

House Appropriations, Human Resources Section | January 15, 2025 Representative Jon Nelson, Chairman

Presentation by Jessica Thomasson, Executive Director, Human Services Division

#1: Purpose of the Division and its programs

The Human Services Division is responsible for carrying out a range of "Powers and Duties of the Department"

- Social welfare and human service activity initiated by the federal govt
- Research and study in the causes of social problems & define effective techniques for prevention and rehabilitation
- Administration of SNAP, LIHEAP, housing stabilization
- Various licensing activities
- Wellbeing of children
- Child welfare, including CHINS, CHIPS and delinquent children
- Human Service Zone activities
- Special needs adoption, independent living services & Family First Prevention
- Life Skills Transition Center

50-06-05.1, Powers and duties of the department, (Effective through June 30, 2027)

The department has the following powers and duties to be administered by the department through its state office or regional human service centers, human service zones, or otherwise as directed by the department:

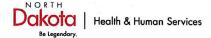
- To act as the official agency of the state in any social welfare or human service activity initiated by the federal government not otherwise by law made the responsibility of another state agency.
- To administer, allocate, and distribute any state and federal funds that may be made available for the purpose of providing financial assistance, care, and services to eligible persons and families who do not have sufficient income or other resources to provide a reasonable subsistence compatible with decency and health.
- To provide preventive, rehabilitative, and other human services to help families and individuals to retain or attain capability for independence or self-care.
- To do needed research and study in the causes of social problems and to define appropriate and effective techniques in providing preventive and rehabilitative services.
- To provide for the study, and to promote the well-being, of a child in need of protection, a child in need of services, and delinquent children.
- To provide for the placing and supervision of children in need of substitute parental care, subject to the control of any court having jurisdiction and control of any such child.
- To recommend appropriate human services related legislation to the legislative assembly.
- To direct and supervise human service zone activities and administer a statewide program for state-funded human services, staffing, and administration costs related to the administration of human services.
- 9. To secure, hold, and administer for the purpose for which it is established any property and any funds donated to it either by will or deed, or otherwise, or through court order or otherwise available to the department, and to administer those funds or property in accordance with the instructions in the instrument creating them or in accordance with the instructions in the court order or otherwise.



(cont.)

- 10. To formulate standards and make appropriate inspections and investigations in accordance with such standards in connection with all licensing activities delegated by law to the department, including early childhood programs, nonmedical adult care facilities and maternity homes, and persons or organizations receiving and placing children, and to require those facilities, persons, and organizations to submit reports and information as the department may determine necessary.
- To permit the making of any surveys of human service needs and activities if determined to be necessary.
- 12. To issue subpoenas, administer oaths, and compel attendance of witnesses and production of documents or papers whenever necessary in making the investigations provided for herein or in the discharge of its other duties. A subpoena may not be issued to compel the production of documents or papers relating to any private child-caring or child-placing agency or to compel the attendance as a witness of any officer or employee of those facilities except upon the order of a judge of the district court of the judicial district in which the facilities are located.
- 13. To provide insofar as staff resources permit appropriate human services, including social histories, social or social-psychological evaluations, individual, group, family, and marital counseling, and related consultation, when referred by self, parent, guardian, human service zone, court, physician, or other individual or agency, and when application is made by self (if an adult or emancipated youth), parent, guardian, or agency having custody; also, on the same basis, to provide human services to children and adults in relation to their placement in or return from the life skills and transition center, state hospital, or North Dakota youth correctional center.
- 14. To provide insofar as staff resources permit social services, including social-psychological evaluations, predisposition reports, treatment, and aftercare services when requested by the judge of a juvenile court.
- 15. To provide insofar as staff resources permit social services, including social-psychological evaluations, predisposition reports, and treatment, when requested by the judge in a criminal case.

- 16. To act as the official agency of the state in the administration of the supplemental nutrition assistance program and to direct and supervise human service zone administration of that program. The department with the consent of the legislative assembly or the budget section if the legislative assembly is not in session may terminate the program if the rate of federal financial participation in administrative costs provided under Public Law 93-347 is decreased or limited, or if the state or counties become financially responsible for all or a portion of the coupon bonus payments under the Food Stamp Act. Any request considered by the budget section must comply with section 54-35-02.9. The department may not deny assistance under the supplemental nutrition assistance program to any individual who has been convicted of a felony offense that has as an element the possession, use, or distribution of a controlled substance as defined in section 102(6) of the Controlled Substances Act [21 U.S.C. 802(6)].
- 17. To administer, allocate, and distribute any funds made available for the making of direct cash assistance payments, housing stabilization supports, and rental assistance and to promote cooperation and working agreements with public agencies and including the housing finance agency and department of commerce, and private human service agencies.
- 8. To act as the official agency of the state in the administration of the home energy assistance program; to direct and supervise human service zone administration of that program; and to take such actions, give such directions, and adopt such rules, subject to review in the courts of this state, as may be necessary or desirable to carry out this subsection. For purposes of the administration of the energy assistance program, funds are obligated at the earlier of the time a written commitment is made to pay a vendor or contractor for services or supplies delivered or to be delivered, or at the time payment is made to a vendor or contractor for services or supplies delivered or to be delivered. The provisions of this subsection concerning obligation of funds apply to



(cont.)

payments and commitments made on or after July 1, 1991. The department with the consent of the legislative assembly or the budget section if the legislative assembly is not in session may terminate the program if the rate of federal financial participation in administrative costs is decreased or limited to less than fifty percent of total administrative costs, or if the state or counties become financially responsible for all or a portion of the cost of energy assistance program benefits. Any request considered by the budget section must comply with section 54-35-02.9

- 19. To administer, allocate, and distribute any funds made available for the payment of the cost of the special needs of any child under the age of twenty-one years, who is living in an adoptive home and would probably go without adoption except for acceptance by the adopted family, and whose adopted family does not have the economic ability and resources, as established by the department, to take care of the special needs of the child, including legal fees, maintenance costs, medical and dental expenses, travel costs, and other costs incidental to the care of the child.
- To exercise and carry out any other powers and duties granted the department under state law.
- 21. To administer, allocate, and distribute any funds made available for the payment of supervised independent living services, to develop standards regarding a supervised independent living program, to approve supervised independent living services for the purpose of providing foster care placement, and to apply for and administer federal and other funds that may be made available to undertake any of the activities described in this subsection.
- 22. With the approval of the governor, to lease or transfer use of any part of the life skills and transition center facilities or properties, located in section thirteen, township one hundred fifty-seven north, range fifty-three west, located in Walsh County, North Dakota, to the federal government, or any public or private agency, organization, or business enterprise, or any worthy undertaking, under the following provisions:
 - a. The department determines that the facility or property is not needed to serve any present or reasonably foreseeable need of the life skills and transition center.
 - The transaction is exempt from the provisions of section 50-06-06.6.
 - c. The term of any lease may not exceed ninety-nine years.
 - d. All required legal documents, papers, and instruments in any transaction must be reviewed and approved as to form and legality by the attorney general.
 - Any funds realized by any transaction must be deposited in the state's general fund.

- 23. To act as a decedent's successor for purposes of collecting amounts due to the department or human service zone, unless otherwise directed or determined by the department. Any affidavit submitted by the department under section 30.1-23-01 must conform to the requirements of that section except that the affidavit may state that twenty days have elapsed since the death of the decedent.
- 24. To provide those services necessary for the department and for human service zones to comply with the provisions of any law, rule, order, or regulation of the United States or any federal agency or authority requiring civil service or merit standards or classifications as a condition for providing funds administered by the department.
- 25. For purposes of administration of programs, and subject to legislative appropriation, funds are obligated at the time a written commitment is made to pay a vendor or contractor for services or supplies either delivered or to be delivered. This subsection applies to payments and commitments made on or after January 1, 1997.
- 26. To determine eligibility for medical assistance and children's health insurance program benefits when the department receives a joint application for these benefits.
- 27. To develop a system of services and supports to provide behavioral health services and supports in the community for children at risk of or identified as having a behavioral health condition and for the families of these children. This system must include early intervention, treatment, and recovery services and supports and must interface with, but not include, child protective services or juvenile court.
- 28. To provide resources on mental health awareness and suicide prevention to the behavioral health resource coordinator at each public school and to the designated individual at a nonpublic school. The resources must include information on identifying warning signs, risk factors, and the availability of resources in the community, and also must include an evidence-based, online virtual mental health and suicide prevention simulation-based training program that incorporates hands-on practice, contextual learning, and personalized feedback through interactive role-playing. The provisions of chapter 54-44.4 do not apply to the online virtual mental health and suicide prevention simulation-based training program under this subsection.
- To administer, allocate, and distribute any funds made available for kinship care services and payments and services in response to the federal Family First Prevention Services Act as part of the Bipartisan Budget Act of 2018 [Pub. L. 115-123].
- 30. To contract with another human service zone or any other public or private person to discharge any of the department's duties or exercise any of the department's powers to administer human services.
- To act on behalf of the department of public instruction to administer part B, section 619 of the Individuals with Disabilities Education Act [Pub. L. 108-446; 229 Stat. 2647; 20 U.S.C. 1411 et seq.].
- 32. In the event of a disruption of operations, to provide meals at a fair value or without a charge to employees of the department at the North Dakota state hospital, life skills and transition center, and regional human service centers twenty-four hour staffed residential units as required by the job assignments of the employees.

NDCC References | Human Services Division

Adult & Aging Services

Chapter	Chapter Name
50-06	Department of Human Services
50-06.2	Comprehensive Human Services Programs
50-10.2	Rights of Health Care Facility Residents
50-10.2-02 (1)	Nursing Homes and Basic Care Facilities
50-11	Foster Care Homes for Children and Adults
50-24.1	Medical Assistance for Needy Persons
50-24.7	Expanded Service Payments for the Elderly and Disabled
50-25.2	Vulnerable Adult Protective Services
50-24.5	Aid to Aged, Blind, and Disabled Persons

Children & Family Services

Chapter	Chapter Name				
50-25.1	Child Abuse and Neglect				
50-11	Foster Care				
14-15	Adoption for Children				

Early Childhood

Chapter	Chapter Name
50-11.1	Early Childhood Services

Life Skills & Transition Center

Chapter	Chapter Name
25-04	Care of Developmentally Disabled



NDCC References | Human Services Division

Developmental Disabilities

Chapter	Chapter Name
25-01.2	Developmental Disability
25-16	Residential Care and Services for Developmentally Disabled
25-16.1	Receivers for Developmentally Disabled Facilities

Human Service Zones

Chapter	Chapter Name
50-01.1	Human Service Zones
50-35	State-Funded Human Services
50-06	Department of Human Services

Vocational Rehab

Chapter	Chapter Name	
50-06.1	Vocational Rehabilitation	

Economic Assistance

Chapter	Chapter Name
50-06	Department of Human Services
50-09	Aid to Dependent Children (Includes TANF)
50-33	Child Care Assistance

Child Support

Chapter	Chapter Name
14-09	Parent and Child
50-09	AFDC
14-12.2	Interstate Child Support
14-08.1	Civil remedies for child support
34-15	New hire reporting





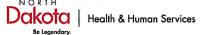
Core Functions

Money	Quality	Health &
Management	Standards	Safety Rules
Access to	Support for	Safety Net
Services	Professionals	Services

A system that is well-coordinated and highly functional provides the best opportunity to assure that good outcomes are being achieved for all North Dakotans.

Core Functions delivered by Human Service Division teams

	Money Mgmt	Quality Standards	Health & Safety Rules	Access to Services	Support to Professionals	Safety Net Services
Children & Family Svc	X	X	X	X	X	X
Early Childhood	X	X	X	X	X	X
Economic Assistance	X	X		X	X	X
Human Service Zone Ops	X	X		X		X
Child Support	X			X		
Vocational Rehab	x			X		
Developmental Disabilities	X	X	X	X	X	X
Adult & Aging Services	X	X	X	X	X	X
Disability Determination Svc				X		
Life Skills Transition Center		X	x	X	X	X



Human Services is a frontline resource for Family Stability

The Human Services Division is driven by the belief that communities are stronger when everyone has a chance to realize their full potential.

The teams that make up the Human Services Division, together with the state's Human Service Zones, strive to make appropriate services and supports available when and where people need them.

Our every action **centers on the person** and on helping that person find their way forward.

Children & Family Services

Early Childhood

Child Support

Economic Assistance

Vocational Rehab

Disability Determination

Human Service Zone Operations

Life Skills Transition Center

Developmental Disabilities

Aging & Adult Services

The Human Services Division is a frontline resource for North Dakotans encountering circumstances that threaten their family's stability.

Working together



Together with our state and local partners, the Human Services Division provides resources that help North Dakotans avoid crisis and experience greater stability



Deliver child protection, permanency and family wellbeing services through the network of Human Service Zones and other public and private partners.



Serve as a stabilizing resource for youth and adults with intellectual and/or developmental disabilities



Help assure that young families have access to high quality experiences for their children by supporting people and programs who provide early childhood services.



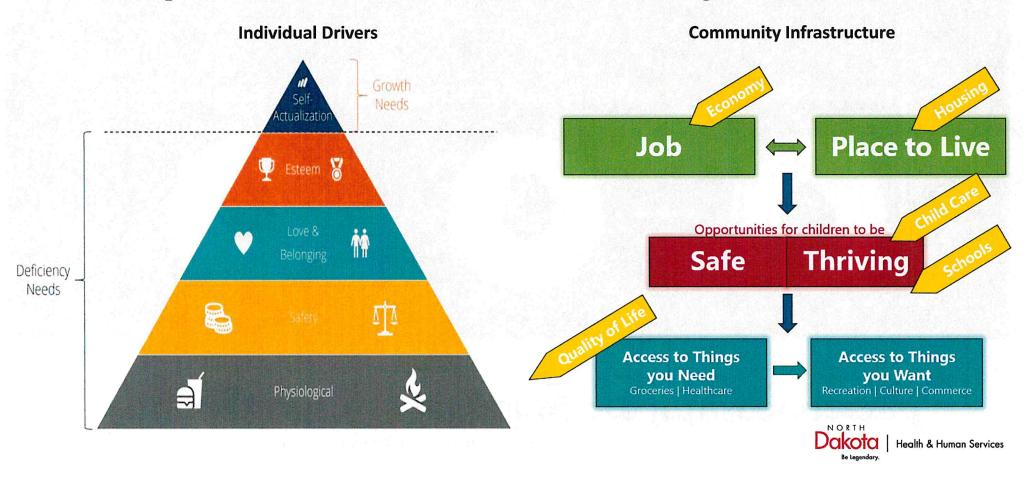
Work together with private partners to create robust **options for non-institutional living**, allowing older adults and people with disabilities (physical, developmental, intellectual) to **choose housing and services** that are right for them.



Provide access to a range of resources designed to help families who are struggling to make ends meet, including:

- Direct assistance for basic household budget expenses (food, utilities, housing, child care)
- Access to child support services
- Eligibility for health insurance via Medicaid and/or financial support via SSI/SSDI
- Employment supports both for people with disabilities and others who are actively working to improve their employment situation.

