Prepared by the Legislative Council staff for House Appropriations - Human Resources Division Committee February 21, 2025

Sixty-ninth Legislative Assembly of North Dakota

PROPOSED AMENDMENTS TO

HOUSE BILL NO. 1012

Introduced by

Appropriations Committee

1 A BILL for an Act to provide an appropriation for defraying the expenses of various divisions of 2 the department of health and human services; to amend and reenact sections 50-06-06.6, 3 50-06-42, 50-24.5-02.3, and 50-33-05 of the North Dakota Century Code, relating to leases of 4 department of health and human services property, substance use disorder treatment program, 5 basic care payment rates, and state of residence for child care assistance; to provide for a 6 transfer; to authorize a line of credit; to provide legislative intent; to provide for a legislative 7 management study; to provide an application; to provide an exemption; and to provide for a 8 report; and to provide an effective date.

9 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

10	SECTION 1. APPROPRIATION. The funds provided in this section, or so much of the funds				
11	as may be necessary, are appro	opriated out of any moneys	in the general fund in	n the state	
12	treasury, not otherwise appropri	ated, and from other funds	derived from special	funds and	
13	federal funds, to the department	t of health and human serv	ices for the purpose o	of defraying the	
14	expenses of its various divisions, for the biennium beginning July 1, 2025, and ending June 30,				
15	2027, as follows:				
16	Subdivision 1.				
17		BUSINESS OPERATIO	NS		
18			Adjustments or		
19		Base Level	Enhancements	<u>Appropriation</u>	
20	Salaries and wages	\$25,763,358	\$0	\$25,763,358	

8

20

21

Subdivision 3.

1	Operating expenses	155,308,399	0	155,308,399
2	Capital assets	108,934	0	108,934
3	Grants	<u>11,812,627</u>	<u>0</u>	<u>11,812,627</u>
4	Total all funds	192,993,318	0	192,993,318
5	Less other funds	<u>118,894,310</u>	<u>0</u>	<u>118,894,310</u>
6	Total general fund	\$74,099,008	\$0	\$74,099,008
7	Subdivision 2.			

BEHAVIORAL HE	ALTH

9			Adjustments or	
10		Base Level	Enhancements	Appropriation
11	Salaries and wages	\$8,792,675	\$0	\$8,792,675
12	Operating expenses	79,381,458	0	79,381,458
13	Grants	40,476,298	0	40,476,298
14	Behavioral health clinics	196,383,945	0	196,383,945
15	State hospital	94,826,973	0	94,826,973
16	Opioid addiction prevention	<u>2,000,000</u>	<u>0</u>	<u>2,000,000</u>
17	Total all funds	421,861,349	0	421,861,349
18	Less other funds	<u>113,955,941</u>	<u>0</u>	<u>113,955,941</u>
19	Total general fund	\$307,905,408	0	\$307,905,408

HUMAN	SERVICES	

22			Adjustments or	
23		Base Level	Enhancements	<u>Appropriation</u>
24	Salaries and wages	\$168,325,918	\$0	\$168,325,918
25	Operating expenses	88,885,469	0	88,885,469
26	Capital assets	10,000	0	10,000
27	Grants	621,189,007	0	621,189,007
28	Life skills and transition center	44,992,263	0	44,992,263
29	Grants - medical assistance	742,793,564	0	742,793,564
30	County social services	<u>197,663,661</u>	0	<u>197,663,661</u>
31	Total all funds	1,863,859,882	0	1,863,859,882

1	Less other funds	<u>1,240,409,529</u>	<u>0</u>	<u>1,240,409,529</u>
2	Total general fund	\$623,450,353	0	\$623,450,353

3 Subdivision 4.

4

15

MEDICAL SERVICES

5			Adjustments or			
6		Base Level	Enhancements	<u>Appropriation</u>		
7	Salaries and wages	\$21,008,344	\$0	\$21,008,344		
8	Operating expenses	70,807,977	0	70,807,977		
9	Grants	1,651,004	0	1,651,004		
10	Grants - medical assistance	<u>2,682,778,803</u>	<u>0</u>	<u>2,682,778,803</u>		
11	Total all funds	2,776,246,128	0	2,776,246,128		
12	Less other funds	<u>1,818,029,530</u>	<u>0</u>	<u>1,818,029,530</u>		
13	Total general fund	\$958,216,598	0	\$958,216,598		
14	Subdivision 5.					

PUBLIC HEALTH

16			Adjustments or	
17		Base Level	Enhancements	Appropriation
18	Salaries and wages	\$60,415,388	\$0	\$60,415,388
19	Operating expenses	37,721,213	0	37,721,213
20	Capital assets	1,469,780	0	1,469,780
21	Grants	81,718,145	0	81,718,145
22	Tobacco prevention	13,063,162	0	13,063,162
23	Women, infants, and children	19,900,000	0	19,900,000
24	food payments			
25	Cares Act/COVID-19	<u>83,909,182</u>	<u>0</u>	<u>83,909,182</u>
26	Total all funds	\$298,196,870	0	298,196,870
27	Less other funds	250,440,690	<u>0</u>	<u>250,440,690</u>
28	Total general fund	\$47,756,180	\$0	\$47,756,180
29		TOTAL - SECTION 1		
30			Adjustments or	
31		Base Level	Enhancements	Appropriation

5

1	Grand total all funds	\$5,553,157,547	\$0	\$5,553,157,547
2	Grand total other funds	3,541,730,000	<u>0</u>	<u>3,541,730,000</u>
3	Grand total general fund	\$2,011,427,547	\$0	\$2,011,427,547
4	Full-time equivalent positions	2,483.83	0.00	2,483.83

SECTION 2. ONE TIME FUNDING - EFFECT ON BASE BUDGET - REPORT TO

SEVENTIETH LEGISLATIVE ASSEMBLY. The following amounts reflect the one-time funding
items included in section 1 of this Act which are not included in the entity's base budget for the
2027-29 biennium and which the entity shall report to the appropriations committees of the

9 seventieth legislative assembly regarding the use of this funding:

