

NORTH DAKOTA LEGISLATIVE MANAGEMENT

Minutes of the

HUMAN SERVICES COMMITTEE

Tuesday, September 11, 2018
Roughrider Room, State Capitol
Bismarck, North Dakota

Representative Kathy Hogan, Chairman, called the meeting to order at 9:00 a.m.

Members present: Representatives Kathy Hogan, Bert Anderson, Pamela Anderson, Daniel Johnston, Dwight Kiefert, Mary Schneider, Greg Westlind; Senators Howard C. Anderson, Jr., David A. Clemens, Robert Erbele, David Hogue, Oley Larsen, Judy Lee, Tim Mathern

Members absent: Representatives Chuck Damschen, Christopher D. Olson, Wayne A. Trottier

Others present: Representative Corey Mock, Grand Forks, member of the Legislative Management
Allen H. Knudson, Legislative Council, Bismarck
See [Appendix A](#) for additional persons present.

It was moved by Senator Mathern, seconded by Representative Schneider, and carried on a voice vote that the minutes of the July 27, 2018, meeting, be approved as distributed.

STUDY OF PUBLIC HUMAN SERVICES
Social Service Redesign Project

Mr. Christopher D. Jones, Executive Director, Department of Human Services, presented an update ([Appendix B](#)) on the social service redesign project. He said the project is based on the principles of the Department of Human Services (DHS) which are to provide quality, efficient, and effective services. He said services should be provided consistently across delivery areas to promote equity of access. He said individuals should be the focus of a delivery system and investing in community resources and other prevention efforts can reduce the number of individuals utilizing social services programs.

Mr. Jones said the redesign project may result in the reorganization of the structure of human services delivery. He said one option is to use multi-county zones for the delivery of services. He said the zones would have advisory boards consisting of representatives of the areas being served.

Mr. Jones said DHS implemented a child protective services assessment redesign pilot project. He said the pilot project is adjusting existing processes and procedures in an effort to reduce the time needed to conduct an assessment. He said the outcomes of the pilot project will be available for review during the 2017 legislative session.

In response to a question from Senator H. Anderson, Mr. Jones said the child protective services pilot project is eliminating the use of interdisciplinary teams. He said in some counties, the interdisciplinary teams only met weekly or monthly which caused delays in completing assessments.

In response to a question from Chairman Hogan, Mr. Jones said a secondary review by a supervisor is needed for child protective cases when interdisciplinary teams are not used. He said the pilot project is using a ratio of one supervisor for six child protection service workers. He said county social services boundaries are being eliminated and resources are being shared to ensure consistent ratios across service delivery areas.

In response to a question from Senator Mathern, Mr. Jones said transitioning to a zone delivery model for social services would adjust certain job responsibilities. He said directors of each zone would be state employees with other zone employees remaining county employees.

In response to a question from Senator Lee, Mr. Jones said transitioning to a zone delivery model for social services would reduce some administrative positions. He said the vacant positions could be reclassified to service delivery positions.

In response to a question from Chairman Hogan, Mr. Jones said DHS has statutory authority to establish multi-county social service districts. He said it appears statutory changes are not needed to establish social service delivery zones.

In response to a question from Senator H. Anderson, Mr. Jones said it is a priority for each delivery zone to have an advisory board to connect with local communities.

Implementation of Behavioral Health Recommendations

Ms. Pamela Sagness, Director, Behavioral Health Division, Department of Human Services, presented an update ([Appendix C](#)) regarding the status of implementing recommendations included in the Human Services Research Institute (HSRI) report of the state's behavioral health system. She said the HSRI report included more than 65 recommendations in 13 categories. She said DHS has contracted with HSRI to begin implementing the recommendations. She said the recommendations affect multiple divisions within DHS, including behavioral health, children and family services, field services, and medical services.

Senator Mathern said one recommendation included in the HSRI report appears to expand the free through recovery program to provide services to individuals outside the correctional system.

Ms. Sagness said DHS is reviewing options and estimated costs to provide a community behavioral health program to individuals outside the correctional system.

In response to a question from Chairman Hogan, Ms. Sagness said DHS is implementing an electronic health records system. She said the system is anticipated to be implemented in November 2018.

Chairman Hogan said the electronic health records system will provide consistent data that will be analyzed and used to improve the delivery of services.