People are more alike than they are unalike

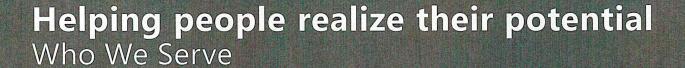


The threads that run through every person's life

Foundations of Wellbeing are Interconnected



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



At risk of disruption/instability

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

Need help restoring stability

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

Need supportive services to live as independently as possible

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

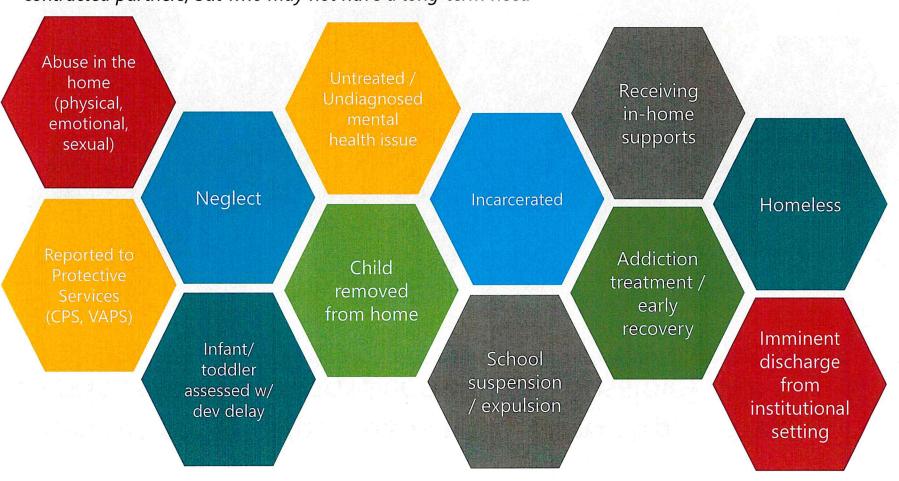
Who we serve: Who's at risk of disruption/instability?

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



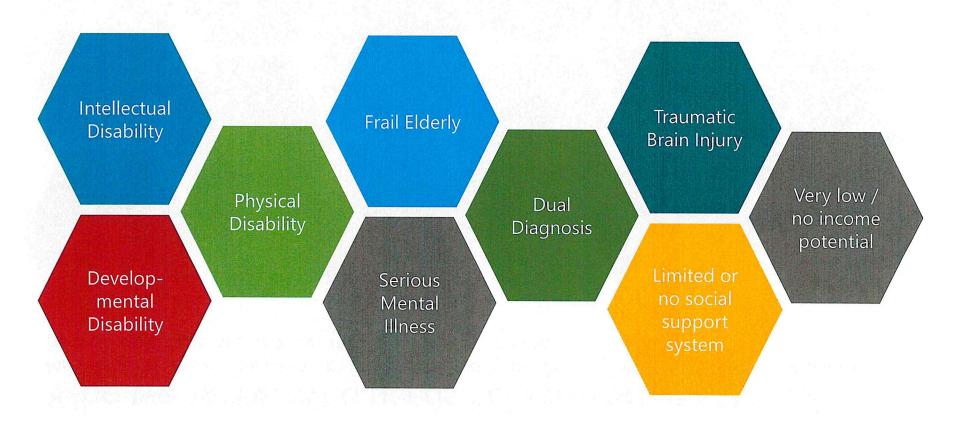
Who we serve: Who needs help restoring stability?

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



Who we serve: Who needs long-term supportive services to live as independently as possible?

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



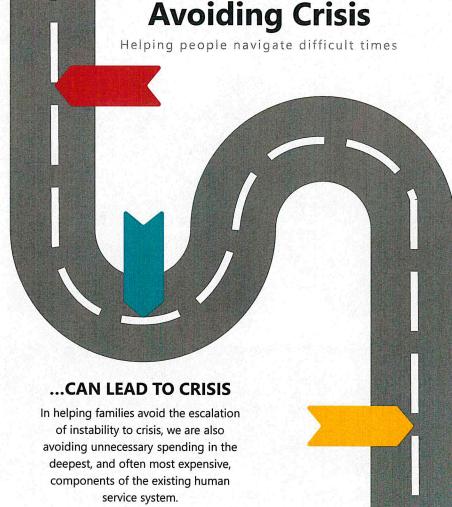
Human Services can be a frontline resource for stability and wellbeing Prevention | Early Intervention | Crisis Intervention | Long term supports



Building Stability by Avoiding Crisis

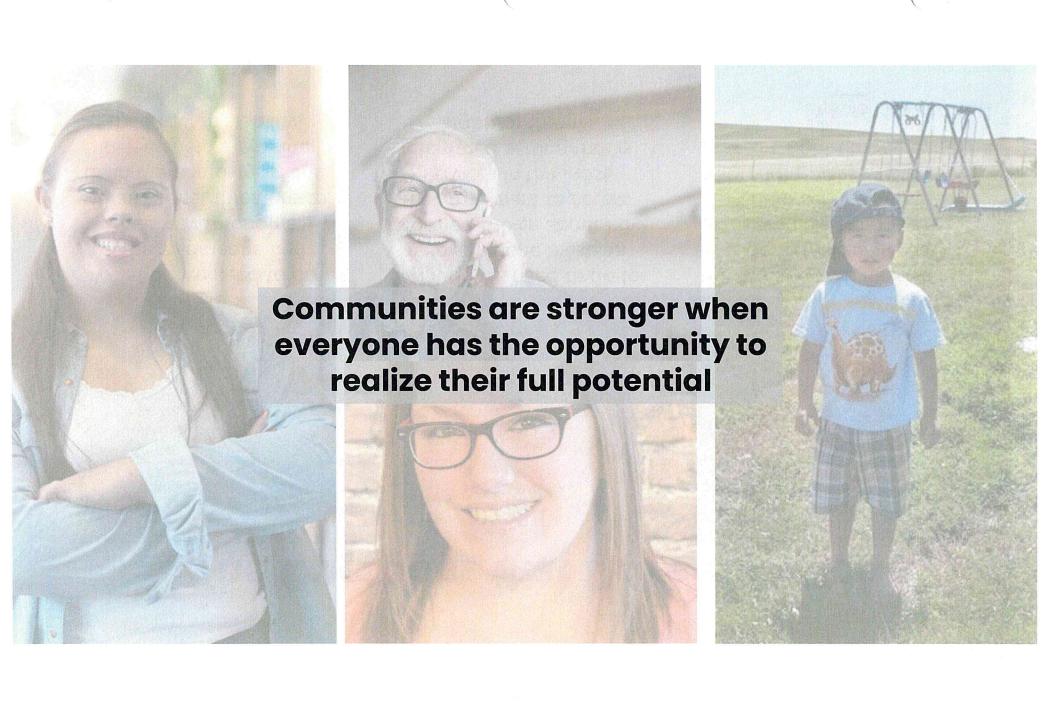
DISRUPTION

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



SERVICES SUPPORT STABILITY

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



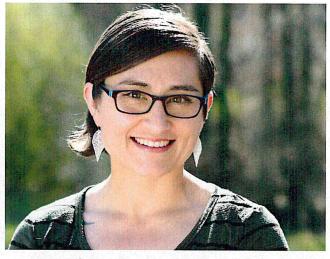
The Questions that Drive Our Work



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



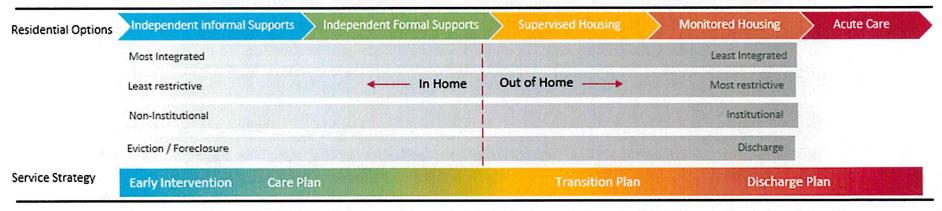
What do we need to do to help someone make an informed choice about how they may want to access services in the most integrated setting that is right for them?

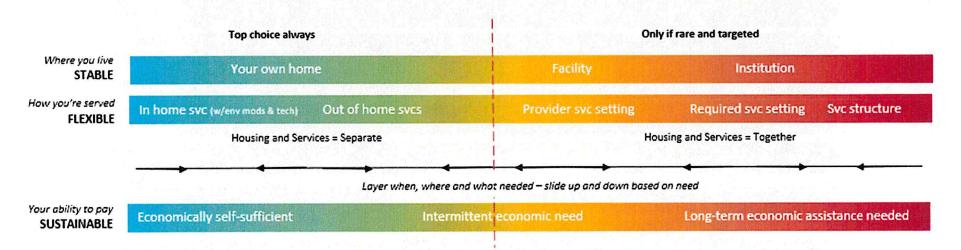


What do we need to do to make sure we are delivering the right service in the right place at the right time?

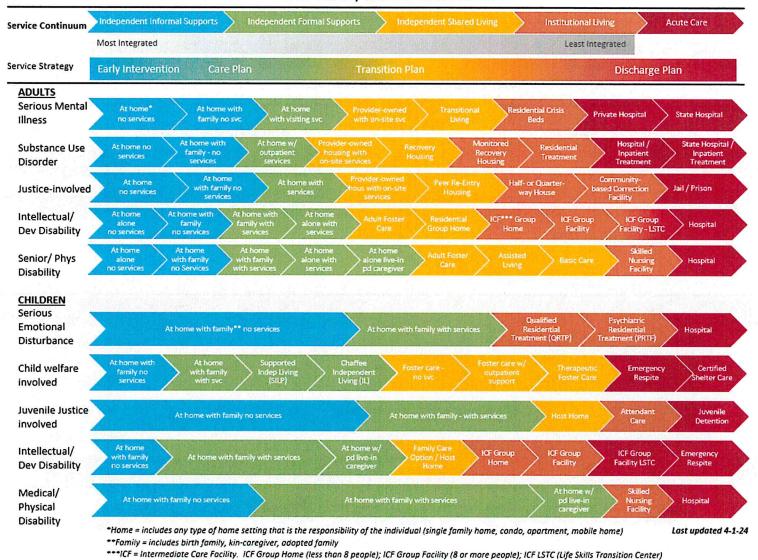


The Housing-Services Continuum





THE HOUSING / SERVICE CONTINUUM



HSD Threads relevant to Appropriations



- Growing a strong, stable workforce requires strong, stable families
 - Family caregiving supports
 - Child care as a stable resource
 - · Housing stability



- Filling gaps in the system of care can prevent crisis
- · Evolving safety net for targeted needs
- Preventing justice system involvement
- Complexity of layered / co-occurring factors
- Transition & diversion across housingservice continuum



- Pushing toward simplicity improves citizen experience
- Incremental progress
- · Person centered design
- Reduced administrative burden

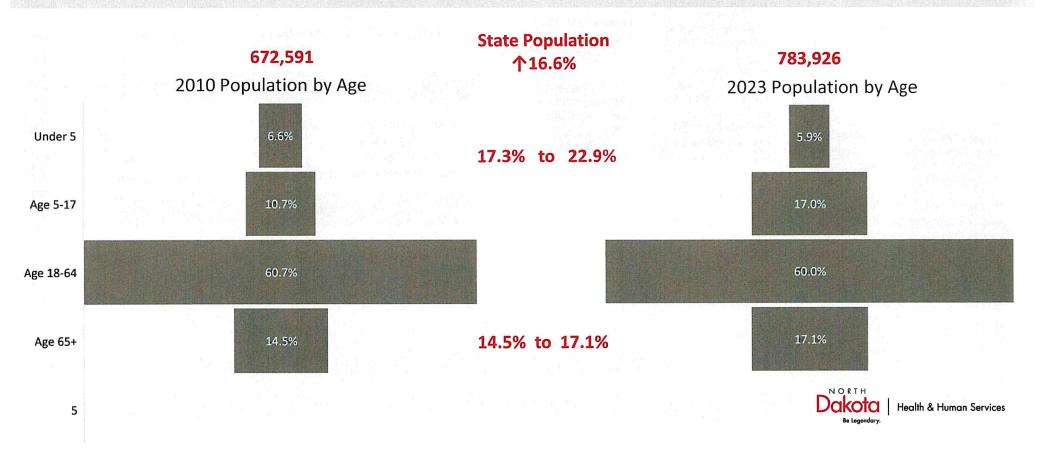
Growing a strong, stable workforce requires strong, stable families

- Family caregiving and home/community based supports
- Child care as a stable resource
- Housing stability

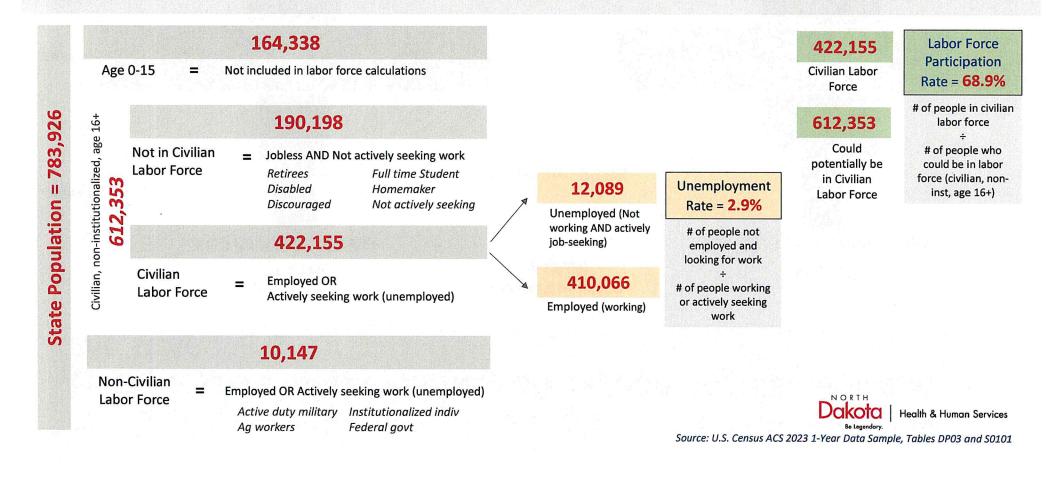




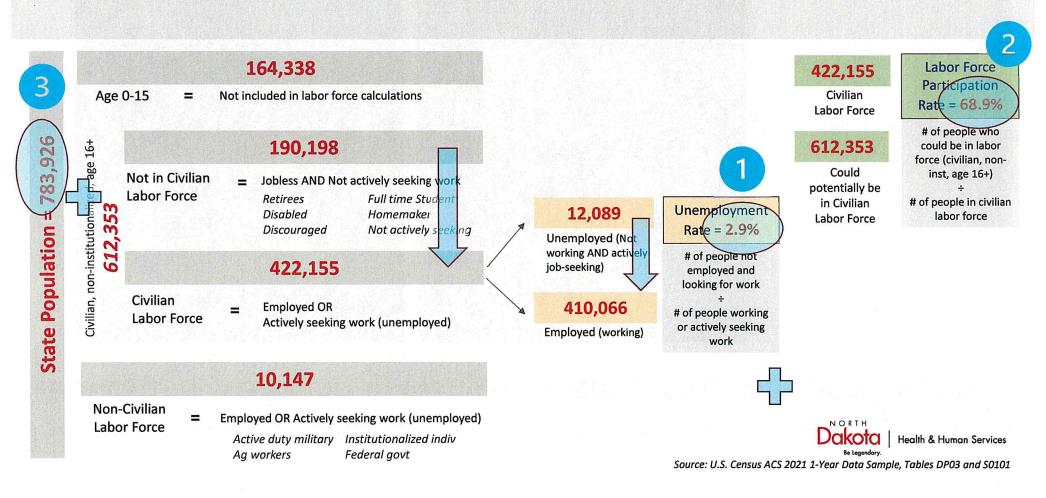
ND is getting both younger and older at the same time which puts pressure on the prime working age population living in the state



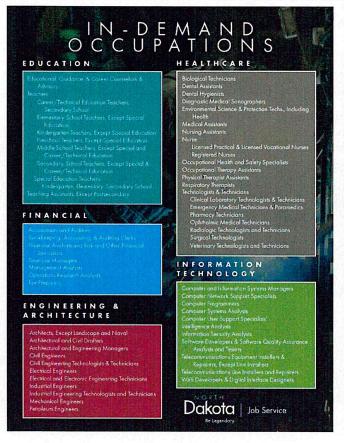
53.8% of North Dakota's population is considered to be in the civilian labor force (a.k.a. "the workforce")



Where are the opportunities to make an impact on available workforce?