10	One-Time Funding Description	General Fund	Other Funds	<u>Total</u>
11	Technology projects	\$0	\$10,263,000	\$10,263,000
12	Human service centers and life skills	0	1,052,480	1,052,480
13	and transition center projects			
14	Retire mainframe	0	15,000,000	15,000,000
15	Child care programs	17,272,500	0	17,272,500
16	Housing programs	0	14,500,000	14,500,000
17	State laboratory move and equipment	0	2,962,304	2,962,304
18	Partial hospitalization day treatment	0	2,000,000	2,000,000
19	Developmental disabilities eligibility	200,000	200,000	400,000
20	assessment tool for kids			
21	Toxicology equipment	151,500	100,000	251,500
22	New state hospital	0	330,000,000	330,000,000
23	Behavioral health facility grant	0	12,960,000	12,960,000
24	Cultural community center grant	<u>0</u>	<u>1,000,000</u>	<u>1,000,000</u>
25	Total	\$17,624,000	\$390,037,784	\$407,661,784

26 SE

SECTION 3. FUNDING TRANSFERS - EXEMPTION - AUTHORIZATION - REPORT.

Notwithstanding section 54-16-04, the director of the office of management and budget shall
transfer appropriation authority between line items within subdivisions 1, 2, 3, 4, and 5, and 6 of
section 1 of this Act and any other appropriation authority for the department of health and
human services approved by the sixty-ninth legislative assembly, for the biennium beginning
July 1, 2025, and ending June 30, 2027, as requested by the department of health and human

1 services. The department of health and human services shall notify the legislative council of any 2 transfer made pursuant to this section. The department of health and human services shall 3 report to the budget section after June 30, 2026, any transfer made in excess of \$50,000 and to 4 the appropriations committees of the seventieth legislative assembly regarding any transfers 5 made pursuant to this section. 6 SECTION 4. FULL-TIME EQUIVALENT POSITION BLOCK GRANT PROGRAM -7 **REPORT.** Section 1 of this Act includes funding for a full-time equivalent position block grant 8 program. This funding as approved by the sixty-ninth legislative assembly is available for

9 defraying the expense of full-time equivalent positions as determined by the department of

health and human services. Notwithstanding any other provision of law, the department is
authorized to increase or decrease authorized full-time equivalent positions subject to the

12 availability of funds and the provisions of this section. The department of health and human

services many not increase full-time equivalent positions for the purpose of transferring human
 service zone employees to state employment. Pursuant to section 3 of this Act, the department

15 is authorized to transfer appropriation authority up to the underfunded amount of \$20,730,788 to

16 the salaries and wages block grant line item. The department of health and human services

shall report to the office of management and budget and legislative council any adjustments tofull-time equivalent positions.

19 SECTION 5. DEPARTMENT OF HEALTH AND HUMAN SERVICES - SALARIES AND

WAGES BLOCK GRANT - VACANT POSITIONS - REPORT. The department of health and
 human services shall report to the budget section quarterly during the 2025-26 interim regarding
 the status of its salaries and wages block grant and vacant positions and employee turnover.
 The report must include:

- The legislative appropriation for salaries and wages allocated by the department to
 major department programs by funding source and the number of FTE positions the
 department is allocating to each major program based on the legislative appropriation;
- 27 2. Any changes to salaries and wages funding or FTE positions allocated to major
 28 department programs;
- 3. Any new FTE positions added, the cost of the position for the remainder of the
 biennium, and the cost to continue funding the position in the subsequent biennium by
 funding source;

	-	-
1	4.	Any FTE positions removed and related funding;
2	5.	The number of FTE positions that become vacant and the number filled each month;
3	6.	The number of vacant FTE positions at the end of each month;
4	7.	Salaries and wages savings resulting from vacant positions and employee turnover
5		each month by funding source; and
6	8.	The use of salaries and wages savings for other purposes for each month by funding
7		source.
8	SEC	TION 6. BEHAVIORAL HEALTH FACILITY GRANT - STRATEGIC INVESTMENT
9	AND IM	PROVEMENTS FUND - APPLICATION.
10	1.	Section 1 of this Act includes the sum of \$12,960,000 from the strategic investment
11		and improvements fund for a behavioral health facility grant pursuant to this section.
12	2.	A grant of \$12,960,000 must be provided to establish a behavioral health facility in the
13		northeast human service region. The grant recipient must provide matching funds of
14		\$3,240,000 to establish the facility.
15	3.	The department shall require an entity receiving funding under this section to operate
16		the facility for at least ten years and require the grant amount to be repaid if the entity
17		does not operate the facility for at least ten years.
18	4.	The requirements of chapter 54-44.4 do not apply to the selection of a grant recipient,
19		the grant award, or payments made under this section.
20	SEC	TION 7. COMMUNITY CULTURAL CENTER GRANT - STRATEGIC INVESTMENT
21	AND IM	PROVEMENTS FUND - APPLICATION. Section 1 of this Act includes the sum of
22	\$1,000,0	000 from the strategic investment and improvements fund for the purpose of providing a
23	one-time	e community cultural center grant in the west central human service region. An entity
24	may app	bly for a grant under this section if the entity certifies to the department it has raised
25	adequat	e funds to complete a project, the project will be completed within two years of receiving
26	the gran	t funds, and the grants funds will be used only for costs of constructing a community
27	cultural	center. The requirements of chapter 54-44.4 do not apply to the selection of a grant
28	recipien	t, the grant award, or payments made under this section.
29	SEC	CTION 8. OTHER FUNDS - INSURANCE TAX DISTRIBUTION FUND. The other funds
30	line item	in subdivision 5 of section 1 of this Act includes the sum of \$1,125,000 from the
31	insurand	e tax distribution fund for rural emergency medical services grants.