Senator Clemens expressed concern regarding the promotion of alcohol in the state. He said some institutions of higher education may be promoting the use of alcohol by serving alcohol at sporting events and promoting other events, such as tailgating, which have a high level of alcohol use. He said there is an inconsistent message being delivered by state agencies and institutions regarding substance abuse.

Ms. Sagness said the culture of the state relating to the use of alcohol has a major effect on drug and alcohol use in the state. She said recent changes have clarified that the DHS Behavioral Health Division has an advocacy role regarding substance abuse prevention.

In response to a question from Senator H. Anderson, Ms. Sagness said approximately 4 percent of the population of the state has a severe mental illness. She said approximately 17 percent of the population of the state has a mental health issue but may not need services provided by DHS. She said DHS is focusing its efforts on serving the 4 percent of the population with a severe mental illness.

Consideration of Bill Drafts

At the request of Chairman Hogan, the Legislative Council staff reviewed the following bill drafts:

- A bill draft [[19.0279.01000](#)] to provide an appropriation for behavioral health prevention and early intervention services;
- A bill draft [[19.0280.02000](#)] to implement a community behavioral health program;
- A bill draft [[19.0281.02000](#)] to provide an appropriation to coordinate the implementation of behavioral health study recommendations;
- A bill draft [[19.0282.01000](#)] to provide an appropriation for targeted case management; and
- A bill draft [[19.0305.01000](#)] to implement a peer support services certification program.

Senator H. Anderson said the bill drafts include several appropriations for various programs and purposes. He said DHS already may be planning to add funding for certain programs and purposes as part of the budget development process and the appropriations in the bill drafts could be duplicative.

Senator Mathern said the appropriations committees review the executive budget and other bills, including interim committee bills containing appropriations, as part of the budget development process. He said the committees may combine appropriations of interim committee bills into the agency's main appropriation bill.

Chairman Hogan said interim committee bills ensure items identified as high priority by interim committees are considered by the appropriate standing committees during a legislative session.

Senator Lee said the interim committee bills are part of the information considered by policy and appropriations committees during a legislative session. She said the executive budget is a recommendation and the Legislative Assembly has the duty to prepare a final budget for the state.

Chairman Hogan called for public comment and committee discussion regarding each of the bill drafts presented by the Legislative Council staff.

Bill Draft to Provide an Appropriation for Behavioral Health Prevention and Early Intervention Services

[19.0279.01000]

In response to a question from Senator Mathern, the Legislative Council staff said the appropriation in the bill draft would be in addition to any existing funding in the DHS budget for behavioral health prevention and early intervention services.

Ms. Krisanna Peterson, Bismarck, provided comments to the committee. She expressed support for prevention and early intervention funding. She said early intervention efforts can be used to identify mental health or other issues in young children. She said it is important to identify and address any issues as soon as possible.

Representative P. Anderson said prevention and early intervention efforts have the ability to save the state money in the future. She said it is important to account for the savings when appropriating funding for the efforts.

In response to a question from Senator Mathern, Ms. Sagness said there is approximately \$100,000 in the current biennium DHS budget for prevention and early intervention services.

In response to a question from Senator Erbele, Ms. Sagness said the Governor's office has been involved in strategic planning discussions regarding behavioral health. She said the Governor's office has identified behavioral health as a priority area.

In response to a question from Representative Schneider, Ms. Sagness said a 2016 Surgeon General's Report stated providing \$1 of funding for prevention services results in a savings of \$64 of treatment and other costs. She said the bill is a starting point for providing funding for prevention and early intervention services. She said additional funding is needed but the total amount needed has not been determined.

In response to a question from Chairman Hogan, Mr. Tom Eide, Director of Field Services, Department of Human Services, said the intent of the bill drafts being considered by the committee aligns with the priorities of the department.

It was moved by Senator Mathern, seconded by Representative P. Anderson, and carried on a roll call vote that the bill draft to provide an appropriation for behavioral health prevention and early intervention services be approved and recommended to the Legislative Management. Representatives Hogan, B. Anderson, P. Anderson, Johnston, Kiefert, Schneider, and Westlind and Senators H. Anderson, Clemens, Hogue, Lee, and Mathern voted "aye." Senators Erbele and Larsen voted "nay."

Bill Draft to Implement a Community Behavioral Health Program [19.0280.02000]

Ms. Katie Jo Armbrust, Outreach Coordinator, Grand Forks Housing Authority, expressed support for a community behavioral health program. She said her organization provides tenancy support services to assist individuals in obtaining housing. She said providing behavioral health services will assist individuals in maintaining the ability to remain in housing.