In-demand occupations that require specialized training or education are found in many different sectors of the economy







46% of ND job openings pay an average hiring wage of <\$20/hr and require minimal training/education to start

December 2024 Job Openings Report

Distribution of Job openings by typical training required

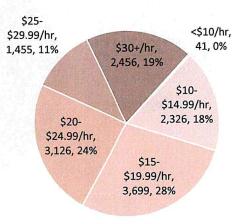
TOTAL	13,156		0%	20%	40%	60%	80%	1009
No training	6,582	50.2	EX DES		海洋植物			
Short-term on-the-job training	3,830	29.2			EMBERT STEELS			
Moderate-term on-the-job training	1,693	12.9	THE PARTY					
Long-term on-the-job training	399	3.0						
Apprenticeship	80	0.6	BERG					
Internship/residency	541	4.1						
Unassigned	31		[Unassig	gned openings e	excluded from distrib	ution calculation	ns]	

Distribution of Job openings by typical entry level education

TOTAL	13,156		0%	20%	40%	60%	80%	100%
No formal educational credential	2,901	22.1						
High school diploma or equivalent	3,323	25.3						
Postsecondary nondegree award	1,305	9.9	1974	CHATACHED.				
Associate's degree	536	4.1						
Bachelor's degree	4,124	31.4	100					
Master's degree	464	3.5						
Doctoral or professional degree	472	3.6						
Unassigned	31		[Unass	igned openings e	xcluded from distr	bution calculation	15]	

Source: Labor Market Information Center | Job Service ND | Dec 2024 Job Openings Report

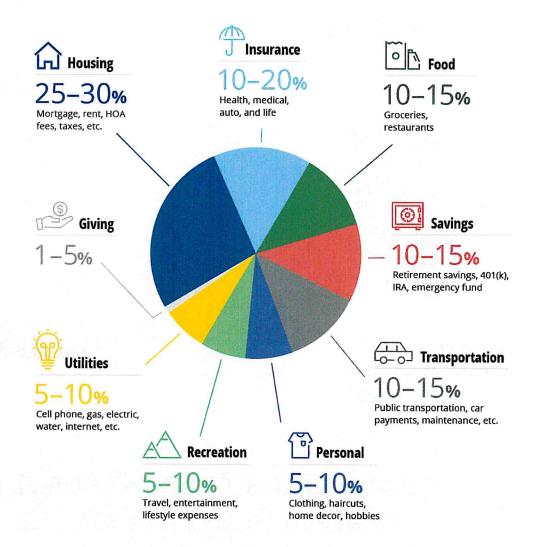
Distribution of Job openings by typical average wage





What does someone think about when they are looking for a job?

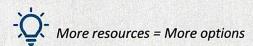
Interest
Aptitude
Purpose
Opportunity
Location
Income



What's missing from this picture?



Child Care



La Housing 25-30%

Mortgage, rent, HOA fees, taxes, etc.

Giving

Utilities

Cell phone, gas, electric, water, internet, etc.

Insurance

Health, medical

To be affordable **Child Care should** represent no more than 7% of a household budget

For many families with young children, child care costs are 15-40% of their gross household income

auto, and life

restaurants

Savings

Retirement savings, 401(k), IRA, emergency fund

Transportation

ublic transportation, car ayments, maintenance, etc.

Recreation

Travel, entertainment, lifestyle expenses

Personal

Clothing, haircuts, home decor, hobbies

Child care is one of the largest monthly costs for families with young children

WHAT DOES CHILD CARE COST?

Age 0-17 months

Center-based \$606 - \$1,835

Avg: \$1,065

Family/Groupbased

\$520 - \$1,410

Avg: \$802

Age 18-35 months

Center-based \$606 - \$1,675

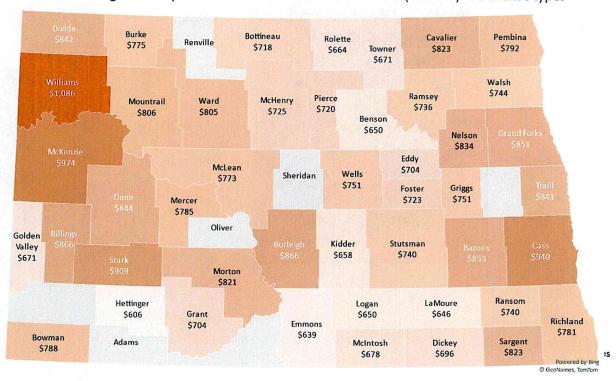
Avg: \$1,015

Family/Groupbased \$599 - \$1,300

Avg: \$791

Source: Oct 2024 Child Care Market Study conducted for ND Child Care Assistance Program

2024 Average monthly cost of licensed child care for infants (017 mo) - All license types



70% of jobs in the ND labor market pay an average wage of \$30/hour or less







Less than \$16 / hour
Childcare worker Waiter/Waitress Dishwasher Bartender Fast food cooks Cashiers Hotel clerk Maid/Housecleaner Farm Worker/Laborers

47,960# of people employed in a job with average wage of <\$16/hour represents
12% of total jobs

\$16 - \$22 / hour

Home health/PT aide
Personal care aide
Receptionist/secretary
Restaurant cook
Preschool teacher
Assemblers
Maintenance workers
Nursing assistant
Substitute teacher
Stocker/order filler
Landscaping/grounds
Janitor
Laundry/Dry cleaning

112,43028%

Legal secretary

Carpenter
Loan processor
Correctional officers
Auto service tech
Surgical tech
EMTs & paramedics
Roofer
Real Estate Sales
Lic Practical Nurse
Dental assistant
Firefighter
Clergy
Architectural drafter
Social worker
Hotel manager

\$22 - \$30 / hour

121,150

Light Truck driver

\$30 - \$38 / hour

Rotary drill operator
HR specialist
Accountant
Electrician
PR specialist
Counselor
Police
Registered Nurse
Comp network specialist
Speech pathologist
Production supervisor
Occupational therapist

64,390 *16%*

Industrial Engineer
Constr mgr
Gen/Op mgr
Dental hygienist
Loan officer
Lawyer
Sales mgr
Software dev
Veterinarian
Pharmacist
Physician
Dentist
Psychologist

>\$38 / hour

52,920

13%



Health & Human Services

Source: Job Service ND 2023 Employment and Wages by Occupation dataset | median wage by occupation; 386,920 jobs included in statewide wage summary

When is child care affordable?

Average monthly cost of infant and toddler care in a Child Care Center compared to household affordability (shown as 7% and 15% of before-tax household income)



1 child (9-month-old)

Center-based ava

\$838

Household income needed?

@7%... \$143,600

@15%... \$67,040

= combined hourly wage of

\$69/hr

\$32/hr



1 child (3-year-old)

Center-based ava

\$726

Household income needed?

@7%... \$124,400 **@15%...** \$58,080

= combined hourly wage of

\$60/hr *\$28/hr*



2 children (1-year-old and 4-year old)

Center-based avg

\$1,564

Household income needed?

@7%... \$268,100

@15%... \$125,120

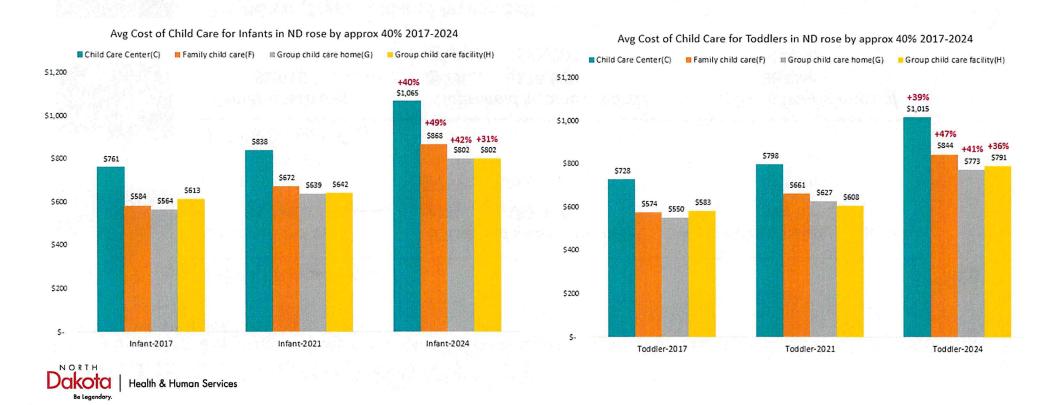
= combined hourly wage of

\$129/hr *\$60/hr*

Dakota | Health & Human Services

2021

Key Indicator: Child Care Access: Cost of Care Average Cost of Child Care by Type of Provider Average Infant and Toddler rates for 4 provider types as per triennial market rate survey



When is child care affordable?

Average monthly cost of infant and toddler care in a Child Care Center compared to household affordability (shown as 7% and 15% of before-tax household income)



1 child (9-month-old)

Center-based avg

\$1,082

Household income needed?

@7%... \$185,400

@15%... \$86,560

= combined hourly wage of

\$89/hr *\$41/hr*



1 child (3-year-old)

Center-based ava

\$1,015

Household income needed?

@7%... \$174,000

@15%... \$81,200

= combined hourly wage of

\$83/hr *\$39/hr*



2 children (1-year-old and 4-year old)

Center-based avg

\$2,097

Household income needed?

@7%... \$359,400

@15%... \$167,760

= combined hourly wage of

\$172/hr *\$80/hr*

Dakota | Health & Human Services

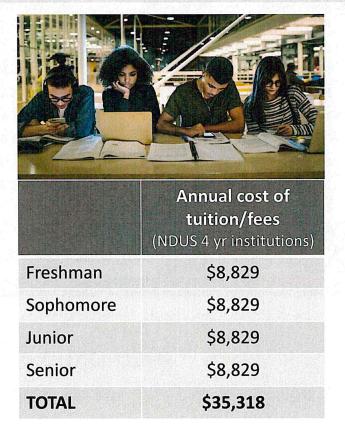
2024

Comparing the cost of child care to the cost of tuition/fees at a 4 year university in the NDUS

ND HHS Child Care Market Study Oct 2024 | NDUS Tuition/Fee Schedules 2024-25 academic year



	Annual cost of child care (all license types)
Age 0-1	\$10,368
Age 1-2	\$10,368
Age 2-3	\$10,028
Age 3-4	\$9,521
TOTAL	\$40,285





Most all households earning less than 150% of state median income (SMI) will struggle with costs of child care

Household Size	Families potentially eligible for CCAP							CCAP to WPCCR Jul 2025				WPCCR							
	30% SMI			60% SMI			75% SMI			85% SMI				100% SI	150% SMI				
	Annua Income		772	Annual Income	Hourly Wage	130000	Annual Income	Hourly Wage		Annual Income		Hourly Wage		Annual Income	Hourly Wage		Annual Income		Hourly Wage
2	\$ 23,359	\$11.23	\$	46,717	\$22.46	\$	58,397	\$28.08	\$	66,183	\$	31.82	\$	77,862	\$37.43	\$	116,793	\$	56.15
3	\$ 28,855	\$13.87	\$	57,710	\$27.74	\$	72,137	\$34.68	\$	81,755	\$	39.31	\$	96,183	\$46.24	\$	144,274	\$	69.36
4	\$ 34,351	\$16.51	\$	68,702	\$33.03	\$	85,877	\$41.29	\$	97,328	\$	46.79	\$	114,503	\$55.05	\$	171,755	\$	82.57
5	\$ 39,847	\$19.16	\$	79,694	\$38.31	\$	99,618	\$47.89	\$	112,900	\$	54.28	\$	132,823	\$63.86	\$	199,235	\$	95.79
6	\$ 45,343	\$21.80	\$	90,686	\$43.60	\$	113,358	\$54.50	\$	128,472	\$	61.77	\$	151,144	\$72.67	\$	226,716	\$	109.00
7	\$ 46,374	\$22.30	\$	92,747	\$44.59	\$	115,934	\$55.74	\$	131,392	\$	63.17	\$	154,579	\$74.32	\$	231,869	\$:	111.48
8	\$ 47,404	\$22.79	\$	94,808	\$45.58	\$	118,511	\$56.98	\$	134,312	\$	64.57	\$	158,014	\$75.97	\$	237,021	\$:	113.95
9	\$ 48,435	\$23.29	\$	96,870	\$46.57	\$	121,087	\$58.21	\$	137,232	\$	65.98	\$	161,449	\$77.62	\$	242,174	\$	116.43
10	\$ 49,465	\$23.78	\$	98,931	\$47.56	\$	123,663	\$59.45	\$	140,152	\$	67.38	\$	164,884	\$79.27	\$	247,326	\$	118.91
Family Co-Pay	y \$0 7% of HH inc			7% of HH inc		7% of HH inc				Costs >WPCCR stipend				Costs >WPCCR stipend					

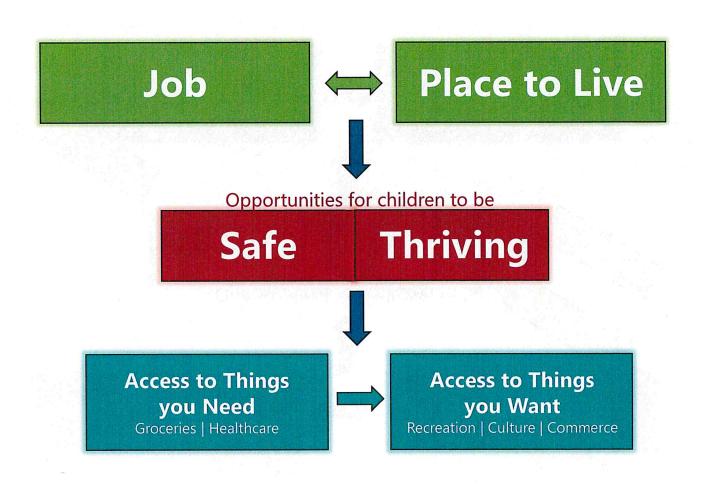
2023-24 State Median Income (SMI); Hourly wage is calculated assuming 2,080 hours worked per year per annual income range noted Multiple wage earners could combine earnings to attain the noted household (HH) income / hourly wage.

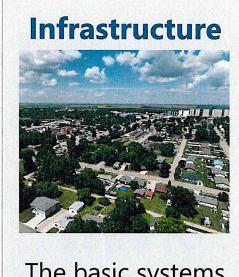






What does it take to Build a Life?