4				
1	SECTION 9. OTHER FUNDS - COMMUNITY HEALTH TRUST FUND. TH			
2	items in section 1 of this Act includes the sum of \$39,529,678 from the community health trust			
3	fund for the following purposes:			
4	Loan repayment programs	\$594,500		
5	Tobacco and vaping programs	11,599,698		
6	Cancer and women's way programs	909,824		
7	Behavior risk state survey	200,000		
8	Domestic violence programs	4,250,000		
9	Local public health grants	3,275,000		
10	988 crisis hotline	1,867,500		
11	Forensic examiner at the university of North Dakota	2,866,156		
12	Various information technology system upgrades	2,967,000		
13	Grants to rural ambulances	7,000,000		
14	Law enforcement rural crisis support program	2,000,000		
15	Development of partial hospitalization/intensive day treatment <u>2,000,000</u>			
16	Total	\$39,529,678		
17	SECTION 7. OTHER FUNDS - COMMUNITY HEALTH TRUST FUND. The or	ther funds line-		
18	item in subdivision 2 of section 1 of this Act includes the sum of \$1,867,500 from the sum of \$1,807,500 from the sum of \$1,807,5	om the community		
19	health trust fund for the 988 crisis hotline program and subdivision 5 of section	า 1 of this Act		
20	includes the sum of \$27,072,324 from the community health trust fund for the	following-		
21	programs:			
22	Behavioral risk factor survey \$200,000			
23	Behavioral health loan repayment 234,500			
24	Domestic violence offender treatment 1,000,000			
25	Domestic violence prevention 1,000,000			
26	Women's way 329,500			
27	Dentist's loan repayment 360,000			
28	Local public health state aid 3,275,000			
29	Rural emergency medical and ambulance services grants 7,000,000			
30	Cancer programs 580,324			
31	Forensic examiner contract 1,000,000			

	Logiolativo / toooniory			
1	Tobacco cessation grants 500,000			
2	Youth vaping prevention grants 300,000			
3	Tobacco prevention and control 5,043,000			
4	Tobacco prevention and control grants to local public health units 6,250,000			
5	Total community health trust fund \$27,072,324			
6	SECTION 10. OTHER FUNDS - HUMAN SERVICE FINANCE FUND. The other funds line			
7	itemitems in subdivision 3 of section 1 of this Act includes the sum of			
8	\$226,950,000 239,112,030 from the human service finance fund for state-paid	economic		
9	assistance and social and human services.			
10		unds line item in		
11	subdivision 4 of section 1 of this Act includes the sum of \$500,000 from the heal	th care trust		
12	fund for basic care facility bad debt expense.			
13		ND. The other		
14	funds line item in subdivision 2 of section 1 of this Act includes the sum of \$500,000 from the			
15	charitable gaming operating fund for costs of gambling disorder prevention services.			
16	SECTION 11. OTHER FUNDS - OPIOID SETTLEMENT FUND. The other funds line item in			
17	subdivision 2 of section 1 of this Act includes the sum of \$8,000,000 from the opioid settlement			
18	fund for opioid remediation and abatement efforts.			
19	SECTION 12. OTHER FUNDS - STRATEGIC INVESTMENT AND IMPROV	EMENTS		
20	FUND The other funds line items in section 1 of this Act includes the sum of \$24	1,606,784 from		
21	the strategic investment and improvements fund for the following purposes:			
22	Retiring technology from the mainframe	\$7,500,000		
23	Move into the new state laboratory and purchase security equipment	2,962,304		
24	Capital projects in human service centers and life skills and transition center	1,684,480		
25	Housing initiative programs	14,500,000		
26	Technology projects at the state hospital	1,000,000		
27	New state hospital	200,000,000		
28	Behavioral health facility grant	12,960,000		
29	Community cultural center grant	<u>1,000,000</u>		
30	Total	\$241,606,784		

1 SECTION 13. OTHER FUNDS - BANK OF NORTH DAKOTA LINE OF CREDIT - STATE

2 HOSPITAL PROJECT. The other funds line item in subdivision 2 of section 1 of this Act 3 includes \$130,000,000 from a Bank of North Dakota line of credit. The department of health and 4 human services may borrow up to \$130,000,000 through a line of credit from the Bank of North 5 Dakota during the biennium beginning July 1, 2025 and ending on June 30, 2027 for costs 6 associated with the construction of a new state hospital. The interest rate on the line of credit 7 may not exceed the prevailing interest rate charged to North Dakota government entities. If the 8 department accesses the line of credit, it shall request a deficiency appropriation from the 9 seventieth legislative assembly to repay the line of credit.

10 SECTION 14. LABORATORY BUILDING STEERING COMMITTEE. The department of 11 health and human services shall maintain the laboratory building steering committee to oversee 12 the design and construction of the laboratory building project, for the biennium beginning July 1, 13 2025, and ending on June 30, 2027, or until work is completed, whichever occurs earlier. The 14 committee must include representation from the department of health and human services. 15 department of environmental guality, office of management and budget, the governor's office, 16 and the legislative assembly. The legislative assembly representation must include one member 17 of the senate appointed by the senate majority leader, one member of the house appointed by 18 the house majority leader, and one member of the minority party from either the senate or the 19 house appointed by the minority leaders of the senate and the house.

SECTION 15. NEW STATE HOSPITAL - STEERING COMMITTEE. The department of health and human services shall establish a new state hospital facility steering committee to oversee the design and construction of a new state hospital facility, for the biennium beginning July 1, 2025, and ending June 30, 2027. The committee must include one member of the senate appointed by the senate majority leader, one member of the house appointed by the house majority leader, and one member of the minority party from either the senate or the house appointed by the minority leaders of the senate and the house.

SECTION 16. CAPITAL PAYMENTS. During the biennium beginning July 1, 2025, and
ending June 30, 2027, the department of health and human services is authorized to expend
funds for the payment of special assessments at the state hospital, southeast human service
center and life skills and transition center. Pursuant to section 3 of this Act, the director of the
office of management and budget may transfer appropriation authority between line items within

section 1 of this Act and any remaining appropriation authority for the department of health and
human services approved by the sixty-ninth legislative assembly. The department of health and
human services may transfer funds for the payment of special assessments at the state
hospital, southeast human service center, and life skills and transition center ahead of the
special needs assessments schedule. Notwithstanding section 54-27-12, the department of
health and human services may spend funds for the payment of special assessments at the
state hospital and life skills and transition center.