In response to a question from Senator Larsen, Ms. Armbrust said Grand Forks has developed a permanent supportive housing facility to address chronic homelessness. She said peer support and recovery groups are invited to the facility to provide services to residents.

Ms. Trina Gress, Vice President, Community Options, Bismarck, provided comments ([Appendix D](#)) to the committee. She suggested language be added to the bill draft to identify specific services, such as housing and employment support, to be provided through the community behavioral health program.

Ms. Gress said under the free through recovery program, community providers receive \$400 per month to provide care coordination and recovery services to individuals. She said part of the monthly payment is for peer support services. She said there may be agreements with other agencies to coordinate services provided to an individual.

In response to a question from Representative Schneider, Ms. Gress said it may be more appropriate for peer support services funding to be paid directly to peer support specialists rather than to a care coordination agency. She said an individual may be more comfortable receiving services from a peer support specialist not associated with the care coordination agency.

Chairman Hogan said the bill draft allows for a broad array of services to be provided to an individual and does not list each specific allowable service.

In response to a question from Representative P. Anderson, Mr. Allen H. Knudson, Legislative Budget Analyst and Auditor, said the Legislative Assembly may appropriate funding for an upcoming biennium but cannot appropriate funding for any subsequent bienniums.

Senator Mathern said it may be more appropriate to expand the free through recovery program to allow individuals outside a correctional setting to participate in the program rather than creating a separate program.

Chairman Hogan suggested the bill draft be revised to remove references to the "behavioral health division." She said the program would affect multiple divisions of DHS.

Senator Lee said the committee needs to be aware of the amount of appropriations included in the bill drafts being considered by the committee. She said due to budget constraints the committee may need to prioritize which concepts and bill drafts to support.

Representative Schneider suggested revising the bill draft to remove the appropriation.

Senator Lee said it may not be appropriate to establish a program but not provide funding for the program.

It was moved by Senator Mathern and seconded by Representative Schneider to revise the bill draft to remove references to the "behavioral health division" and to remove Section 2 of the bill draft which provides an appropriation for the community behavioral health program.

It was moved by Senator Lee, seconded by Senator Larsen, and carried on a voice vote to divide Senator Mathern's proposed revision into two divisions. Division "A" is to remove references to the "behavioral health division" and division "B" is to remove the appropriation for the community behavioral health program.

Division "A" passed on a voice vote.

Division "B" failed on a voice vote.

It was moved by Senator Mathern, seconded by Representative P. Anderson, and carried on a roll call vote that the bill draft, as revised, to implement a community behavioral health program be approved and recommended to the Legislative Management. Representatives Hogan, B. Anderson, P. Anderson, Kiefert, Schneider, and Westlind and Senators H. Anderson and Mathern voted "aye." Representative Johnston and Senators Clemens, Erbele, Hogue, Larsen, and Lee voted "nay."

Bill Draft to Provide an Appropriation to Coordinate the Implementation of Behavioral Health Study Recommendations [19.0281.02000]

Senator Mathern distributed an alternative bill draft ([Appendix E](#)) for consideration by the committee. He said the alternative bill draft provides an appropriation of \$180,000 to implement the recommendations of the behavioral health study and requires DHS to provide updates to the Legislative Management during the 2019-20 interim regarding the status of implementing the recommendations.

Chairman Hogan said several state agencies, including the State Department of Health and Department of Public Instruction, will be involved in the implementation of the behavioral health study recommendations. She said the bill draft provides an appropriation to DHS to coordinate the implementation.

Representative P. Anderson said the behavioral health study recommendations also affect agencies that address workforce issues.

Senator Erbele said the bill draft includes authorization for 1.5 full-time equivalent (FTE) employee positions. He said the positions may not be needed if DHS is reorganizing to create efficiencies and reduce unnecessary positions.

Chairman Hogan said the appropriations committees will review the FTE position authorizations and determine if they are needed.

It was moved by Representative Schneider, seconded by Representative P. Anderson, and carried on a roll call vote that the bill draft to provide an appropriation to coordinate the implementation of behavioral health study recommendations be approved and recommended to the Legislative Management. Representatives Hogan, B. Anderson, P. Anderson, Kiefert, Schneider, and Westlind and Senators H. Anderson, Erbele, Larsen, Lee, and Mathern voted "aye." Representative Johnston and Senators Clemens and Hogue voted "nay."

