaid eligibility level but does not exceed 175 percent of the federal poverty level.

CPS – Child Protection Services. Services intended to protect the health and welfare of children by encouraging the reporting of children known to be or suspected of being abused or neglected and providing services for the protection and treatment of abused and neglected children to safeguard them from further harm.

Diversion Assistance – Program that provides short-term emergency benefits and services during a “specific crisis or episode of need” for up to four months to families that would otherwise qualify for Temporary Assistance for Needy Families (TANF).

Early Childhood Services (ECS) – Team of Department employees that develops and co-administers the Child Care and Development Fund and reviews and maintains state regulations and policies. ECS supervisors, review and approve licensing studies, issue approved licenses, assess licensing violations, issue appropriate corrective action and supervise licensing specialists. ECS licensing specialists assist potential child care providers through the child care licensing process, conduct child care licensing studies, assess program concerns and work with child care providers to create healthy and safe child care programming.

EA – Economic Assistance. Division of the Department that administers policy for the following programs: Child Care Assistance Program (CCAP), Low Income Home Energy Assistance (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), and Temporary Assistance for Needy Families (TANF), including Diversion Assistance and Job Opportunities and Basic Skills (JOBS). EA policy is also responsible for Alternative to Abortion services, Quality Control/Quality Assurance unit, Policy and System Support unit.

FMAP – Federal Medical Assistance Percentage. Federal matching rate for the Medicaid program. FMAP is evaluated annually on October 1 and is based on the three-year average of North Dakota’s per capita personal income as compared to the three-year average of the national per capita personal income.

Food and Nutrition Services (FNS) – Federal agency of the United States Department of Agriculture that, among other duties, administers the Supplemental Nutrition Assistance Program (SNAP).

FTR – Free Through Recovery. Community based behavioral health program designed to increase recovery support services to individuals involved with the criminal justice system who have behavioral health concerns; administered by the Behavioral Health Division of the Department in partnership with the ND Department of Corrections and Rehabilitation.

GA – General Assistance. County program designed to cover emergency needs of low-income individuals or families. The covered needs may include rent, fuel and utilities, medical, and burial expenses.

HCBS – Home and Community-Based Services. Array of services that are essential and appropriate to sustain people in their homes and communities and to delay or prevent institutional care.

LIHEAP – Low Income Home Energy Assistance Program. Program that helps qualifying households pay a portion of their home heating costs, covers furnace repair and weatherization services, and provides cooling assistance in the summertime.

MA – Medical Assistance. Program commonly referred to as “Medicaid” that provides medical assistance to certain specified groups of needy low-income individuals as defined by federal law.

MIECHV – Maternal, Infant, and Early Childhood Home Visiting. Federal grant program supporting home visiting efforts in North Dakota, administered by Prevent Child Abuse North Dakota.

ND Quits – Program administered by the Public Health Division that provides resources for North Dakotans seeking assistance to quit smoking or using smokeless tobacco products, including vapes or electronic cigarettes.

NDWORKS – Employment and training program that provides SNAP recipients with opportunities to overcome barriers and gain skills, training or experience to improve their employment prospects. Participants receive support through job placement and retention services in order to reduce their reliance on SNAP benefits. The department contracts with Community Options, Inc. to provide the program services.

Oral Health Program – Program administered by the Public Health Division that aims to prevent and reduce oral disease and improve the oral health of all North Dakotans.

OTP – Opioid Treatment Programs. Program that provides medication-assisted treatment to patients diagnosed with opioid use disorder, including regular counseling with a licensed addiction counselor. OTPs must be certified by the SAMHSA.

PHEP – Public Health Emergency Preparedness & Response Program. This program provides local and state public health guidance, planning, coordination, response and funding for large scale emergencies. These activities include coordination and funding of incident command and control, disease control, laboratory services, communications systems, public information, medical supplies, equipment and pharmaceuticals and training.

PMHCA – Pediatric Mental Health Care Access Program. Program through the Public Health Division that supports behavioral health integration in primary care through new and expanding telehealth access programs – including screening, providing clinical behavioral health consultation, care coordination support, and training – with a focus on rural and underserved areas.

PRIDE – Parental Responsibility Initiative for the Development of Employment. Collaborative effort involving the Department, Job Service of North Dakota, and district courts to address nonpayment of child support resulting from the unemployment or underemployment of the obligor. PRIDE provides case management, job skills improvement, and job placement to help obligors obtain or improve their employment in order to pay child support.

SAMHSA – Substance Abuse and Mental Health Services Administration. Agency within the US Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. The agency’s mission is to reduce the impact of substance abuse and mental illness on America’s communities.

SNAP – Supplemental Nutrition Assistance Program. Federally funded USDA program intended to raise levels of nutrition among low-income households by supplementing their food purchasing power with monthly benefits distributed through an electronic benefit card. Formerly called the Food Stamp program.

TANF – Temporary Assistance for Needy Families. Federal block grant program established under Title IV-A of the Social Security Act that provides cash assistance to low-income families with children who are deprived of the support of at least one parent while promoting self-sufficiency through work readiness training and job placement services.

VR – Vocational Rehabilitation. Training and employment services provided to individuals with disabilities so that they can become and/or remain employed. Services are designed to assist business owners and employers in developing short and long-term strategies regarding disability-related issues including staffing; education; tapping into financial incentives associated with hiring an individual who has a permanent injury, illness, or impairment; or ensuring accessibility to goods or services.

Vulnerable Adult Protective Services (VAPS) – Program to address the safety of vulnerable adults who are at-risk of harm due to the presence or threat of abuse, neglect or exploitation.

WIC – Special Supplemental Nutrition Program for Women, Infants, and Children. This program offers healthy food for proper growth and development and helps families choose healthier ways of eating. WIC is for eligible pregnant, breastfeeding and postpartum women, infants, and children under 5 years and is available in all North Dakota counties.

SYSTEMS AND TOOLS

The following define commonly used systems and tools across HHS:

CCWIPS – Comprehensive Child Welfare, Information, and Payment System. Computerized case management and payment system for foster care and adoption services

FACSES – Fully Automated Child Support Enforcement System. Federally certified computer system that supports the processing of child support cases in North Dakota and supports the State Disbursement Unit (SDU) in processing child support payments.

FRAME – The Department’s child welfare computer system used to capture case management activities and collect child welfare data.

Intranet – Private network internal to HHS based on the SharePoint platform that is used to host and share pertinent information.

MAVEN – North Dakota’s Electronic Disease Surveillance system. This system allows tracking disease diagnosis and other information for a single person across different reportable conditions and surveillance models within the system

MMIS – Medicaid Management Information System. Computer system that processes all Medicaid claims, monitors utilization, and provides information needed to manage the Medicaid program. The system was implemented October 2015.

myAvatar – Video conferencing software that provides expanded access to telehealth services at the eight regional behavioral health clinics and four satellite clinics in North Dakota.

PeopleSoft – Suite of applications used to support workforce functions including personnel and financial management.

SharePoint – Web-based platform for document management and storage systems. The Intranet is built on the SharePoint platform.

SPACES – Self-Service Portal and Combined Eligibility System. The Department’s integrated eligibility system used by human service zones to determine eligibility for the CCAP, Medicaid, SNAP and TANF Programs. SPACES also streamlines the application process for economic assistance benefits and offers a self-service portal allowing individuals 24/7 access to check their benefit status, review their case history, report changes and complete reviews, view correspondence and upload documents securely.

TECS – Technical Eligibility Computer System. Computer system currently used by human service zones to manage some Medicaid cases.

Workforce – The Department’s workforce management software used by both HR and Fiscal for time, attendance, payroll, and other functions.

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