8

SECTION 17. CAPITAL PROJECTS - EMERGENCY COMMISSION AND BUDGET

9 **SECTION APPROVAL.** During the biennium beginning July 1, 2025, and ending on June 30, 10 2027 pursuant to section 3 of this Act, the director of the office of management and budget may 11 transfer appropriation authority between line items within section 1 of this Act and any remaining 12 appropriation authority for the department of health and human services approved by the sixty-13 ninth legislative assembly for capital projects and maintenance pertaining to operation of its 14 facilities, including demolition projects. Notwithstanding section 54-27-12, the department of 15 health and human services may spend up to \$10,000,000 for capital projects and maintenance 16 pertaining to operation of its facilities, including demolition projects, under this section and may 17 seek emergency commission and budget section approval to spend more than \$10,000,000 18 under this section.

SECTION 18. PERMANENT SUPPORTIVE HOUSING GRANTS. Section 1 of this Act includes the sum of \$4,672,536 from the general fund for permanent supportive housing grants. The department of health and human services shall develop a funding methodology to distribute the funding to qualified entities that utilize best practices for permanent supportive housing, provide recovery-oriented and person-centered services, submit process and outcome measures to the department of health and human services, and authorize the department of health and human services to conduct onsite visits to review program operations.

26

27

SECTION 19. EXPENDITURES MAY NOT EXCEED APPROPRIATION - MEDICAL ASSISTANCE EXPANSION PROGRAM - APPLICATION.

Section 1 of this Act includes the sum of \$662,099,340, of which \$66,209,934 is from
 the general fund, for the medical assistance expansion program, for the biennium
 beginning July 1, 2025, and ending June 30, 2027. The expenditures for individuals
 eligible for the medical assistance expansion program may not exceed this amount.

- The department of health and human services may exceed appropriations for
 increases in medical assistance expansion program caseload, for the addition of
 coverage consistent with the traditional Medicaid 1915(i) state plan, utilization rates,
 and reduction in federal medical assistance percentage.
- 5 3. The managed care organization under contract with the department of health and 6 human services to manage the medical assistance expansion program shall reimburse 7 providers within the same provider type and specialty at consistent levels and with 8 consistent methodology and may not provide incentive, quality, or supplemental 9 payments to providers, unless part of a value-based program approved by the 10 department of health and human services. The managed care organization shall 11 reimburse all North Dakota substance use providers of American society of addiction 12 medicine level 2.5 at consistent levels and with consistent methodology. The managed 13 care organization may consider urban and rural providers as different provider types.
- 14 4. The managed care organization and the department of health and human services 15 shall ensure payments to Indian or Tribal 638 health care providers, federally qualified 16 health centers, and rural health clinics meet the federally required minimum levels of 17 reimbursement. Critical access hospitals may not be paid less than one hundred 18 percent of Medicare allowable costs and human service centers may not be paid less 19 than one hundred percent of the current traditional Medicaid rate. Behavioral health 20 services involving partial hospitalization, intensive outpatient, professional services, 21 and residential behavioral health services provided in facilities that are not institutions 22 for mental diseases are not subject to the provisions in subsection 6.
- 5. The department of health and human services shall ensure providers within the same
 provider type and specialty are reimbursed at consistent levels and with consistent
 methodology and shall ensure the capitation rates under risk contracts are actuarially
 sound and are adequate to meet managed care organization contractual requirements
 regarding availability of services, assurance or adequate capacity and services, and
 coordination and continuity of care.
- 29 6. Except for the provisions in subsection 4, managed care organization premium
 30 payments must be built using the assumption that rates paid to providers under the

1	medical assistance expansion program may not exceed one hundred forty-five percent		
2	of Medicare reimbursement rates paid to providers on January 1, 2025.		
3	SECTION 20. HUMAN SERVICE CENTERS - CERTIFIED COMMUNITY BEHAVIORAL		
4	HEALTH CLINICS - FULL-TIME EQUIVALENT POSITIONS - REPORT. The department of		
5	health and human services shall continue the process of the human service centers becoming a		
6	certified community behavioral health clinic to provide continuous community-based behavioral		
7	health services for children and adults. The department of health and human services shall		
8	pursue additional federal funding as available. Subject to the availability of generated income,		
9	the department of health and human services may add full-time equivalent positions for the		
10	clinics to provide direct services for the period beginning with the effective date of this Act and		
11	ending June 30, 2027. The department of health and human services shall report to the office of		
12	management and budget and legislative council each time a position is added.		
13	SECTION 21. INTERMEDIATE CARE FACILITY MORATORIUM - DEVELOPMENTAL		
14	DISABILITY RATE REVIEW AND REBASE.		
15	1. The department of health and human services may not add any new licensed		
16	intermediate care facility for individuals with intellectual disabilities beds to the state's		
17	licensed bed capacity between July 1, 2025, and ending June 30, 2027.		
18	2. The department of health and human services shall complete a rate review and review		
19	the utilization limits, amount, duration, coverage, and scope of all developmental		
20	disability services and may implement the appropriate adjustments based on the rate		
21	review.		
22	SECTION 22. EXEMPTION - UNEXPENDED APPROPRIATIONS. The following		
23	appropriations are not subject to the provisions of section 54-44.1-11 and any unexpended		
24	appropriation authority may be continued into the biennium beginning July 1, 2025, and ending		
25	June 30, 2027:		
26	1. The sum of \$3,674,757 appropriated from the general fund and the sum of		
27	\$25,918,566 appropriated from federal funds for the Medicaid management		
28	information system modularization technology project in chapter 12 of the 2021		
29	Session Laws;		