Senator Mathern said the bill draft recommended by the committee addresses the same issues identified in the bill draft he distributed. He said no action is needed on the bill draft he distributed.

Bill Draft to Provide an Appropriation for Targeted Case Management [19.0282.01000]

Chairman Hogan said the Legislative Assembly recently approved changes to the structure of DHS relating to child and adults with severe mental health and substance abuse issues. She said the bill draft expands the core services to other areas such as homelessness and individuals affected by severe emotional disturbance.

It was moved by Senator Mathern, seconded by Senator Lee, and carried on a roll call vote that the bill draft to provide an appropriation for targeted case management be approved and recommended to the Legislative Management. Representatives Hogan, B. Anderson, P. Anderson, Johnston, Kiefert, Schneider, and Westlind and Senators H. Anderson, Clemens, Erbele, Hogue, Larsen, Lee, and Mathern voted "aye." No negative votes were cast.

Bill Draft to Implement a Peer Support Services Certification Program [19.0305.01000]

Ms. Rebecca Quinn, Program Director, University of North Dakota School of Medicine and Health Sciences Center for Rural Health, Grand Forks, provided comments to the committee. She said the Center for Rural Health has contracted with DHS to develop training for peer support specialists. She said over 100 individuals have received training through the program. She said she supports having a central entity certifying peer support specialists.

In response to a question from Chairman Hogan, Ms. Quinn said funding for the training program was provided through a \$500,000 general fund appropriation approved by the 2017 Legislative Assembly for increasing the availability of behavioral health services in the state. She said there is no funding to continue the program beyond the 2017-19 biennium.

In response to a question from Representative Schneider, Ms. Quinn said individuals completing peer support specialist training are issued a certificate of completion. She said there is no certification provided to the individual.

In response to a question from Senator Mathern regarding whether an occupational board should be used to certify peer support specialists, Ms. Quinn said an occupational board may not provide the necessary training and support needed for the program.

In response to a question from Senator Larsen, Ms. Quinn said there have been discussions with other peer support groups, such as Alcoholics Anonymous, regarding the delivery of peer support services. She said a certified peer support specialist would be an advanced level of peer support that is part of an individual's care plan.

Ms. Sagness said peer support specialists participating in the free through recovery program must have a certificate issued by the program before providing services. She said in other states with peer support services certification, it has been found the use of a professional licensing board is not as effective as having certification through a state agency.

In response to a question from Representative Schneider, Ms. Sagness said peer support services are not reimbursed through Medicaid. She said DHS is reviewing options to allow peer support specialists to receive Medicaid reimbursement.

It was moved by Senator Mathern, seconded by Representative Schneider, and carried on a roll call vote that the bill draft to implement a peer support services certification program be approved and

recommended to the Legislative Management. Representatives Hogan, B. Anderson, P. Anderson, Kiefert, Schneider, and Westlind and Senators H. Anderson, Clemens, Erbele, Lee, and Mathern voted "aye." Representative Johnston and Senators Hogue and Larsen voted "nay."

Other Information

Chairman Hogan said the State Department of Health plans to provide additional information to committee members regarding the department's role in behavioral health.

STUDY OF THE TOMPKINS REHABILITATION AND CORRECTIONS CENTER

Chairman Hogan said the committee received an update at the last committee meeting from a representative of the Governor's office regarding a proposal to reorganize the management and operation of the Tompkins Rehabilitation and Corrections Center. She said a representative of the Governor's office indicated there is no new information available regarding the proposal.

Chairman Hogan said the committee has not approved any bill drafts or formal recommendations regarding the study of the Tompkins Rehabilitation and Corrections Center. She said the final committee report will summarize the information received by the committee relating to the study and will not include any recommendations.

STUDY OF REFUGEE RESETTLEMENT

At the request of Chairman Hogan, the Legislative Council staff reviewed a memorandum entitled [Human Services Committee - Information Received Regarding Refugee Resettlement](#). The Legislative Council staff said the memorandum, which was presented at the previous meeting, summarizes information received by the committee as part of its study on refugee resettlement. He said the memorandum has been updated to include information received at the last committee meeting.