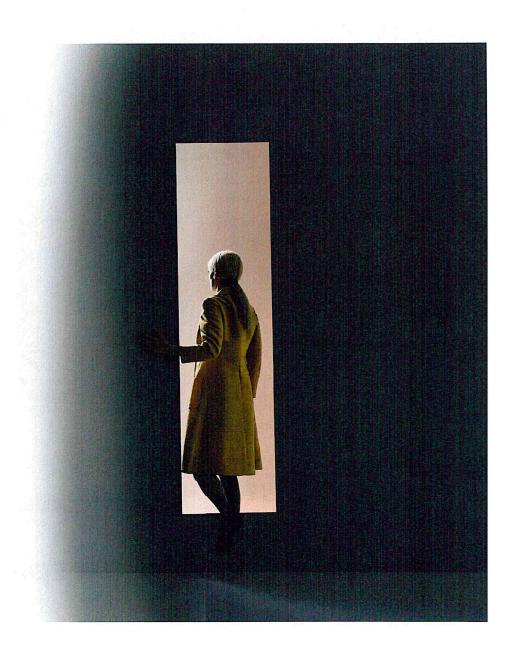
The basic systems and services that a community uses to work effectively



2 Filling gaps in the system of care can prevent crisis

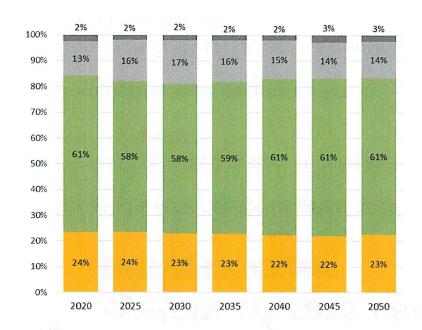
- Evolving safety net for targeted needs
- Preventing justice system involvement / re-involvement
- Complexity of co-occurring factors
- Transition & diversion across housingservice continuum
- Addressing both root causes and immediate symptoms

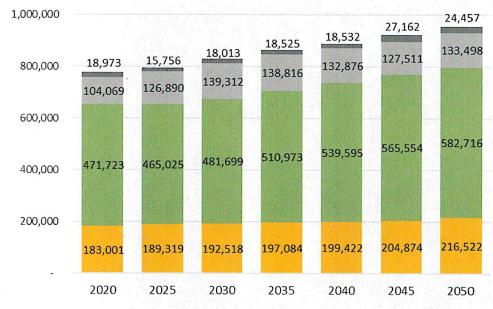




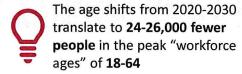
North Dakota Demographic Trends will put additional stress on workforce challenges

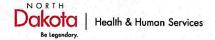
North Dakota Population Projections 2020-2050 | ND Department of Commerce State Data Center



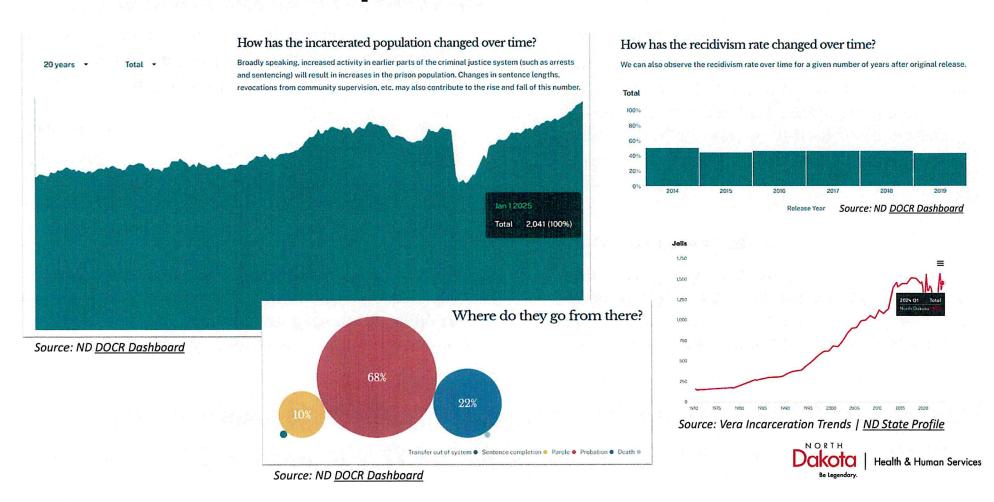


Source: ND 2024 Population Projection | State Data Center





Incarceration impacts families and communities



The body of evidence related to a concrete connection between material hardship and family distress has reached a tipping point

"Mothers entering substance use treatment who have difficulty securing child care are 82% more likely to self-report child neglect (compared to mothers entering treatment who don't have this difficulty)"

"Difficulty finding child care was a <u>stronger predictor of</u> <u>maternal neglect than almost any other factor measured in this study</u>, including mental health and severity of drug use."

-Cash, 2003

"Nearly 85% of families investigated by child protective services have **incomes** below 200% of the federal poverty line (\$49,720 for a family of 3 in 2023)"

-Dolan, 2011 - Nat'l Survey of Child & Adolescent Well-Being II Baseline

"Households that will experience a foreclosure filing in the next 6-12 months are at **70% greater risk of a CPS investigation** (compared to households that will not)"

-Berger, 2015 (WI data 2008-2011)

"Almost **70%** of families with incomes below 200% of the federal poverty line report experiencing a **material hardship** in the past year (difficulty paying for housing, utilities, food, or medical care. Of these families, **61%** experienced a **financial shock** in the past year."

-Urban Institute, 2018



Our knowledge of the relationship between material hardship and mental health is well established

Living with low income is associated with increased risk for poor mental health

Low-income mothers with young children are at particularly increased risk of depression

Studies estimate between 16% and 48% of low-income mothers with young children suffer from clinically significant depression

Longitudinal studies indicate that material hardship, in particular, is associated with & precedes poor mental health

Among low-income mothers with young children, experiencing a material hardship in the last 12 months is associated with an increased risk for depression

For these mothers, the risk of depression increases with a **greater number** of material hardships reported

(Sarcen, 2011) (Austin, 2017) (Lanzi, 1999) (Heflin, 2009) (Manual, 2012)

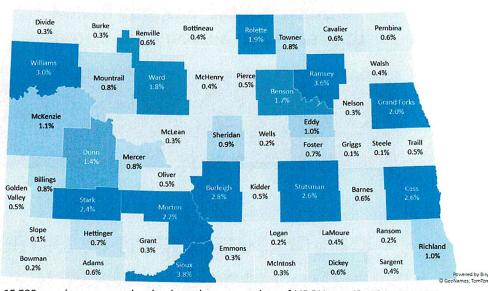




Housing crisis is a de-stabilizing force

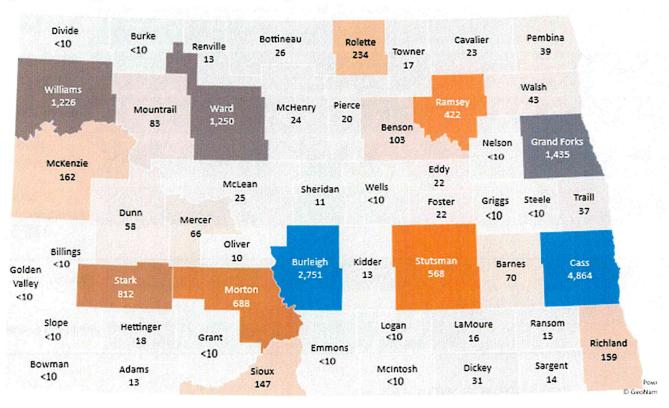
Homelessness

An individual or family who lacks a fixed, regular, adequate nighttime residence. This includes a living situation where you are temporarily doubled up with another household.

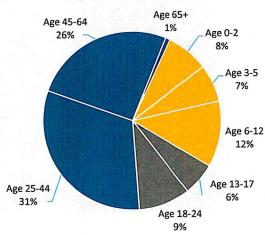


15,528 people were experiencing homelessness at time of NDRH app (Oct 21 – Dec 23) Shown as a % of total population by county

28% of the people experiencing homelessness were younger than 12 years old



Age at time of app



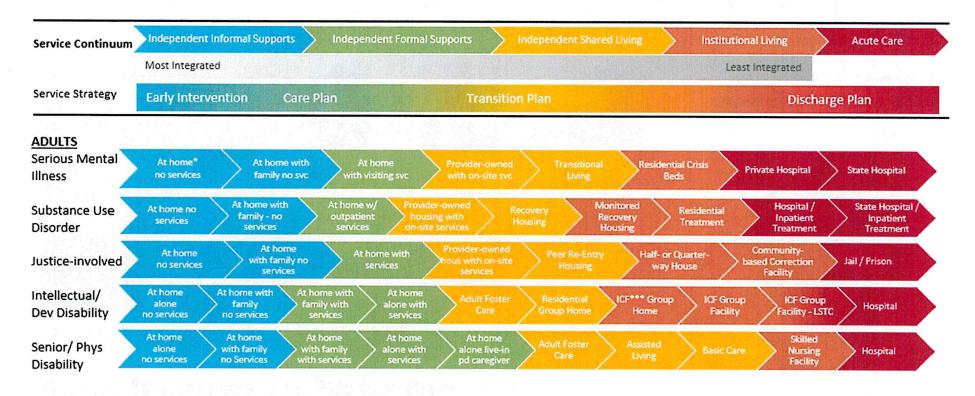
Living situations at time of app varied

- **17%** (1,588 households) **unsheltered** (living in vehicle or other public or private place)
- **44%** (4,156) **doubled up** (temporarily staying with friend of family)
- 9% (810) reported living in emergency shelter



The Housing-Service Continuum - Adults

A key concept defined



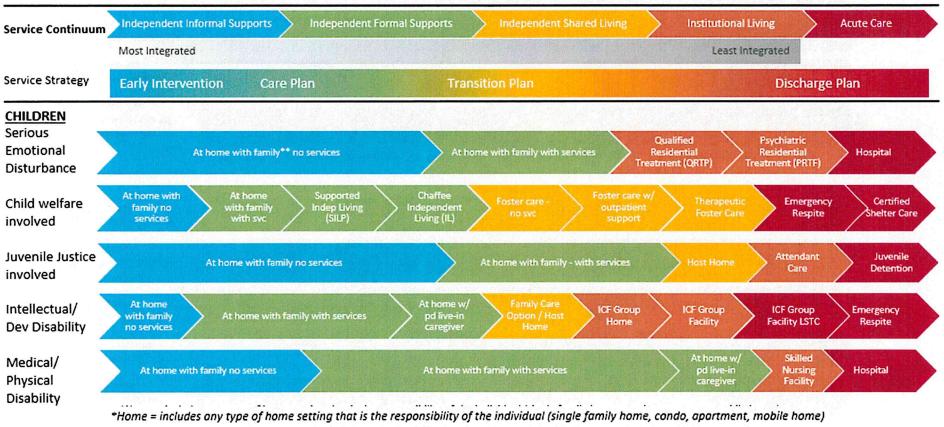
^{*}Home = includes any type of home setting that is the responsibility of the individual (single family home, condo, apartment, mobile home)

^{**}Fomily = includes birth family, kin-caregiver, adopted family

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

The Housing-Service Continuum - Children

A key concept defined



^{**}Fomily = includes birth family, kin-coregiver, adopted family

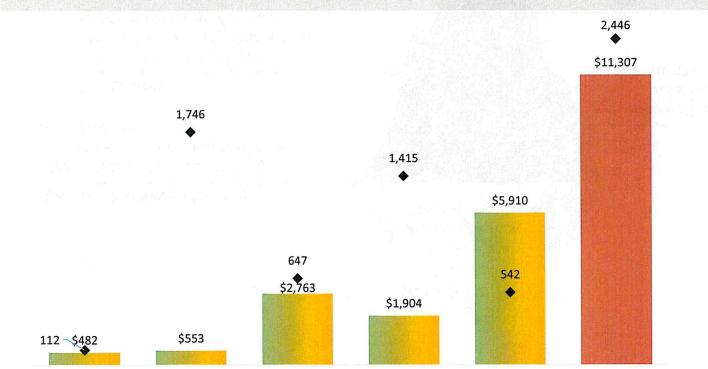
^{***}ICF = Intermediate Care Facility. ICF Group Home (less than 8 people); ICF Group Facility (8 or more people); ICF LSTC (Life Skills Transition Center)

Housing-Service Options vary across systems | Access is ultimately determined by a variety of factors

A child who is Child Welfare-involved could possibly be served in a number of ways



Connecting the Housing-Service Continuum to Budget **HHS-funded Long Term Care and Adult/Aging HCBS**Analysis of State Fiscal Year (SFY) 2024 claims data | Average cost/month | Avg utilization/month



Basic Care

HCBS Waiver

Nursing Home

MSP-PC

ExSPED

SPED

Eligibility criteria evaluate both a person's functional and financial needs.

- Ex-SPED is the in-home alternative to Basic Care
- HCBS waiver and MSP-PC are in-home alternatives to Nursing Homes
- SPED assists people with higher asset levels (up to \$50,000)



Connecting what we see and what we need to do

FAMILY INSTABILITY

Foster Care
Substance Abuse
Acting out at School
Mental Health crisis

Community-Based Service

Expand outpatient and communitybased services; Grow evidence-based service options

Prevention

Invest in prevention and early intervention, including attention to economic wellbeing of families

Access

Ensure all children and families have timely access to Behavioral Health svc; Expand quality child care; Connect housing and employment

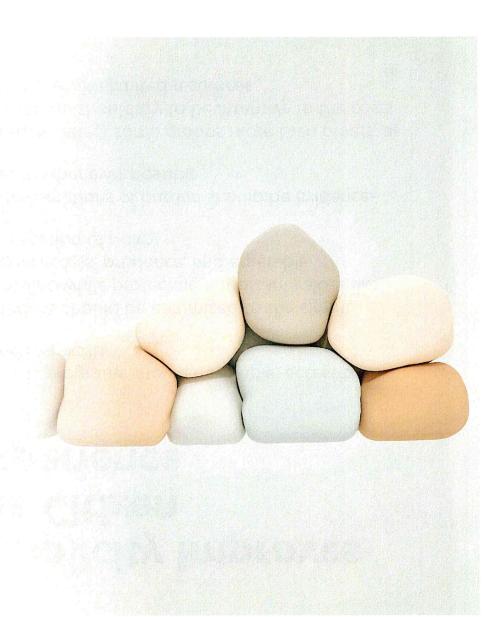
Integration

Enhance and streamline system of care for children and youth; Align assessment and eligibility practices; Embrace quality frameworks and tools to measure impact

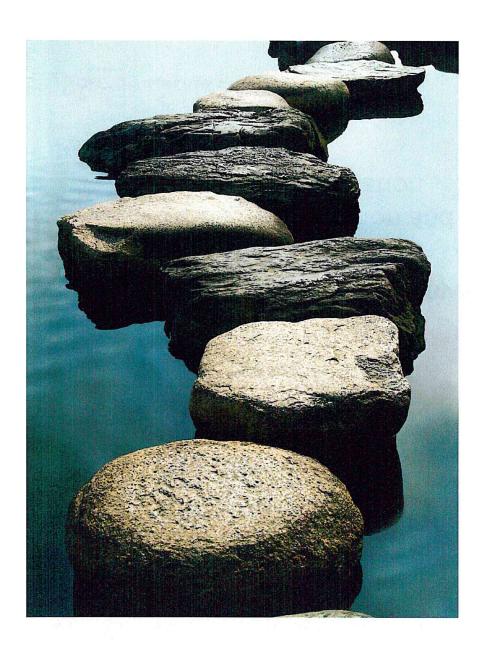


Pushing toward simplicity for a better citizen experience

- Incremental progress
- Person centered design
- Reduced administrative burden
- Care coordination and resource navigation







Simplicity Improves the Citizen Experience

- Public programs should be simple, accessible, and respectful
- Burdens should be minimized to the extent possible while protecting important values like equal access, prudence, and equitable application of policy
- Considerations of burden should be evidencebased whenever possible
- Burdens affect some groups more than others; as a state we should try to be attentive to the costs for those with limited resources

58







Principles of Person-Centered Systems

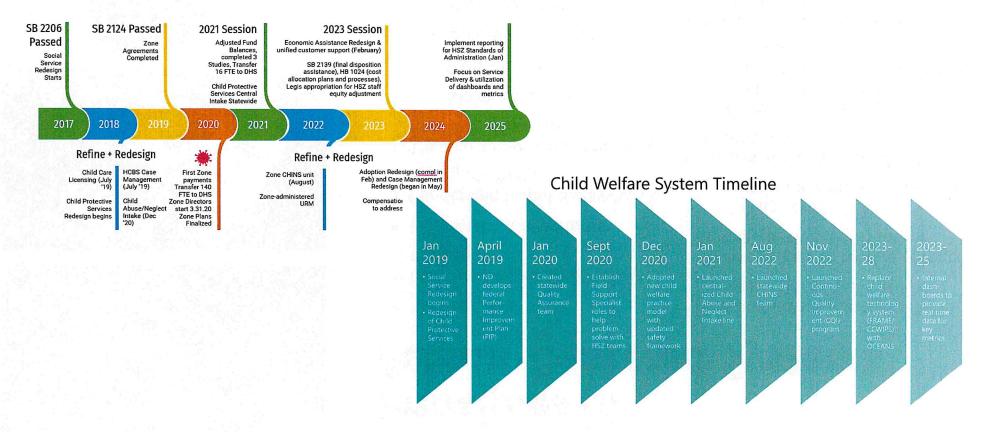
- I feel capable
- I am empowered to do what I need to do
- I know what I need to do
- I understand what the system is asking me to do
- The app knows who I am and uses that information to:
 - ✓ Make my journey easier
 - ✓ Path shorter
 - √ Success more likely
 - √ Experience better
- The app is set up to help me achieve my goal
- The app helps me discover things I may need

- The platform is available when I am, and so is help if I need it
- I have options to receive comms in the way that works for me
 - ✓ I can control how communication comes to me
- Help is available and I don't have to read to get it
 - ✓ Communication of information is not solely literacy based -- icons, colors, videos
- The app is easy enough for me to get it done in the time I have
- I can see the status of my account whenever I want



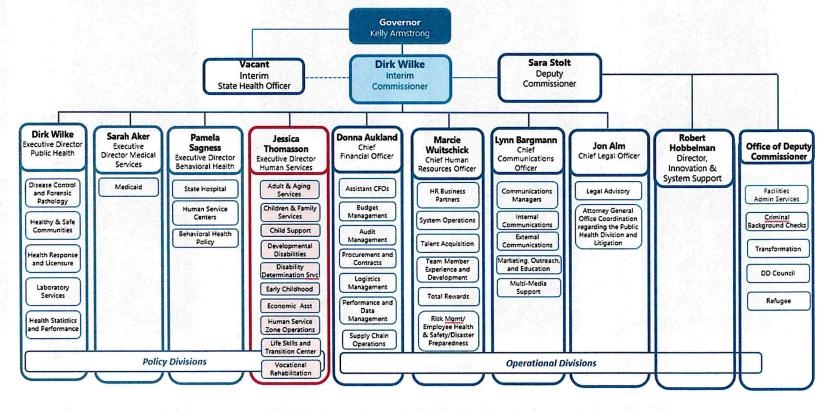
Incremental change <u>can</u> improve systems

ND Human Service Zone Implementation



The Human Services Division is one of four Policy- and Service-Focused teams at HHS

- 10 distinct sections
- 1,000+ employees, plus support of 920+ Human Service Zone team members
- Responsibility for \$2.1B budget





The Human Services Division is comprised of 10 teams



arly Childhood

 Build greater access to quality early childhood experiences, so children ages zero to five from al backgrounds and circumstances have the opportunity to realize their potential.