	Ū	·		
1	2.	The sum of \$14,411,218 appropriated from the general fund and the sum of		
2		\$14,411,218 appropriated from federal funds for the child welfare technology project in		
3		chapter 12 of the 2021 Session Laws;		
4	3.	The sum of \$20,366,271 appropriated from the community health trust fund and the		
5		sum of \$39,534,525 appropriated from federal funds for the child support computer		
6		replacement project in chapter 44 of the 2023 Session Laws;		
7	4.	The sum of \$10,989,217 appropriated from the strategic investment and		
8		improvements fund for the procurement and grants management system in chapter 44		
9		of the 2023 Session Laws;		
10	5.	The sum of \$4,150,000 appropriated from the general fund for defraying the expenses		
11		of additional human service centers to begin the process of becoming a certified		
12		community behavioral health clinic to provide continuous community-based behavioral		
13		health services for children and adults in chapter 44 of the 2023 Session Laws;		
14	6.	The sum of \$18,941,847 appropriated to the department of health and human services		
15		in chapter 549 of the 2021 Special Session Laws;		
16	7.	The sum of \$55,120,000 appropriated from the federal state fiscal recovery fund for a		
17		public health laboratory capital project in chapter 4 of the 2023 Session Laws;		
18	8.	The sum of \$5,000,000 appropriated from the general fund for the purpose of		
19		employer-led child care cost-share program in chapter 446 of the 2023 Session Laws;		
20	9.	The sum of \$986,555 appropriated from the general fund for the purpose of		
21		streamlining background checks project in chapter 446 of the 2023 Session Laws;		
22	10.	The sum of \$2,223,981 appropriated from the federal state fiscal recovery fund for the		
23		implementation of a virtual behavioral health crisis care program for rural law		
24		enforcement in chapter 44 of the 2023 Session Laws; and		
25	11.	The sum of \$500,000 appropriated from the general fund and the sum of \$500,000		
26		appropriated from federal funds for the purpose of program integrity audits in		
27		chapter 44 of the 2023 Session Laws.		
28	SECTION 23. LEGISLATIVE INTENT - UTILIZATION RATE ADJUSTMENT. It is the intent			
29	of the sixty-ninth legislative assembly that the department of health and human services seek a			
30	deficiency appropriation from the seventieth legislative assembly for any expenditures that			
31	exceed appropriated amounts as a result of underfunding, utilization rates, value-based			

1 purchasing for nursing facilities, reduction in federal medical assistance percentage, and 2 unexpected contract cost increases that exceed ten percent, during the biennium beginning 3 July 1, 2025, and ending June 30, 2027, if funding is not sufficient to pay actual expenses. 4 SECTION 24. LEGISLATIVE INTENT - PROVIDER RATE INCREASE. Except as 5 otherwise noted, section 1 of this Act includes funding for human service provider inflation 6 increases of one and one half percent for each year of the biennium beginning July 1, 2025 and 7 ending June 30, 2027. The provider inflation increase in this section does not apply to nursing 8 facilities. 9 **SECTION 25. LEGISLATIVE INTENT - DEVELOPMENTAL DISABILITIES PROVIDER** 10 ACCREDITATION REQUIREMENT. It is the intent of the sixty-ninth legislative assembly that 11 the department of health and human services eliminate its administrative rule requirement that 12 providers of developmental disabilities services be accredited as a condition of being eligible for 13 receiving payments for services from the department of health and human services. 14 SECTION 26. LEGISLATIVE INTENT - MEDICAL ASSISTANCE. It is the intent of the 15 sixty-ninth legislative assembly that the department of health and human services review the 16 amount, duration, coverage, utilization rates, medical necessity, and scope of medical 17 assistance services, and may implement any adjustments the department determines 18 appropriate. 19 SECTION 27. FEDERAL FUNDING APPEAL LIMITATION. Except as otherwise 20 specifically provided by federal law, a person may not appeal a denial, revocation, reduction in 21 services or payment, or the termination of a program or service by the department of health and 22 human services dues to the unavailability of federal coronavirus funding received under federal 23 law resulting from the federal coronavirus pandemic emergency declarations, for the biennium 24 beginning July 1, 2025, and ending June 30, 2027. 25 SECTION 28. DEPARTMENT OF HEALTH AND HUMAN SERVICES - LONG-TERM 26 STRUCTURED RESIDENCES PLAN - REPORT. During the 2025-26 interim, the department of 27 health and human services shall review options and develop a plan to establish long-term 28 structured residences. The department shall review necessary changes to statutes, rules, 29 policies, and the estimated fiscal impact of establishing the residences. A long-term structured 30 residence must be a highly structured therapeutic residential mental health treatment facility 31 that is staffed continuously and designed to treat adults under chapters 25-03.01 and 25-04.01

1 who have severe and persistent mental illness and who have reached the maximum benefit 2 from the mental health resources available elsewhere in the community or hospital. The 3 department shall present a report to the legislative management by October 1, 2026, regarding 4 its plan to establish long-term structured residences. 5 SECTION 29. AMENDMENT. Section 50-06-06.6 of the North Dakota Century Code is 6 amended and reenacted as follows: 7 50-06-06.6. Department may lease real and personal property. 8 The commissioner of the department or commissioner's designee may lease surplus farm-9 and pastureland at the state hospital and the life skills and transition center. The commissioner-10 or designee also may enter into further leases of real or personal property at the life skills and 11 transition center or the state hospital upon a specific finding that the granting of each such 12 leasehold interest will result in a net economic gain for the department, taking into account all 13 identifiable costs. Any lease of space for the purpose of providing child care services must meet 14 requirements as determined by the department. The commissioner of the department or 15 commissioner's designee may prescribe the terms and conditions of any leases entered into 16 pursuant to this section and may renew existing leases. Any The term of any lease entered into-17 must be subject to renewal or cancelable each bienniummay not exceed ninety-nine years. 18 SECTION 30. AMENDMENT. Section 50-06-42 of the North Dakota Century Code is 19 amended and reenacted as follows: 20 50-06-42. Substance use disorder treatment voucher system. 21 1. The department shall establish and administer, within the limits of legislative 22 appropriations, a voucher system to address underserved areas and gaps in the 23 state's substance abuse treatment system and to assist in the payment of addiction 24 treatment services and medical costs provided by licensed substance abuse treatment 25 programs, excluding regional human service centers and hospital- or medical clinic-26 based programs for medical management of withdrawal. An out-of-state licensed 27 substance abuse treatment program located within a bordering state may participate in 28 the voucher program to serve an underserved area of this state pursuant to the rules 29 adopted by the department. The department shall develop rules to include processes 30 and requirements for an out-of-state provider to receive reimbursement only for