Chairman Hogan said the committee has not approved any bill drafts or formal recommendations regarding the study of refugee resettlement. She said the final committee report will include all of the information received by the committee relating to the study and will not include any recommendations.

OTHER COMMITTEE RESPONSIBILITIES

Autism Spectrum Disorder Task Force Report

Ms. Krista Fremming, Deputy Director, Medical Services Division, Department of Human Services, presented a report ([Appendix F](#)) on the autism spectrum disorder plan as required under North Dakota Century Code Section 50-06-32. She said the Autism Spectrum Disorder Task Force meets four times per year to review:

- Early intervention family support services that would enable an individual with autism spectrum disorder (ASD) to remain in the least restrictive home- or community-based setting;
- Programs that transition individuals from schools to adult day programs or employment;
- The cost of providing services; and
- The nature and extent of federal resources that may be directed to the provision of services for individuals with ASD.

Ms. Fremming said the task force has identified the following draft goals for children from birth through age 18:

- Assure individuals with suspected ASD receive an appropriate diagnosis as soon as possible;
- Review and provide recommendations on the current centralized locations for information on ASD; and
- Establish a model identifying training and education opportunities that address the needs of diverse stakeholders.

Ms. Fremming said the task force has identified the following draft goals for adults age 18 and over:

- Identify the needs and services gaps for adults with ASD;
- Strengthen supports for transitions from adolescent to adult services; and
- Develop more opportunities for adults with ASD to be valued contributing members of their communities based on their unique strengths, differences, and challenges.

Ms. Fremming said the task force will meet in October 2018 to review any potential changes to the state ASD plan.

In response to a question from Senator Larsen, Ms. Fremming said the Insurance Commissioner recently issued a bulletin relating to ASD. She said the bulletin requires insurance companies that provide coverage for ASD to pay for costs relating to applied behavioral analysis therapy.

Home- and Community-Based Services

Ms. Fremming presented information ([Appendix G](#)) regarding the Money Follows the Person grant program. She said the purpose of the program is to move eligible individuals from institutions to community settings. She said program funds may be used for one-time moving costs, transition coordination services, nursing backup services, and community-based services. She said 426 individuals have been transitioned from institutions to community settings since the program began in 2007.

In response to a question from Chairman Hogan, Ms. Fremming said DHS is reviewing options to implement the Money Follows the Person program concept in other department programs.

In response to a question from Representative P. Anderson, Ms. Fremming said she will provide the committee with information regarding where program recipients were transitioned from and where the recipients currently reside.

Ms. Nancy Nikolas-Maier, Director, Aging Services Division, Department of Human Services, presented information ([Appendix H](#)) regarding the service payments for elderly and disabled (SPED) and Expanded SPED programs. She said the programs provide services for individuals who are older or physically disabled to allow the individuals to live independently. She said examples of services provided include chore services, homemaker services, and home-delivered meals. She said state statute requires county social service offices to provide case management services for the programs.

Ms. Nikolas-Maier said to qualify for the SPED program, an individual must have less than \$50,000 of available liquid assets. She said an individual also must meet functional assessment requirements based on impairments in activities of daily living. She said there are 1,161 individuals receiving services through the SPED program.

Ms. Nikolas-Maier said to qualify for the Expanded SPED program, an individual must be Medicaid eligible and have income below specified levels. She said an individual also must meet functional assessment requirements based on impairments in activities of daily living. She said there are 186 individuals receiving services through the Expanded SPED program.

In response to a question from Chairman Hogan, Ms. Nikolas-Maier said the functional eligibility requirements for the programs have not been changed recently.

In response to a question from Representative P. Anderson, Ms. Nikolas-Maier said she will provide information to the committee regarding the number of applicants not eligible for the programs based on functional assessments.

In response to a question from Representative P. Anderson, Ms. Nikolas-Maier said a SPED program case manager must be a licensed social worker.

In response to a question from Senator Lee, Ms. Nikolas-Maier said the income limit levels of the SPED sliding fee scale were last adjusted in 2009.

In response to a question from Chairman Hogan, Ms. Nikolas-Maier said Medicaid home- and community-based services waiver recipients must require the same level of care as an individual in a nursing home. She said approximately 300 individuals receive care through the waiver program.

Mr. Mike Chaussee, Associate State Director for Advocacy, AARP North Dakota, provided comments to the committee. He said it is encouraging to hear discussion regarding how to improve programs to allow individuals to remain in their homes instead of being placed in a long-term care facility. He said of people age 65 or older in the state, 31 percent are living alone. He expressed concern regarding a lack of knowledge among elderly individuals regarding available home- and community-based services.