Life Skills Transition Center

 Serve as a specialized crisis and stabilization resource to the network of private residential facilities and the thousands of families who are caregivers for a loved one with intellectual and/o



• Facilitate delivery of programs and service that support child safe permanency and wellbeing, which toge are designed to preve and reduce incidence child abuse and negle and support family reunification and stab wherever possible.



Developmental Disabilities

 Provide support and training for individuals and families to maximize community and family inclusion, independence and self-sufficiency; to prevent institutionalization; and to enable institutionalize individuals to return to



Aging & Adult Services

 Facilitate delivery of programs and services that help older adults and adults with physical disabilities to live safely and productively in the least restrictive setting of their choosing.



Svc Zone Operations

Support the work of the Human Service Zones and Human Service Zone Boards, including review of HSZ Plans, as well as infrastructure support related to various HR and payed functions



Economic Assistance

Facilitate delivery of federal and state resources that support household economic health, including nutrition (SNAP), utility (LIHEAP), child care (CCAP) and housing stability assistance; eligibility for Medicaid coverage, and Temporary Assistance for Needy Families (TANF).



Child Support

 Provide support to parents, employers, and other partners to help ensure children receive courtordered financial and medica support to reduce child impoverishment.



Vocational Rehabilitation

 Help both high school students and adults with disabilities improve both the immediate job opportunities and long term career planning. Partner with businesses to find creative ways to hire or retain employees with disabilities.



Determination

Disability I

 Determine eligibility for medical disability (SSDI and/or SSI), using Social Security Administration (SSA guidelines, for people who are unable to work.



Health & Human Services



Children and Family Services Summary

23-25 Budget Base

\$180.2 million

23-25 Budget Approp

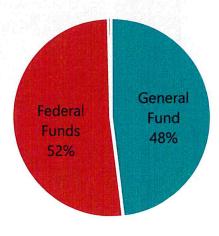
\$181.2 million

25-27 Budget Base

\$200.9 million (draft)

Facilitate delivery of programs and services that support child safety, permanency and wellbeing, which together are designed to prevent and reduce incidence of child abuse and neglect and support family reunification and stability wherever possible.

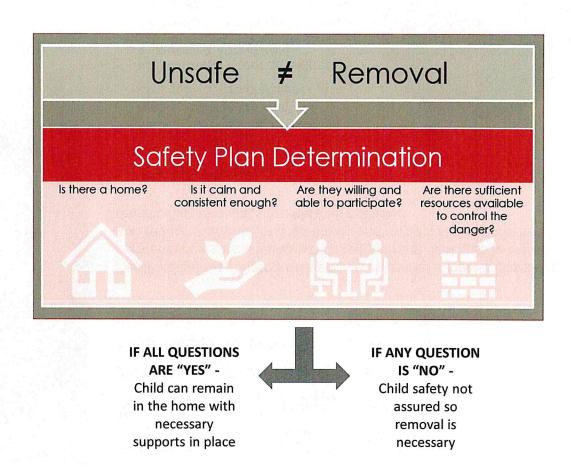
- 627 children receiving prevention service through FFPSA
- Serving over 950 approved kinship caregivers who are caring for 1,700 children
- 750 licensed foster providers caring for 1,170 children
- 36 licensed Qualified Residential Treatment Program (QRTP) beds available; 75% average utilization rate
- 0 children in out of state placements



What is Safety?

When can a child remain safely at home and when is removal necessary

No threats of danger exist within the family, or SAFE ✓ Parents/caregivers possess What does it look like when a child is: sufficient protective capacities to control any threat, or ✓ The child is not vulnerable to the existing danger. Threats of danger exist within the family, and Children are vulnerable to such threats, and **UNSAFE** Parents/caregivers have insufficient protective capacities to manage or control the threats.





Early Childhood Summary

23-25 Budget Base

\$55.5 million

23-25 Budget Approp

\$80.0 million

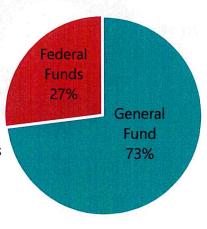
25-27 Budget Base

\$40.8 million (draft)

Our goal when children are not with their parents, is that they are in safe and engaging care environments. Investments in quality, inclusive care, facilities, start up, above and beyond training, infrastructure and shared services make it possible for child care providers to create and sustain nurturing environments for children.

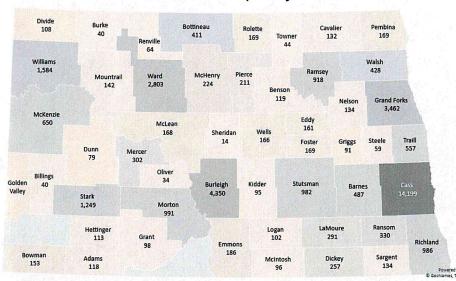
HB 1540 created resources for child care providers

- Grants for Quality, Facilities, Startup/Expansion, Inclusion & nontraditional hrs care
- Shared Service supports (business mgmt training and operational software, curriculum resources)
- Increased access to Quality cohorts and business coaches
- Worker incentives for above and beyond training



Early Childhood by the Numbers

1,183 Licensed Child Care Programs Licensed Child Care Capacity – 38,957



8,627

Growing Futures members

2419

Hours of TA delivered by our contracted partners

3,405

Children supported by **IDEA Part C Early Intervention**

1,754

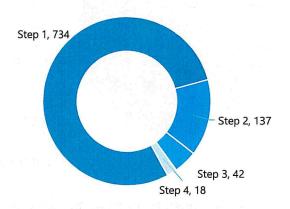
Children supported by IDEA Part B 619 services

1066

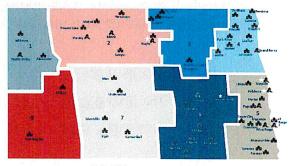
Waterford Upstart households representing all but two counties

Data current as of December 2024

931 Quality Rated Programs



57 Best in Class Programs 2024-2025



Dakota

Health & Human Services 66

606

Pregnant women and children served in Early **Head Start**

1566

Children ages three to five years old served in Head Start

103

Schools with Four-Year-Old Program Approval

Non-Traditional Hours:

evenings, overnights, weekends, and early mornings

Jasmin Child Care

Victorious Christian Kids Academy

Fargo

Fargo

15 children

7 children

Room for up to 63

Room for up to 40

Gifted Stars Child Care Fargo

Ready, Set, Grow Oakes

33 children Room for up to 60 9 children

Room for up to 23

Learning from these pioneers as they scale up

- Staffing recruiting quality staff for non-traditional hours, onboarding and providing OJT during day shifts
- Environment facility space/logistics and comfortable space for extended rest periods
- Transportation to get kids from school to program so parents can work non-traditional hours
- Marketing helping non-traditional hour workers know they can depend on care







Developmental Disabilities Budget Summary

23-25 Budget Base

\$784.4 million

23-25 Budget Approp

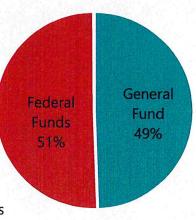
\$789.7 million

25-27 Budget Base

\$792.1 million (draft)

Provide support and training for individuals and families to maximize community and family inclusion, independence, and self-sufficiency; to prevent institutionalization; and to enable institutionalized individuals to return to the community.

- 8,410 people receiving DD program mgmt (2024) 3,413 age 0-2 and 4,997 age 3+
- 113 program managers
- **35.5% increase in referrals** 2021 to 2024
- 451 ICF beds
 (licensed capacity) and
 1216 people in Res Hab setting
- 45 agency providers 5,000+ direct service professionals (DSP) and 800 individuals delivering self directed services





Life Skills Transition Center Budget Summary

23-25 Budget Base

\$63.5 million

23-25 Budget Approp

\$63.5 million

25-27 Budget Base

\$69.0 million (draft)

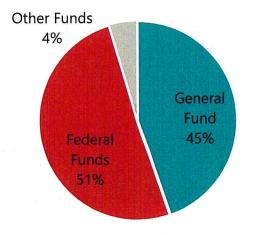
Serve as a specialized crisis and stabilization resource to the network of private residential facilities and the thousands of families who are caregivers for a loved one with intellectual and/or developmental disabilities.

Who does LSTC serve?

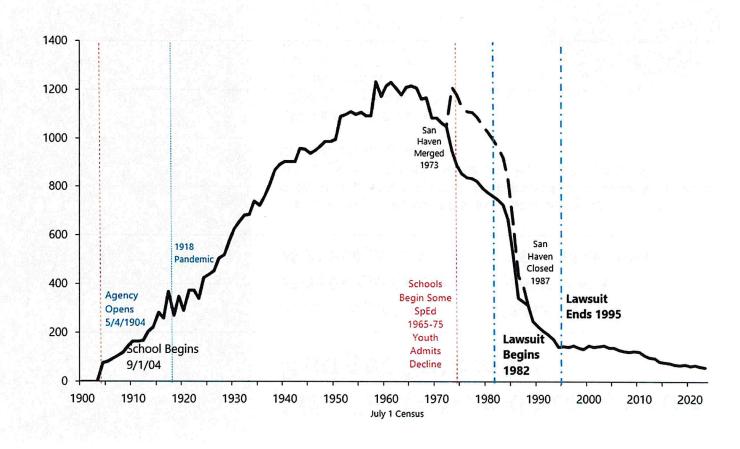
Children and adults with complex and co-occurring disabilities who are not always well-served by the current continuum of services.

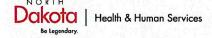
How does LSTC serve?

Residential Crisis / Stabilization and Non-Residential Statewide Stabilization Supports



LSTC reached its peak census in 1958, when 1,231 children and adults lived in the state's residential institution





Census is more than a number

It's a key to understanding the complexities of those we serve.

Data from July 2023- December 2024

July 2024

Admissions

Admissions Diverted

Transitions Planned (In Process) / On Hold/ Cancelled

December 2024

Transitions Completed



Since July 2021, LSTC's point in time Census has declined by 28% even as admissions have increased by 70%

Data from July 2021- December 2022

64

55

July 2021

December 2022

+13
Admissions

-31
Admissions
Diverted

Transitions
Planned / On
Hold / Cancelled

-17
Transitions
Completed

Deaths





Adult & Aging Services Budget Summary

23-25 Budget Base

\$69.1 million

23-25 Budget Approp

\$90.4 million

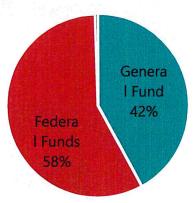
25-27 Budget Base

\$67.8 million (draft)

The Adult and Aging Services Section is designated as the State Unit on Aging. We administer and deliver more than 40 in-home and community-based services to eligible North Dakotans.

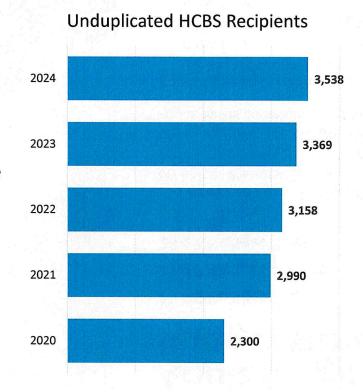
We also protect the health, safety, welfare and rights of vulnerable adults in the community and long-term care residents.

- 4,329 people receiving HCBS case mgmt (2024) – 3,538 HCBS and 791 basic care
- 77 case managers (73 HCBS, 4 Basic Care)
- 8% increase in referrals 2023 to 2024 – in 2024 avg of 150 new referrals / mo resulting in 80 new open cases
- 1,359 Qualified Service Providers
 (QSPs) 206 agencies, 1,153
 individuals



More North Dakotans are choosing home-based community care options every year

- ✓ The demand for in-home and community-based services has continued to increase.
- More HCBS participants have complex needs (medical and behavioral health needs) that increase the amount of time and skills necessary to provide quality services.
- ✓ Rising acuity levels have created a demand for more complex services and providers who can employ higher trained staff including nurses and supervisory staff.





What is HCBS?
Services delivered in an integrated setting.

What is an integrated

setting?
A private home, apartment etc., owned or rented by the individual or their family, or an individual adult foster care setting.

Types of SUPPORT SERVICES available via HCBS

Adult Day Care	Adult Foster Care	Adult Residential Care	Homemaker	Home Delivered Meals	Non-Medical Transportation
Case Management	Chore	Community Support Services/ Residential Habilitation	Non – Medical Transportation Escort	Nurse Education	Personal Care – daily rate
Community Transition Services	Companionship	Emergency Response System	Personal Care- unit rate	Personal Care – Assisted Living	Respite
Environmental Modification	Extended Personal Care	Family Home Care	Supervision	Supported Employment	Transitional Living
					Be tegendary. Health & Human Service



Vocational Rehab Budget Summary

23-25 Budget Base

\$37.6 million

23-25 Budget Approp

\$37.6 million

25-27 Budget Base

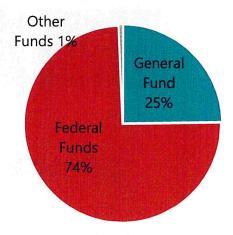
\$44.5 million (draft)

Help both high school students and adults with disabilities improve both their immediate job opportunities and long-term career planning.

Partner with businesses to find creative ways to hire or retain employees with disabilities.

VR clients hired in a range of occupations

- 29% Service
- 19% Admin Support
- 12% Operator
- 11% Professional
- 8% Laborer
- 8% Craft Worker
- 7% Sales
- 3% Technician
- 3% Managerial





Disability Determination Services Summary

23-25 Budget Base

\$8.0 million

23-25 Budget Approp

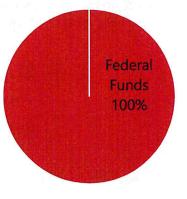
\$8.0 million

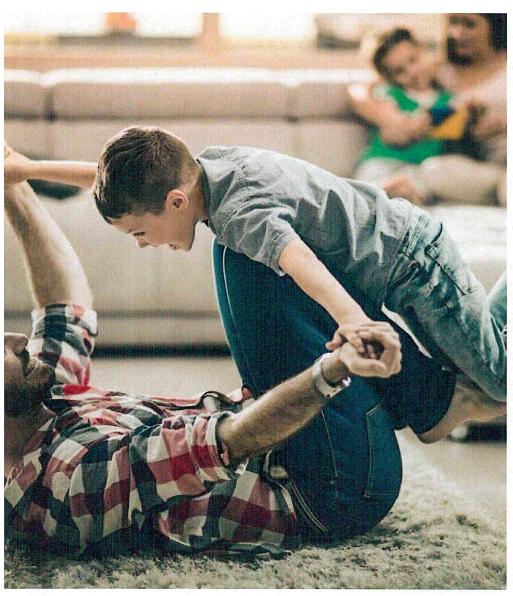
25-27 Budget Base

\$8.3 million (draft)

Determine eligibility for medical disability (SSDI and/or SSI), using Social Security Administration (SSA) guidelines, for people who are unable to work.