1 outpatient and community-based services upon a provider completing an assessment 2 of need and receiving approval from the department. 3 2. Services eligible for the voucher program include only those levels of care recognized 4 by the American society of addiction medicine, with particular emphasis given to 5 underserved areas and programs. The department shall ensure that a licensed 6 substance abuse treatment program, hospital, and medical clinic program accepting 7 vouchers collects and reports process and outcome measures. 8 3. The department shall develop requirements and provide training and technical 9 assistance to a licensed substance abuse treatment program, hospital, and medical 10 clinic program accepting vouchers. A licensed substance abuse treatment program, 11 hospital, and medical clinic program accepting vouchers shall provide evidence-based 12 services. 13 4. The department shall allocate funding appropriated for the substance use disorder 14 treatment voucher as follows: 15 a. NoExcept as provided in subdivision c, no more than forty-fivefify percent of the 16 appropriated amount may be allocated for residential substance use disorder 17 services administered by licensed subs					
 Services eligible for the voucher program include only those levels of care recognized by the American society of addiction medicine, with particular emphasis given to underserved areas and programs. The department shall ensure that a licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers collects and reports process and outcome measures. The department shall develop requirements and provide training and technical assistance to a licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers. A licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers shall provide evidence-based services. The department shall allocate funding appropriated for the substance use disorder treatment voucher as follows: NeExcept as provided in subdivision c, no more than forty-fivefifty percent of the appropriated amount may be allocated for residential substance use disorder services administered by licensed substance abuse treatment programs with more than sixteen beds. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. The department may reimburse a licensed substance abuse treatment program with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. The department shall determine limits for t	1		outp	patient and community-based services upon a provider completing an assessment	
4by the American society of addiction medicine, with particular emphasis given to5underserved areas and programs. The department shall ensure that a licensed6substance abuse treatment program, hospital, and medical clinic program accepting7vouchers collects and reports process and outcome measures.83. The department shall develop requirements and provide training and technical9assistance to a licensed substance abuse treatment program, hospital, and medical10clinic program accepting vouchers. A licensed substance abuse treatment program,11hospital, and medical clinic program accepting vouchers shall provide evidence-based12services.134. The department shall allocate funding appropriated for the substance use disorder14treatment voucher as follows:15a. NoExcept as provided in subdivision c, no more than forty-fivefifty percent of the16appropriated amount may be allocated for residential substance use disorder17services administered by licensed substance abuse treatment programs with18more than sixteen beds.19b. The remaining appropriation must be allocated for residential programs with20sixteen or fewer beds, nonresidential outpatient, and ancillary substance use21disorder services administered by licensed substance abuse treatment program22c. The department may reimburse a licensed substance abuse treatment program23with more than sixteen beds the incurred direct medical costs of an eligible.24individual who does not have resources to cover the medical cost	2		of n	eed and receiving approval from the department.	
5 underserved areas and programs. The department shall ensure that a licensed 6 substance abuse treatment program, hospital, and medical clinic program accepting 7 vouchers collects and reports process and outcome measures. 8 3. The department shall develop requirements and provide training and technical 9 assistance to a licensed substance abuse treatment program, hospital, and medical 10 clinic program accepting vouchers. A licensed substance abuse treatment program, 11 hospital, and medical clinic program accepting vouchers shall provide evidence-based 12 services. 13 4. The department shall allocate funding appropriated for the substance use disorder 14 treatment voucher as follows: 15 a. NoExcept as provided in subdivision c. no more than forty fivefifty percent of the 16 appropriated amount may be allocated for residential substance use disorder 17 services administered by licensed substance abuse treatment programs with 18 more than sixteen beds. 19 b. The remaining appropriation must be allocated for residential programs with 20 sixteen or fewer beds, nonresidential outpatient, and ancillary substance use 21 disorder services administered by licensed substance abuse treatment program	3	2.	Ser	vices eligible for the voucher program include only those levels of care recognized	
6substance abuse treatment program, hospital, and medical clinic program accepting7vouchers collects and reports process and outcome measures.83. The department shall develop requirements and provide training and technical9assistance to a licensed substance abuse treatment program, hospital, and medical10clinic program accepting vouchers. A licensed substance abuse treatment program,11hospital, and medical clinic program accepting vouchers shall provide evidence-based12services.134. The department shall allocate funding appropriated for the substance use disorder14treatment voucher as follows:15a. NeExcept as provided in subdivision c. no more than forty-fivefifty percent of the16appropriated amount may be allocated for residential substance use disorder17services administered by licensed substance abuse treatment programs with18more than sixteen beds.19b. The remaining appropriation must be allocated for residential programs with20sixteen or fewer beds, nonresidential outpatient, and ancillary substance use21disorder services administered by licensed substance abuse treatment program.22c. The department may reimburse a licensed substance abuse treatment program.23with more than sixteen beds the incurred direct medical costs of an eligible.24individual who does not have resources to cover the medical costs. The.25department may develop rules and may not exceed the total amount.26appropriated for medical cost reimbursement.27SECTIO	4		by t	he American society of addiction medicine, with particular emphasis given to	
 vouchers collects and reports process and outcome measures. The department shall develop requirements and provide training and technical assistance to a licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers. A licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers shall provide evidence-based services. The department shall allocate funding appropriated for the substance use disorder treatment voucher as follows: a. NoExcept as provided in subdivision c, no more than forty-fivefifty percent of the appropriated amount may be allocated for residential substance use disorder services administered by licensed substance abuse treatment programs with more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs c. The department may reimburse a licensed substance abuse treatment program with more than sixteen beds the incurred direct medical costs of an eligible. individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities	5		und	lerserved areas and programs. The department shall ensure that a licensed	
 3. The department shall develop requirements and provide training and technical assistance to a licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers. A licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers shall provide evidence-based services. 4. The department shall allocate funding appropriated for the substance use disorder treatment voucher as follows: a. NoExcept as provided in subdivision c, no more than forty-fivefifty percent of the appropriated amount may be allocated for residential substance use disorder services administered by licensed substance abuse treatment programs with more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment program. c. The department may reimburse a licensed substance abuse treatment program. with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	6		sub	stance abuse treatment program, hospital, and medical clinic program accepting	
 assistance to a licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers. A licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers shall provide evidence-based services. 4. The department shall allocate funding appropriated for the substance use disorder treatment voucher as follows: a. NoExcept as provided in subdivision c, no more than forty-fivefifty percent of the appropriated amount may be allocated for residential substance use disorder services administered by licensed substance abuse treatment programs with more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program. with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost conter the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	7		vou	chers collects and reports process and outcome measures.	
 clinic program accepting vouchers. A licensed substance abuse treatment program, hospital, and medical clinic program accepting vouchers shall provide evidence-based services. 4. The department shall allocate funding appropriated for the substance use disorder treatment voucher as follows: NeExcept as provided in subdivision c, no more than forty-fivefifty percent of the appropriated amount may be allocated for residential substance use disorder services administered by licensed substance abuse treatment programs with more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program. with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. The department shall determine limits for the care of residents of basic care facilities 	8	3.	The	e department shall develop requirements and provide training and technical	
11 hospital, and medical clinic program accepting vouchers shall provide evidence-based 12 services. 13 4. The department shall allocate funding appropriated for the substance use disorder 14 treatment voucher as follows: 15 a. NoExcept as provided in subdivision c, no more than forty-fivefifty percent of the 16 appropriated amount may be allocated for residential substance use disorder 17 services administered by licensed substance abuse treatment programs with 18 more than sixteen beds. 19 b. The remaining appropriation must be allocated for residential programs with 20 sixteen or fewer beds, nonresidential outpatient, and ancillary substance use 21 disorder services administered by licensed substance abuse treatment programs. 22 c. The department may reimburse a licensed substance abuse treatment program 23 with more than sixteen beds the incurred direct medical costs of an eligible. 24 individual who does not have resources to cover the medical costs. The. 25 department may develop rules and may not exceed the total amount. 26 appropriated for medical cost reimbursement. 271 SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is 28 <td>9</td> <td></td> <td>ass</td> <td>istance to a licensed substance abuse treatment program, hospital, and medical</td>	9		ass	istance to a licensed substance abuse treatment program, hospital, and medical	
12services.134. The department shall allocate funding appropriated for the substance use disorder14treatment voucher as follows:15a. NeExcept as provided in subdivision c, no more than forty-fivefifty percent of the16appropriated amount may be allocated for residential substance use disorder17services administered by licensed substance abuse treatment programs with18more than sixteen beds.19b. The remaining appropriation must be allocated for residential programs with20sixteen or fewer beds, nonresidential outpatient, and ancillary substance use21disorder services administered by licensed substance abuse treatment programs.22c. The department may reimburse a licensed substance abuse treatment program23with more than sixteen beds the incurred direct medical costs of an eligible24individual who does not have resources to cover the medical costs. The25department may develop rules and may not exceed the total amount26appropriated for medical cost reimbursement.27SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is28amended and reenacted as follows:2950-24.5-02.3. Basic care payment rates.301. The department shall determine limits for the care of residents of basic care facilities	10		clini	ic program accepting vouchers. A licensed substance abuse treatment program,	
 4. The department shall allocate funding appropriated for the substance use disorder treatment voucher as follows: a. NoExcept as provided in subdivision c. no more than forty-five/fifty percent of the appropriated amount may be allocated for residential substance use disorder services administered by licensed substance abuse treatment programs with more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment programs. with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	11				
14treatment voucher as follows:15a.16Appropriated as provided in subdivision c, no more than forty-fivefifty percent of the16appropriated amount may be allocated for residential substance use disorder17services administered by licensed substance abuse treatment programs with18more than sixteen beds.19b.14the remaining appropriation must be allocated for residential programs with20sixteen or fewer beds, nonresidential outpatient, and ancillary substance use21disorder services administered by licensed substance abuse treatment programs.22c.23The department may reimburse a licensed substance abuse treatment program.23with more than sixteen beds the incurred direct medical costs of an eligible.24individual who does not have resources to cover the medical costs. The25department may develop rules and may not exceed the total amount26appropriated for medical cost reimbursement.27SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is28amended and reenacted as follows:2950-24.5-02.3. Basic care payment rates.301.31The department shall determine limits for the care of residents of basic care facilities	12		ser	vices.	
 15 a. NeExcept as provided in subdivision c, no more than forty-fivefifty percent of the appropriated amount may be allocated for residential substance use disorder services administered by licensed substance abuse treatment programs with more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	13	4.	The	e department shall allocate funding appropriated for the substance use disorder	
 appropriated amount may be allocated for residential substance use disorder services administered by licensed substance abuse treatment programs with more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	14		treatment voucher as follows:		
 services administered by licensed substance abuse treatment programs with more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	15		a.	No Except as provided in subdivision c, no more than forty-five fifty percent of the	
 more than sixteen beds. b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program with more than sixteen beds the incurred direct medical costs of an eligible. individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	16			appropriated amount may be allocated for residential substance use disorder	
 b. The remaining appropriation must be allocated for residential programs with sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program. with more than sixteen beds the incurred direct medical costs of an eligible. individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	17			services administered by licensed substance abuse treatment programs with	
 sixteen or fewer beds, nonresidential outpatient, and ancillary substance use disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program with more than sixteen beds the incurred direct medical costs of an eligible individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	18			more than sixteen beds.	
 disorder services administered by licensed substance abuse treatment programs. c. The department may reimburse a licensed substance abuse treatment program. with more than sixteen beds the incurred direct medical costs of an eligible. individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount. appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	19		b.	The remaining appropriation must be allocated for residential programs with	
 c. The department may reimburse a licensed substance abuse treatment program with more than sixteen beds the incurred direct medical costs of an eligible. individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount. appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	20			sixteen or fewer beds, nonresidential outpatient, and ancillary substance use	
 with more than sixteen beds the incurred direct medical costs of an eligible. individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount. appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	21			disorder services administered by licensed substance abuse treatment programs.	
 individual who does not have resources to cover the medical costs. The department may develop rules and may not exceed the total amount appropriated for medical cost reimbursement. SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	22		С.	The department may reimburse a licensed substance abuse treatment program	
25department may develop rules and may not exceed the total amount26appropriated for medical cost reimbursement.27SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is28amended and reenacted as follows:2950-24.5-02.3. Basic care payment rates.301. The department shall determine limits for the care of residents of basic care facilities	23			with more than sixteen beds the incurred direct medical costs of an eligible	
26appropriated for medical cost reimbursement.27SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is28amended and reenacted as follows:2950-24.5-02.3. Basic care payment rates.301. The department shall determine limits for the care of residents of basic care facilities	24			individual who does not have resources to cover the medical costs. The	
 SECTION 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	25			department may develop rules and may not exceed the total amount	
 amended and reenacted as follows: 50-24.5-02.3. Basic care payment rates. 1. The department shall determine limits for the care of residents of basic care facilities 	26			appropriated for medical cost reimbursement.	
 29 50-24.5-02.3. Basic care payment rates. 30 1. The department shall determine limits for the care of residents of basic care facilities 	27	SEC		N 31. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is	
30 1. The department shall determine limits for the care of residents of basic care facilities	28	amende	d and	d reenacted as follows:	
	29	50-2	24.5-0	02.3. Basic care payment rates.	
31 that qualify as vendors of an aged, blind, and disabled persons program and for	30	1.	The	e department shall determine limits for the care of residents of basic care facilities	
	31		that	t qualify as vendors of an aged, blind, and disabled persons program and for	