Mr. Douglas Wegh, Director, Hettinger County Social Services, provided comments to the committee. He said some individuals may need home services but do not qualify for the SPED or Expanded SPED programs. He said some counties have used local funding to develop home- and community-based programs that have fewer eligibility requirements than the SPED program.

At the request of Chairman Hogan, the Legislative Council staff presented a memorandum entitled [Legislative Action Affecting the Service Payments for Elderly and Disabled and Expanded Service Payments for Elderly and Disabled Sliding Fee Schedules](#). The Legislative Council staff said since 2003, the Legislative Assembly has adjusted the SPED sliding fee schedule twice. In 2003, legislative intent was passed that provided for reductions in the fee schedule and to divide the fee schedule into two separate schedules with the use of each schedule dependent upon whether an individual has over \$25,000 of liquid assets. In 2009, the Legislative Assembly appropriated additional funding to increase the income limit levels of the sliding fee schedules based on cost of living increases.

Consideration of Bill Drafts

At the request of Chairman Hogan, the Legislative Council staff reviewed the following bill drafts:

- A bill draft [[19.0274.01000](#)] to establish a sliding fee schedule for the SPED program;
- A bill draft [[19.0275.01000](#)] to create a pilot program for independent home- and community-based services case managers; and
- A bill draft [[19.0276.02000](#)] to require DHS to establish guidelines for long-term care services providers to deliver home- and community-based services.

Chairman Hogan asked for public comment and committee discussion regarding the bill drafts.

Bill Draft to Establish a Sliding Fee Schedule for the Service Payments for Elderly and Disabled Program [[19.0274.01000](#)]

Ms. Mary Devlin, Dakota Central Social Services, provided comments to the committee. She said the Expanded SPED program does not use a sliding fee scale to determine program participation percentages.

Ms. Quinn said in addition to serving an elderly population, many individuals who receive home- and community-based services are under the age of 65 and have a physical disability.

Mr. Chaussee said he supports the bill drafts being considered by the committee that will provide more access and services to allow individuals to remain in their home.

It was moved by Senator Mathern, seconded by Representative P. Anderson, and carried on a voice vote to revise the bill draft to remove Section 2 relating to a sliding fee schedule for the Expanded SPED program.

In response to a question from Chairman Hogan, the Legislative Council staff said the sliding fee schedule inflationary adjustments in the bill draft would not apply retroactively.

Senator H. Anderson suggested the sliding fee schedule be adjusted by DHS each biennium rather than adjustments being made automatically based on a price index.

It was moved by Senator H. Anderson, seconded by Senator Larsen, and carried on a voice vote to revise the bill draft by changing Section 1 of the bill draft to read "The department shall establish biennially a sliding fee scale based on family size and income to determine a recipient's participation fee percentage for services received through the service payments for elderly and disabled program."

It was moved by Senator Mathern, seconded by Representative P. Anderson, and carried on a roll call vote that the bill draft, as revised, to establish a sliding fee schedule for the services payments for elderly and disabled program be approved and recommended to the Legislative Management. Representatives Hogan, B. Anderson, P. Anderson, Schneider, and Westlind and Senators H. Anderson, Clemens, Erbele, Hogue, Larsen, Lee, and Mathern voted "aye." No negative votes were cast.

Bill Draft to Create a Pilot Program for Independent Home- and Community-Based Services Case Managers [[19.0275.01000](#)]

Ms. Katie Ferguson, Community Living Services, Fargo, provided comments regarding the bill draft. She said the bill draft would expand case management services to provide better service to individuals. She said some individuals may not be receiving appropriate case management services and it would be beneficial to allow individuals to have options for a case management service provider.

In response to a question from Chairman Hogan, Ms. Ferguson said it would be appropriate to require an independent case manager to be a licensed social worker.

Representative P. Anderson said there may be an individual who is not a licensed social worker, such as a retired nurse, who could provide effective case management services.

In response to a question from Senator Mathern, Ms. Ferguson said there should be more awareness of home- and community-based services.

Ms. Tiffany Krumm, Program Director, Northland Care Coordination, Bismarck, provided comments ([Appendix I](#)) to the committee. She said her organization was awarded a grant to administer a care coordination service program. She said the program involved a team of providers interacting monthly with individuals in their homes to provide assistance and information. She said her organization would be interested in participating in an independent case management pilot program.