- Number of disability decisions is determined by Social Security Administration (SSA)
- DDS team members make medical disability determinations using SSA guidelines
- Average monthly SSI payment in ND is \$638; total of \$4.59 million in monthly benefits to North Dakotans
- Average monthly SSDI payment in ND is \$1,317; total of \$20.47 million in monthly benefits





Child Support Budget Summary

23-25 Budget Base

\$41.3 million

23-25 Budget Approp

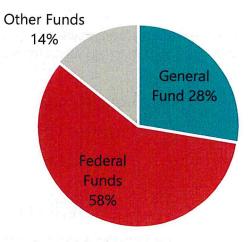
\$41.3 million

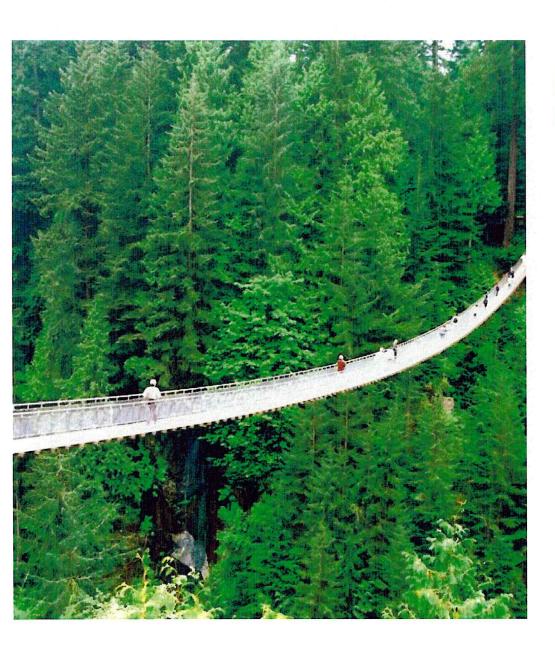
25-27 Budget Base

\$37.1 million (draft)

Provide support to parents, employers, and other partners to help ensure children receive court-ordered financial and medical support to reduce child impoverishment.

- 78.58% Collection of current monthly support
- 90.32% Open cases with a support order established
- \$254 million Arrears owed at the end of CY 2024 (lower than what was owed in 2016)
- \$192.2 million Total collections in CY2024 (record high – up from \$185.9 in 2023)





Economic Assistance Budget Summary

23-25 Budget Base

\$458.3 million

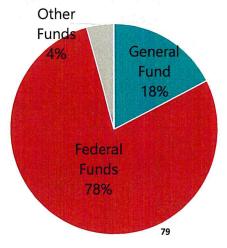
23-25 Budget Approp

\$554.1 million

25-27 Budget Base

\$529.3 million (draft)

Facilitate delivery of federal and state resources that support household economic health, including nutrition (SNAP), utility (LIHEAP), child care (CCAP) and housing stability assistance; eligibility for Medicaid coverage; and Temporary Assistance for Needy Families (TANF).



Human Service Zones

Serving North Dakota individuals and families is a partnership. Economic Assistance Policy administers programs, while Human Service Zones deliver benefits.

Person Decides to Apply

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

Human Service Zone

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

Gather Information

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

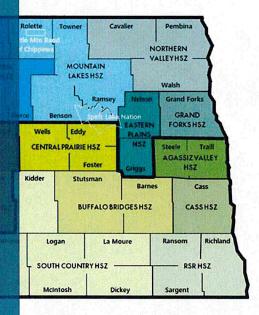
Determine Eligibility

An eligibility worker determines eligibility.

Issue Benefits

SOUT

If eligible, the state will issue the benefit in the appropriate manner.



How Clients Access Services

One Address. One Phone Number. No Wrong Door.

Eligibility redesign makes it easier for families to get help by simplifying access points.

Centralized Mail Unit



One mail and email address for document submission

Customer Support Center



One phone number to speak to an expert

Local Support



Local offices will remain open for in-person support

Self-Service Portal

Individuals can use the self-service portal to apply, report changes, renew their benefits, view notices, upload documentation, and check their eligibility and benefits.



Application volume remains steady & timeliness continues to improve

Description:

Each federally funded program has expectations related to timely processing, indicated here as "Federal". The state has also established goals related to timely processing, which are represented here as "Excellent" and "Target". "Untimely" processing indicates a timeframe that exceeds allowable federal expectations.

Key Takeaways:

How many applications are processed in each of the compliance range? What percentage of applications are not processed timely as per federal guidelines? Are there any variations by different regions?

Applied Filters:

Human Service Zone:

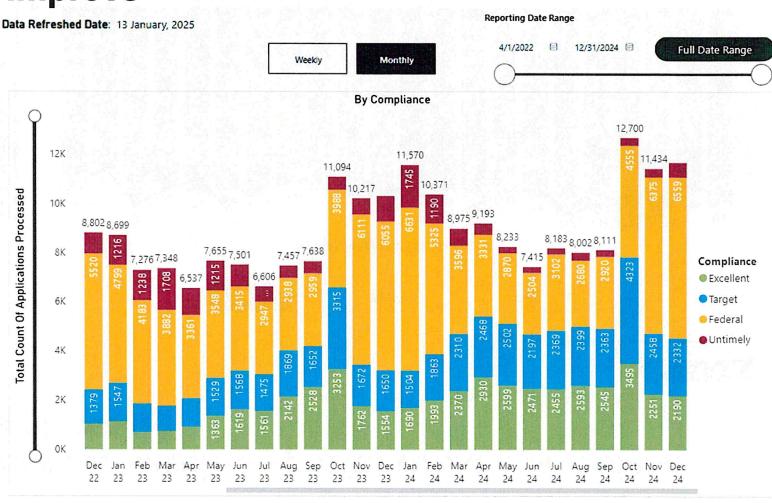
ALL Selected

Programs:

ALL Selected

Compliance:

ALL Selected



Eligibility teams are keeping up with volume of reviews that require processing

Descriptions:

The dashboard provides an operational overview of the reviews received & processed daily/weekly by ND HHS. Review Inflow represents the count of reviews received by packet received date that requires worker action. Reviews Processed represents the count of reviews that get authorized by worker with no further action needed. The reporting date filter helps the user to select a particular date when the review is received and view the number of reviews which get processed on that date.

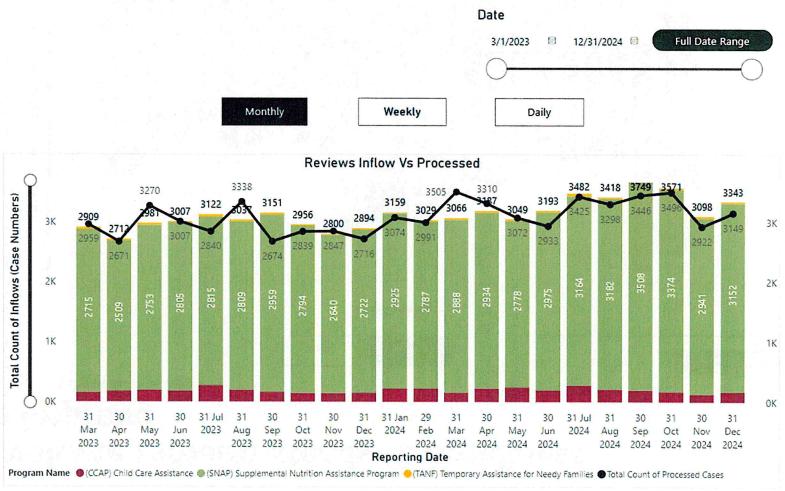
Key Takeaways:

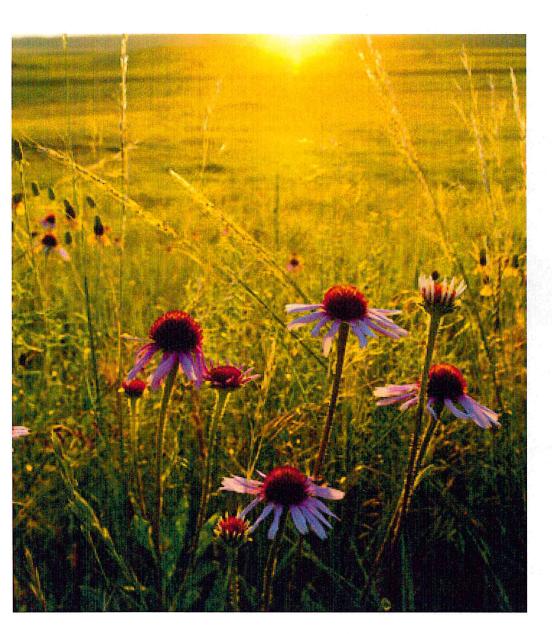
Is the volume of reviews processed keeping up with volume of reviews received for processino

Applied Filters:

Program:

ALL Selected





Human Service Zone Operations Budget Summary

23-25 Budget Base

\$230.9 million

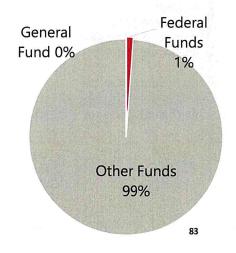
23-25 Budget Approp

\$231.0 million

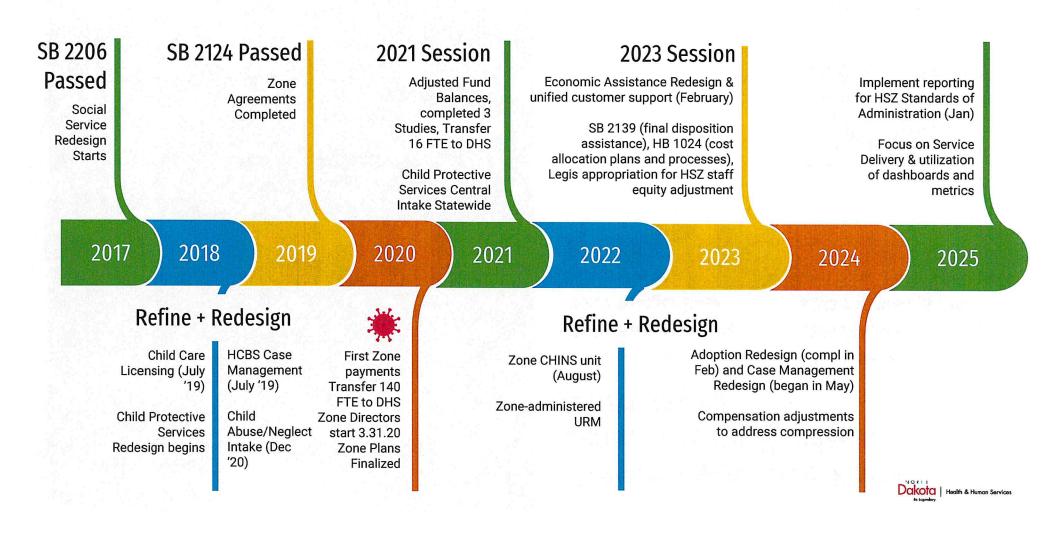
25-27 Budget Base

\$233.7 million (draft)

Support the work of the Human Service Zones and Human Service Zone Boards, including review of HSZ Plans, as well as infrastructure support related to various HR and payroll functions.



ND Human Service Zone Implementation



#2: Audit findings included in more recent audit and actions taken to address each finding

Audit Findings 2022-23 SAO Operational Audit

<u>Finding 2023-01</u>: Workforce Retention Grants Not Monitored.

Identify whether there were other ineligible payments, and recoup funds for payments
made to ineligible caregivers identified in this audit and through the Department's
additional procedures. Develop ways to measure whether programs achieve the intended
purpose.

<u>Finding 2023-03</u>: Children in Suspected Abuse Situations Not Contracted Timely.

• Ensure face-to-face contact dates are entered into the Department's tracking system (FRAME) and to make sure those dates are accurate and monitored. Ensure timely face-to-face contract with suspected victims of child abuse or neglect.

<u>Link to Testimony</u> provided to Legislative Audit and Fiscal Review Committee January 9, 2025



HCBS Direct Care Workforce Recruitment and Retention Pilot

HHS opened applications **March 2022** and issued the last payment **October 2023**

- 61 agencies 28 DD, 33 Adult/Aging Services
- 942 individual providers 417 DSP (Self Directed DD, Autism, Medically Fragile), 525 QSP (Adult/Aging Services)
- **5,530 employees** affected (4,588 in provider agencies, 942 as individual providers)
- \$7,899,914.76 distributed for retention (94%) or recruitment (6%)



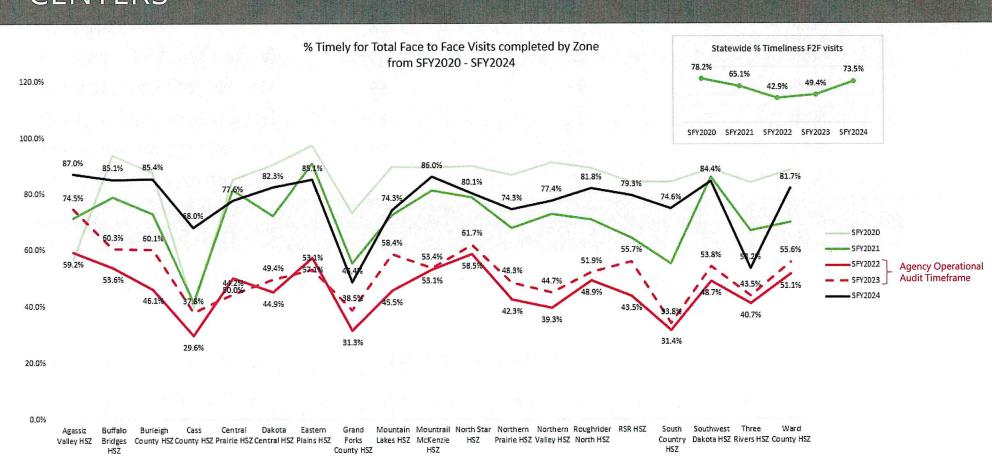


Summary – Conclusions #1 and #2 plus HHS follow-up monitoring

Agency Provider	Total incentive received	Total employees receiving incentive	Requested recoupment / / # employees affected	Recoupment as % of total incentive
Anne Carlsen Center	\$300,300.00	172	\$0.00 / 0	0.00%
Development Homes, Inc.	\$251,000.00	182	\$4,000.00 / 3	1.59%
Helping Hands Care	\$9,150.00	6	\$0.00 / 0	0.00%
Pride, Inc.	\$285,312.30	196	\$268.02 / 2	0.10%
A Spectrum of Care	\$19,875.00	21	\$150.00 / 1	0.75%
Total	\$865,637.30	577	\$4,418.02 / 6	0.51%



STATEWIDE TIMELINESS RATES FOR FACE TO FACE CPS VISITS ARE HIGHLY INFLUENCED BY LARGE POPULATION CENTERS



Results of QA Reviews on Safety Outcome 1 (timeliness of face-to-face visits)

<u>Safety outcome 1</u>: Timeliness to initiate a CPS response

Review period	# cases in sample	# that required a face-to-face visit (Measure 1 applicable)	Compliance with standard achieved
Jan 2020 - Mar 2020 (ND QA)	65	26	77%
Jun 2020 – Mar 2021 (ND QA)	65	32	40%
Oct 2020 – Sept 2021 (ND QA)	65	32	44%
Jun 2021 – Mar 2022 (ND QA)	65	27	67%
Oct 2021 – Sept 2022 (ND QA)	65	22	68%
2024 (ND Adhoc)	73	73	92%
2024 (CFSR R4 – 50% compl)	38	9	89%

PIP Compliance Benchmark: 82%

ND's Target Compliance Benchmark: 90%

Audit Findings 2021-22 Single Audit

- <u>2022-012 CCDF Cluster</u>. Improve procedures to ensure child care correction orders are resolved before the end of each allowed correction period with accurate tracking of dates. *Modified processes to utilize system as assist.*
- <u>2022-013 CCDF Cluster</u>. Develop corrective action and perform annual unannounced inspections of child care providers in operation in accordance with 45 CFR 98.42(b)(2)(B) and Department policy. *Adjusted staffing patterns*.
- <u>2022-018 Emergency Rental Assistance Program</u>. Ensure monthly payment amounts are calculated correctly and reviewed for accuracy. Additionally, we recommend the Department ensure the improper payments are recouped through the ERA program's refunding process. *Reviewed processes and adjusted staffing*.
- <u>2022-021 Rehabilitation Services Vocational Rehabilitation Grants to States.</u> Follow its procedures to prevent and detect Vocational Rehabilitation payments from occurring outside the period of performance. Reviewed processes and provided additional training.