	-	-		
1		implementing provisions of this chapter based on data demonstrating the most recent		
2	costs that must be incurred for the care of residents in efficiently and economically			
3	operated basic care facilities. The department shall determine the limits every four			
4	years by July first, beginning with July 1, 2023.			
5	2. The department shall establish the limits by using the median rates from the most			
6		recent data available. The direct care limit must be the median plus eighteen percent.		
7	7 The indirect care limit must be the median plus twelve percent.			
8	3.	For the rate year beginning July 1, 2023, the department shall increase rates and		
9		limits three and one-half percent for inflation. For the rate year beginning July 1, 2024,		
10		the department shall increase rates and limits three and one-half percent for inflation.		
11	4.	The department shall provide a rate increase in the amount of five dollars per day for		
12		the period beginning July 1, 2023, and ending June 30, 2025 2027, after which the		
13		increase is not effective. This rate increase may not be included in any calculation of		
14		inflation increase.		
15	5.	Within the limits of legislative appropriations, the department shall establish an		
16		uncompensated care expense of three hundred sixty-five days.		
17	SECTION 32. AMENDMENT. Section 50-33-05 of the North Dakota Century Code is			
18	amende	d and reenacted as follows:		
19	50-3	33-05. State of residence.		
20	Only	/ child care assistance units physically residing within the boundaries of the state are		
21	eligible for child care assistance; unless the individual is employed by an early childhood			
22	program within the boundaries of the state and the individual has been approved for the state's			
23	child care assistance child care workforce benefit.			
24	SECTION 33. HOUSING AVAILABILITY ASSESSMENT - COLLABORATION WITH			
25	HOUSING FINANCE AGENCY. The department of health and human services shall collaborate			
26	with the North Dakota housing finance agency and other appropriate stakeholders to assess the			
27	availability of housing for individuals requiring extraordinary health care support services, for the			
28	biennium beginning July 1, 2025, and ending June 30, 2027. Based on the results of the			
29	assessment, if necessary, the department shall develop a plan to expand access to housing			
30	providing the least restrictive environment for individuals requiring extraordinary health care			
31	support services.			