Mr. Wegh said increased awareness of the availability of home- and community-based services is needed. He said some processes have changed and many individuals go directly to long-term care facilities when being discharged from a hospital. He said in the past social workers would have more contact with hospital discharge planners regarding services needed by individuals being discharged from a hospital.

In response to a question from Senator Larsen, Mr. Wegh said there may be instances when a medical provider recommends an individual being discharged from a hospital be placed in a long-term care facility rather than returning to the individual's home.

Senator H. Anderson said the committee should consider removing the requirement that an independent case manager must be a licensed social worker.

Representative P. Anderson said she supports removing the requirement for an independent case manager to be a licensed social worker. She said the number of case managers should be increased to provide more services to allow individuals to remain in their homes.

In response to a question from Senator Lee, Ms. Nikolas-Maier said federal regulations define a case manager as a willing and capable person who meets the qualifications set by the state.

In response to a question from Chairman Hogan, Ms. Maggie D. Anderson, Medical Services Division Director, Department of Human Services, said there are different qualifications for case managers based on program requirements. She said there should be a measurable qualification for a case manager to ensure competence. She said DHS establishes the case manager qualifications for most department programs.

Senator Lee said DHS should have the ability to set the qualifications for case managers.

In response to a question from Senator Mathern, Ms. M. Anderson said medical services case managers are not required to be a licensed social worker.

It was moved by Senator Mathern, seconded by Senator Lee, and carried on a voice vote to revise the bill draft to remove the pilot program provisions relating to medical assistance home- and community-based services and to allow the department more flexibility to determine the requirements of the pilot program relating to SPED and Expanded SPED.

It was moved by Senator Mathern, seconded by Senator Lee, and carried on a roll call vote that the bill draft, as revised, to create a pilot program for independent home- and community-based services case managers be approved and recommended to the Legislative Management. Representatives Hogan, B. Anderson, P. Anderson, Schneider, and Westlind and Senators H. Anderson, Clemens, Erbele, Hogue, Larsen, Lee, and Mathern voted "aye." No negative votes were cast.

Bill Draft to Require the Department of Human Services to Establish Guidelines for Long-Term Care Services Providers to Deliver Home- and Community-Based Services [19.0276.02000]

Senator Lee distributed an email ([Appendix J](#)) from Ms. Shelly Peterson, President, North Dakota Long Term Care Association, regarding the bill draft.

Senator H. Anderson said the email from Ms. Peterson indicates there are barriers for long-term care providers offering home- and community-based services. He said the bill draft may be a starting point to address the barriers.

Chairman Hogan said many concerns regarding long-term care facilities providing services are due to federal regulations and rules.

Representative Westlind said there have been instances where home health care has been discontinued in a rural area due to federal rules and regulations. He said he supports approving the bill draft as distributed.

Senator Erbele said long-term care providers have indicated federal regulations are a major challenge in providing care. He said federal regulations generally are not in the best interest of the individuals being served.

In response to a question from Representative P. Anderson, Chairman Hogan said the bill draft provides legislative intent and broadens the interface between long-term care and home- and community-based services.

Senator Clemens said it appears long-term care providers already are providing home- and community-based services and the bill draft is not necessary.

It was moved by Senator H. Anderson, seconded by Senator Larsen, and carried on a roll call vote that the bill draft to require DHS to establish guidelines for long-term care services providers to deliver home- and community-based services be approved and recommended to the Legislative Management. Representatives Hogan, B. Anderson, P. Anderson, Schneider, and Westlind and Senators H. Anderson, Hogue, Larsen, Lee, and Mathern voted "aye." Senators Clemens and Erbele voted "nay."

OTHER BUSINESS

It was moved by Senator H. Anderson, seconded by Senator Larsen, and carried on a voice vote that the Chairman and the Legislative Council staff be requested to prepare a report and the bill drafts recommended by the committee and to present the report and recommended bill drafts to the Legislative Management.

It was moved by Senator H. Anderson, seconded by Senator Larsen, and carried on a voice vote that the committee be adjourned sine die.

No further business appearing, Chairman Hogan adjourned the committee sine die at 2:50 p.m.

Brady A. Larson
Assistant Legislative Budget Analyst and Auditor

ATTACH:10