Audit Findings 2021-22 Single Audit (cont.)

- <u>2022-014 Low-Income Home Energy Assistance</u>. Coordinate with the Department of Commerce to
 properly report subawards of the state under the LIHEAP program for FFATA reporting. Reviewed processes and
 adjusted staffing.
- <u>2022-015 Low-Income Home Energy Assistance</u>. Ensure adequate rental documentation is on file and proper eligibility determinations of the Low-Income Home Energy Assistance Program (LIHEAP) are made. *Reviewed processes and provided additional training.*
- <u>2022-016 Low-Income Home Energy Assistance</u>. Ensure policies and procedures prevent duplicate payments from being applied to LIHEAP cases. We also recommend the Department of Human Services ensure required documentation is obtained for individuals appearing in multiple cases in accordance with state LIHEAP Policy. *Reviewed processes and provided additional training. LIHEAP Business Process Redesign in process.*
- <u>2022-017 Low-Income Home Energy Assistance</u>. Ensure eligibility is verified through the State NDVerify system prior to approval of all LIHEAP applications or revise the State Plan to identify the use of NDVerify as optional for approval by the Federal awarding agency. *Revised Plan; LIHEAP Business Process Redesign in process*.



#3: Current Biennium Accomplishments and Challenges; Next Biennium Goals and Plans

2023-25 Accomplishments

Human Service Division Highlights



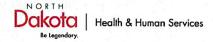
Growing a strong, stable workforce requires strong, stable families



Filling gaps in the system of care can prevent crisis



- ✓ Case management redesigns underway to improve service delivery
- √ Technology system replacements in progress to meet customer expectations
- ✓ Expanded HCBS service options across multiple sectors
- ✓ Statewide eviction prevention and housing stabilization pilot
- ✓ Big steps forward in strengthening access to quality child care



Proactive & strategic management of systems is required to meet citizen expectations

Behind the scenes impact: Integrated Eligibility system automation removes need for paper apps



Sun Bucks

(summer SNAP)

- Summer 2024 38,000 children (\$4.6M, 100% fed)
- Direct certification process for Summer 2025 = 44,000 children projected to benefit
 - ✓ 24,000 children will be directly certified because they are eligible for SNAP and TANF
 - ✓ Plus 6-8,000 children will be directly certified as eligible for Medicaid-only



Direct Certification for Free/Reduced Meals

- Nov 2024 added automated data exchange to remove the need for children who are already Medicaid eligible to have to apply again for Free / Reduced Meals from their school
- DPI and HHS exchange data between technology systems to eliminate need for families to complete an additional paper application

Health & Human Services

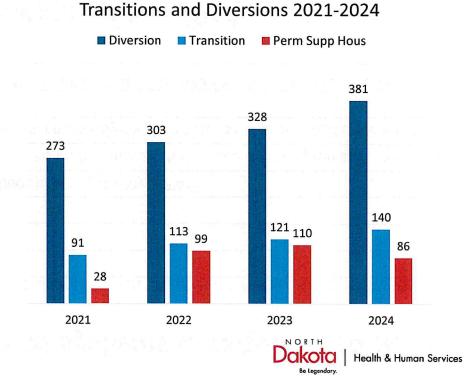
Adult and Aging Services

HCBS is supporting increase in Transition and Diversion from institutional settings

"**Diversion**" happens when a Medicaid eligible individual who screens at a nursing facility level of care receives a set of services (HCBS, housing etc.) that allows them to remain in an integrated setting and avoid institutionalization.

"Transition" happens when a Medicaid eligible individual who resides at a nursing facility receives transition supports and a set of services (HCBS, housing etc.) that allows them to move to an integrated setting in the community.

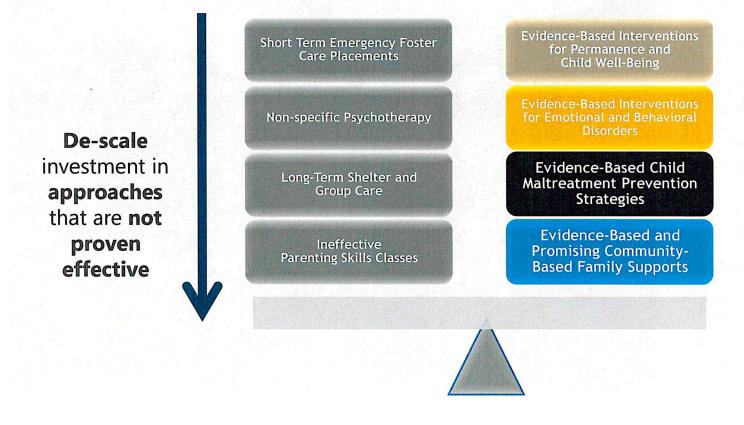
"Permanent Supported Housing" is providing affordable housing, rental assistance, meeting with landlords, application assistance etc., in addition to other traditional HCBS that allows an individual to live in a private residence alone or with family, their significant other or roommates of their choosing.



Target Population Member (TPM)

Children and Family Services

Shifting Resources to Support What Research Indicates will Work for Children and Families



Invest in approaches with proven results for the populations being served



In Child Welfare: What does "progress" look like?

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

Piloting a statewide eviction prevention program helped document the nature of housing crises in ND

Scenario 1:

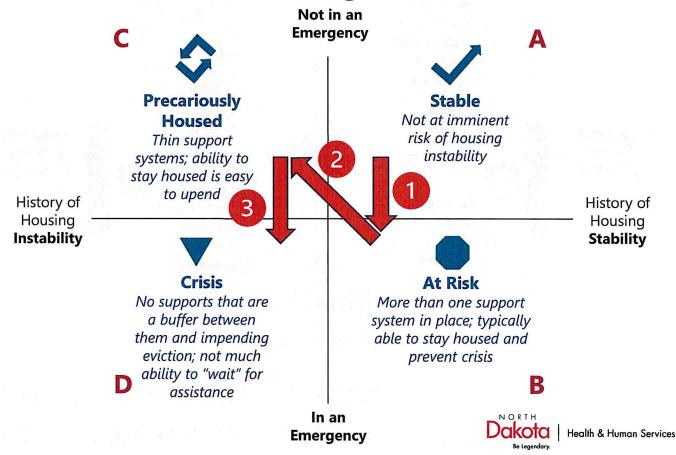
- · Income interruption
- Health issue
- Caregiving change
- Unexpected expense

Scenario 2:

 Layering of disruptions – domestic violence, substance use, mental health, job loss, persistence of a health condition

Scenario 3:

 Persistent lack of resolution to family level disruptions – inability to maintain earnings, actions that trigger eviction, worsening health



Intentional interventions can stop de-stabilizing events from taking hold

Scenario 1:

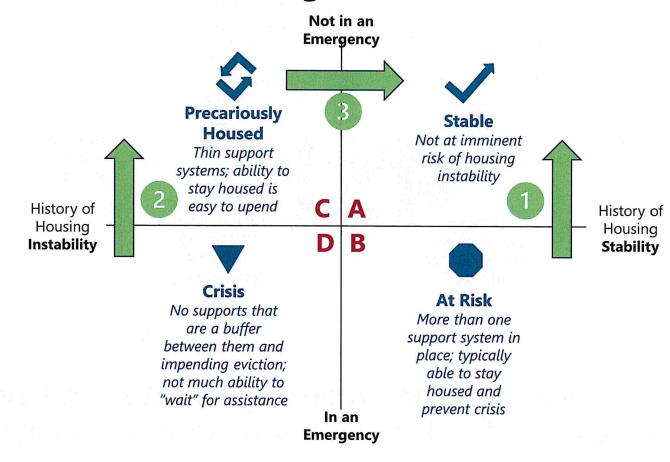
 Rent and utility assistance

Scenario 2:

- Rent and utility assistance
- Back rent/housing debt
- Re-housing assistance
- Mediation
- Peer support/care coord
- Support services (more likely to have a chronic health or disabling condition)

Scenario 3:

- Rent and utility assistance
- Benefit cliff mitigation (income strategy)
- Potential for some support services



Housing crisis is a reality for families of all kinds of backgrounds, in communities across the state

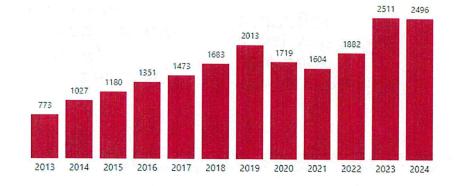
46%

Households that applied have children age 0-18

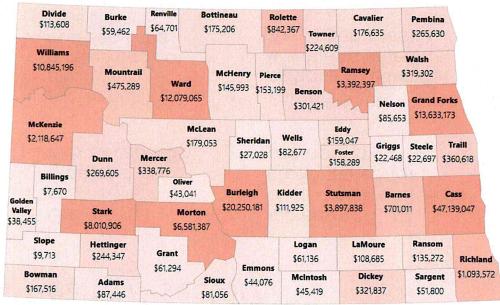
4%

Renters who applied for help & were age 65+

ND Eviction Judgments by Calendar Year



Housing Stability Resources Invested by County Dec 2021-Dec 2024





In Child Care

What indicators characterize a "healthy" sector?

- Broad availability of quality licensed care for infants and toddlers
- Mix of provider types who are licensed
- % of licensed programs operating to full capacity

- Very few/no child care deserts (i.e., areas with critical shortages)
- Equitable distribution of child care assistance statewide
- Inclusion supports that create access for children with special needs

- Growth in capacity is greater than loss of capacity
- Active quality efforts in increasing % of licensed child care slots
- Child care rates cover the cost of delivering quality care

- Increasing % of child care workforce credentialed for promotion
- Parents have options to consider when and where they need them
- Working families w/young children pay no more than 7% of income for quality care

"Stability" in the child care sector

Example:

Reduced worker vacancy and turnover

Care capacity in licensed child cares is not constrained by workforce shortages

Desired Capacity – Normal Vacancy = Actual Capacity



Training incentives |
Child Care Assistance for CC workforce |
Stabilizing baseline revenue





Staffing shortages are a significant driver of lower-than-capacity enrollment of children in licensed settings

Nursing Assistant

The second secon		
10 th percentile	Median	90 th percentile
\$15.04	\$18.02	\$22.14

Teacher's Assistant

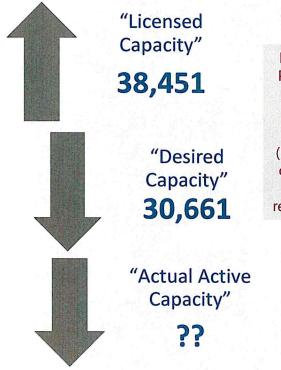
10 th percentile	Median	90 th percentile
\$13.98	\$17.17	\$22.42

Home health aide

10 th percentile	Median	90 th percentile
\$14.06	\$17.07	\$21.75

Child care worker

10 th percentile	Median	90 th percentile	
\$10.89	\$12.86	\$17.87	

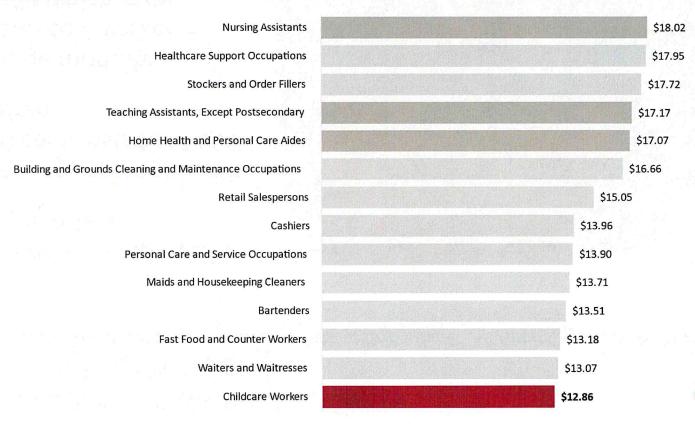


Present Day
Potential for
20.3%
increase in
capacity
(based solely
on licensing
space
requirements)

ND Median Wage for Select Occupations | JSND Labor Market Information | Employment and Wage by Occupation 2022

Child care workers are amongst the lowest paid workers in the North Dakota labor force

ND Median Wage for Select Occupations | JSND Labor Market Information | Employment and Wage by Occupation 2022

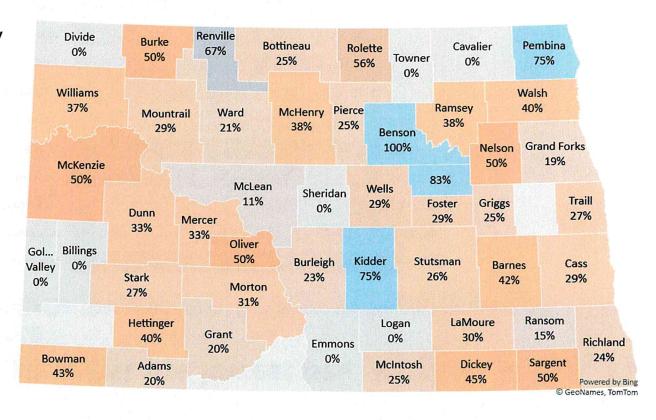




Key Indicator: Child Care StaffingChild Care Worker Benefit

% Licensed Child Care Providers who have workers utilizing the CCAP Child Care Worker Benefit June-Dec 2024

- 744 workers employed by 302 providers
- Receiving assistance with child care costs for 1,661 children
- Average monthly
 assistance / worker =
 \$1,400 which is the
 equivalent to an \$8/hr
 wage increase



2025-27 Goals and Plans Forward progress in areas of focus

- Resources to support Transition and Diversion
- Expansion of home and community based service options
- Improve systems that serve North Dakotans
- Eviction prevention resources and housing resources for transition and diversion
- Child care as workforce infrastructure



RESOURCES TO SUPPORT TRANSITION AND DIVERSION (\$5,589,397)

WHAT?

- ✓ Housing assistance to support targeted population members (TPM) - \$300,000
- ✓ Services to support transition and diversion from institutional settings - \$5,289,397

WHY?

Allows individuals to make informed choices, including the option to receive care while enjoying the benefits of community living in the least restrictive setting.

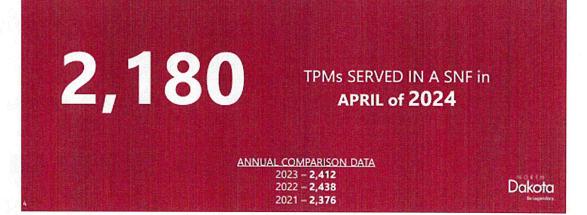
TPMs TRANSITIONED IN QUARTERS 1 & 2 OF 2024

ANNUAL COMPARISON DATA 2023 - 118 2022 - 121 2021 - 91

Source: <u>2024 Q2</u> KPI Report | ND DOJ Settlement Agreement

By keeping him at home, he was around his children when they visited, and his grandchildren, and you don't get that anywhere else but home.