1	SEC		N 34. BEHAVIORAL HEALT	TH CLINICS, NORTH DAKOTA STATE HOSPITAL,
2	AND LIFE SKILLS AND TRANSITION CENTER FUNDING. Section 1 of this Act includes			
3	funding for the behavioral health clinics, North Dakota state hospital, and life skills and transition			
4	center a	is foll	ows:	
5	1.	1. Behavioral health clinics:		
6		a.	Salaries and wages	\$167,581,103
7		b.	Operating and capital	<u>64,763,965</u>
8		C.	Total	\$232,345,068
9	2.	Stat	te hospital:	
10		a.	Salaries and wages	\$ 73,941,551
11		b.	Operating and capital	<u>320,880,155</u>
12		C.	Total	\$394,821,706
13	3.	Life	skills and transition center:	
14		a.	Salaries and wages	\$ 57,799,213
15		b.	Operating and capital	<u>15,207,658</u>
16		C.	Total	\$ 73,006,871
17	SECTION 35. LEGISLATIVE MANAGEMENT STUDY - STUDENT TRUANCY AND			
18	ABSENTEEISM. The legislative management shall consider studying, during the 2025-26			
19	interim, truancy and student absenteeism in kindergarten through grade twelve public schools.			
20	The legislative management shall report its findings and recommendations, together with any			
21	legislation necessary to implement its recommendations, to the seventieth legislative assembly.			
22	SECTION 36. LEGISLATIVE MANAGEMENT STUDY - ANTIOBESITY MEDICATION -			
23	MEDICAID. The legislative management shall consider studying, during the 2025-26 interim,			
24	the feasibility and desirability of the state's medical assistance program providing coverage for			
25	the treatment of obesity, including coverage for intensive behavioral therapy, bariatric surgery,			
26	and antiobesity medication approved by the United State food and drug administration. The			
27	legislative management shall report its findings and recommendations, together with any			
28	legislation necessary to implement its recommendations, to the seventieth legislative assembly.			
29	SEC		N 37. EFFECTIVE DATE. Se	ection 30 of this Act becomes effective on July 1, 2026.