Bobbie Engquist, Family Caregiver



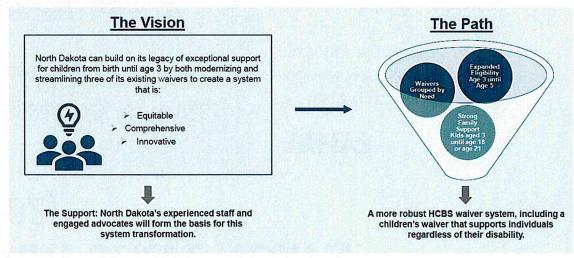
EXPANSION OF HOME AND COMMUNITY BASED SERVICE OPTIONS (\$13,617,649)

WHAT?

- ✓ QSP/HCBS targeted rate increase \$5,392,656*
- ✓ Host Home services in the DD waiver \$3,379,800
- ✓ Cross-Disability waiver implementation \$4,948,452*

WHY?

Serving people in lowest level of care necessary will return better outcomes. Systems encourage or discourage certain behaviors, based on how services are designed and how payment models are structured.



Source: Presentation by Alvarez & Marsal to Interim Human Services Committee, <u>Cross-Disability Children's Waiver Update</u> (9-25-24)

^{* -} Medicaid funded service; dollars will be found in Medical Services Division budget with joint implementation with the Human Services Division

IMPROVE SYSTEMS THAT SERVE NORTH DAKOTANS (\$14,531,002)

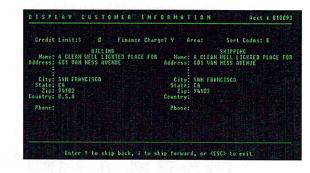
WHAT?

- ✓ Delivery of Vulnerable Adult Protection Services \$718,522
- ✓ Quality legal representation for families involved with child welfare - \$700,000
- ✓ Comprehensive vocational rehab technology system \$8 million ****
- ✓ Roof for Cedar Grove at Life Skills Transition Ctr \$712,480 **
- ✓ Retirement of Economic Assistance and Medicaid legacy systems on mainframe - \$4 million ***
- ✓ Conversion of DD eligibility assessment tool for kids (ICAP to SIS) \$400,000

** - Designated as one-time funding / SIIF **** - Designated as one-time funding / Community Health Trust Fund *** - Designated as one-time funding / SIIF; budget will be found in HHS Ops budget

WHY?

A system that is well-coordinated and highly functional provides the best opportunity to assure that good outcomes are being achieved for all North Dakotans.



CHILD CARE AS WORKFORCE INFRASTRUCTURE

(\$17,272,500)

WHAT?

- ✓ Best in Class expansion \$6 million**
- ✓ Child care grants and shared services \$5
 million**
- ✓ Early childhood quality infrastructure \$3 million**
- ✓ Inclusion support for child care \$172,500**
- ✓ Outcome measurement tools for quality rated child care programs - \$100,000**
- ✓ Quality tiers in Child Care Assistance payments -\$3 million**

WHY?

Addressing child care as a barrier to work requires a comprehensive approach that tackles all 3 elements of the child care dilemma: Affordability, Availability & Quality.



Best in Class | Stanley, ND

Child care is a workforce solution that can make a difference for ND employers



Affordability

Connect more working families to child care assistance to keep the cost of child care within 7% of household income



Availability

Make it easier for working families to find child care when and where they need it



Quality

Help kids realize their potential by supporting quality early childhood experiences

ND Child Care Initiative

A strategy of both comprehensive and targeted investment



Target investments to ages 0-3

- ✓ Age of highest developmental return for children
- ✓ Period of greatest economic pressure for most young families
- ✓ Critical decision point for individuallevel decisions about how/if to rejoin the labor force
- ✓ Focus on working families employed in occupations where compensation doesn't offset the cost of child care needed to enable work



Embrace an all-of-the-above approach to child care

- Quality early experiences can happen anywhere.
- ✓ Working families should have meaningful choices about child care.
- ✓ Principles of quality are knowable and transferrable to any setting.
- ✓ Sustainable child care businesses will support more sustainability within the workforce.



Help working parents provide for their families by supporting employment, training and education goals

- ✓ Benefits are scaled to family need.
- Employers have meaningful vehicles to remediate child care as a barrier to work.
- ✓ There are opportunities for children who are least likely to have access to quality early childhood experiences.

A CONTRACTOR OF THE PARTY OF TH			Man.
	23-25 Appropriation	25-27 Exec Budget Request (Armstrong Administration)	
Child Care Assistance Enhancements (CCAP)	\$39,300,000	\$39,300,000	
Quality based pmts in CCAP	\$3,000,000*	\$3,000,000*	
CCAP app outreach & assistance	\$500,000	\$500,000	
Provider grants & shared svc	\$7,000,000*	\$5,000,000*	
Non-traditional hours grants	\$1,800,000	\$1,800,000	
Worker training stipends	\$2,000,000	\$2,000,000	
Quality infrastructure	\$3,000,000*	\$3,000,000*	
Evidence based programs in Year Before Kindergarten	\$14,400,000	\$20,400,000**	
Employer-led child care cost sharing program	\$5,000,000*		Carryover
Background Check Automation & State Employer Share WPCCR	\$4,000,000*		Carryover
	\$80,000,000	\$75,000,000	

^{* =} one time funding ** = partial one-time funding

"Quality" child care?

Example:

Age-appropriate experiences that support literacy

Increase in number of programs with literacy-building experiences for children of all ages

Ages 0-5 meeting or exceeding WHE

Age 4-5 kindergarten readiness

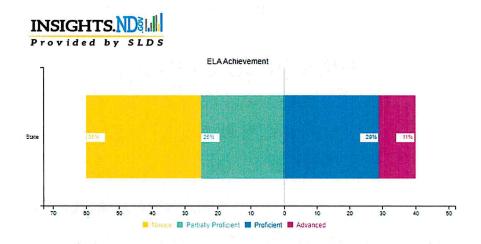
QRIS 2, 3, 4 | TSG | Waterford | BIC | Professional Dev





North Dakota has established 6 Goals to support its Vision that

"All Students will graduate choice ready with the knowledge, skills and disposition to be successful"



Reading Proficiency

3rd grade

All grades

38%

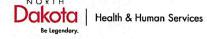
44%

Goal 1: Increase students who enter kindergarten prepared to learn and increase the number of kindergarten classrooms that meet the needs of every learner

<u>Goal 2</u>: Increase students who demonstrate reading proficiency in 3rd grade

Source: https://www.nd.gov/dpi/nd-pk-12-education-strategic-vision-framework

Source: https://insights.nd.gov/Education/State/Dashboards



How can early childhood experiences support Emergent Literacy Skills

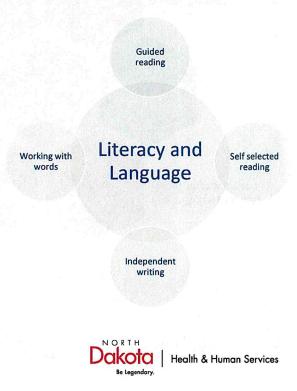
Emergent Readers and Writers



Essential components of Emerging Literacy

- An interest in and enjoyment of print (handling books and relating them to their stories or information)
- Print awareness (how to handle a book, reading from left to right, recognition of pictures symbols, signs, or words)
- An interest in telling and listening to stories (pay attention to stories, repeat, use some rhymes, phrases, or refrains from stories or songs)
- Make marks and use them to represent objects or actions (an understanding that words are made up of letters, recognizing letters when they see them)
- Comprehend meaning from pictures and stories

Conventional Readers and Writers



How can early childhood experiences support Emergent Literacy Skills?

Literacy Rich Environments

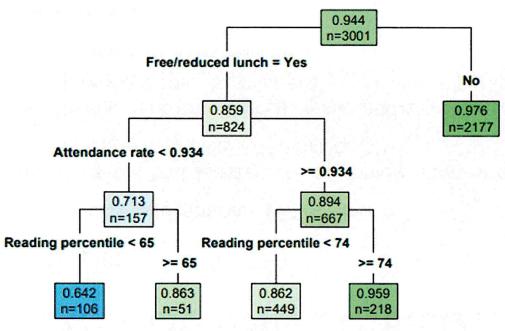
- Colorful cozy spaces where children can read and for small group read alouds
- Books designed to encourage interaction (tactile, pictures, topics)
- Sticky notes and pencils in reading area so kids can identify their favorite books
- Books located where children can easily reach them
- Interest areas

• Interactions that support Literacy

- Foundations: Scribbling, singing, rhyming, labeling all items in the room to encourage reading/object learning, playing games
- · Read aloud techniques (ex. see, show, say)
- Talking with children and responding to their communication
- Encouraging children to communicate by staff initiating conversations and asking appropriate questions
- Staff use of books with children and encouraging children's use of books through positive interactions



Good Data can point us in the right direction







HOUSING INITIATIVE | EVICTION PREVENTION AND HOUSING STABILIZATION (\$14.5 million)

WHAT?

- ✓ Eviction prevention \$3.5 million **
- ✓ Targeted rent assistance for people at highest risk of housing instability \$10 million **
- ✓ Home Renovation incentives to address accessibility modifications \$1 million **

Housing is...

- The largest item in most household budgets (unless you have small children then it's likely child care)
- A top barrier to transition from institution to community
- A risk factor in child neglect and a barrier to successful family reunification
- A challenge for successful transition from prison to community and a risk factor for criminal recidivism



WHY?

Strategically targeting interventions that address household budget gaps can prevent the spread of crisis and instability.

^{** -} Designated as one-time funding / SIIF

Housing is a prerequisite for workforce growth

Can you find it?

Can you afford it?

Can you keep it?



Availability

Population change
Housing supply (new & existing)
Housing mix
Infrastructure
Construction labor force



Affordability

Housing costs
Household income
Life stage costs
(child care, services)
Budget constraints
Regulation

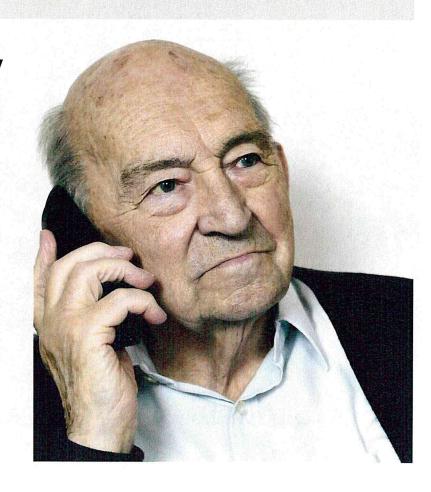


Stability

Accessibility ncome changes Health needs Homelessness amily disruption

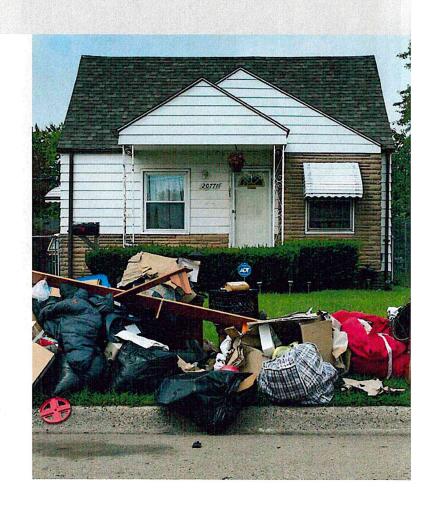
Lowest income renters need help to compete in the marketplace.

- Someone's "willingness to pay" and "ability to pay" are not always the same thing.
- Competition for the lowest cost (market worthy) housing is always greatest.
- Lower income households can only shop in segments of the market where competition is greatest and vacancy rates are lowest.



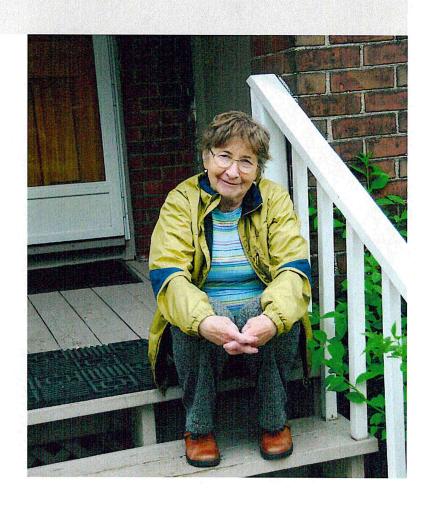
Housing crisis is real.

- It affects people all over the state
- Make sure when it occurs -wherever it occurs -- that it's rare, brief and solvable.



A supply strategy alone is not enough.

- Lower income workers can't afford rent levels that even meet minimum property operating costs.
- Some market demand segments don't match up well to market price realities.
- You can't just build your way out of this market mismatch.



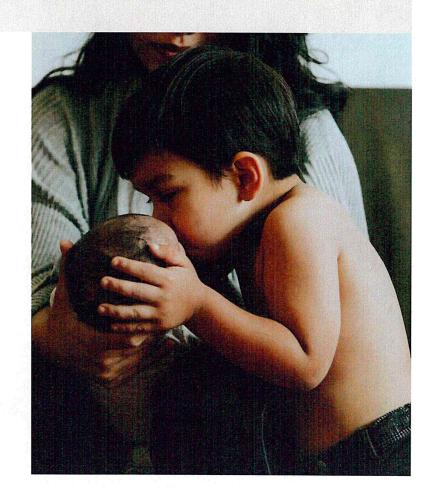
A demand strategy alone is not enough.

- Demand side strategies can bridge many market gaps but, alone is not enough.
- People first need to find a place to live that meets their needs and then be able to pay for it.
- Appropriately flexible gap assistance can bridge affordability gaps.



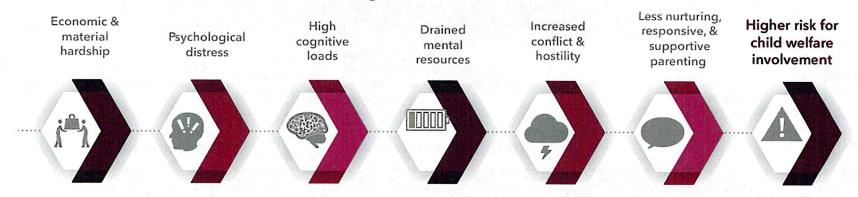
Services without housing are rarely effective.

- A person can't focus on their physical health or their mental health if their most basic needs aren't met.
- Having a place to live is a first order need.
- Housing status is foundational to a person's ability to build a life for themselves and their family.



How might economic and material hardship Impact parenting and child wellbeing?

Family Stress Model





It's not that people who are struggling to make end meet aren't well-qualified parents. It's that lack of financial resources creates stressors that make it more difficult to solve problems.



(Conger, 1994) (Neppl, 2016) (Duncan, 2014) (Mistry, 2002) ices

Data aggregated by: Anderson, C., Grewal-Kök, Y., Cusick, G., Weiner, D., & Thomas, K. (2023). Family and child well-being system: Economic and concrete supports as a core component. [Power Point slides]. Chapin Hall at the University of Chicago.

Working families with jobs that don't pay high wages often fall into the "hardship gap"

"Hardship Gap"

Earned Income is greater than poverty level but less than cost of living

Working but falling short of selfsufficiency even after supplementing wages with public benefits

Household Inco	ome*	where programmatic Eligibility Ends	% of state population	Typically able meet basic needs withou assistance	
20-50% of federal poverty level	l 12% of state median Temp Assistance for Needy Families (TANF) income Medicaid (full coverage for the entire family)		10 100/ 5	No (0%)	
100-140% of federal poverty level	25-35% of state median income	Head Start Medicaid (medically needy (aged/blind/disabled)) Medicaid (children ages 6-19) Medicaid (Expansion)	10-12% of state population	No (0%)	
200-250% of federal poverty level	50-60% of state median income	Supplemental Nutrition Assistance (SNAP) Children's Health Insurance (CHIP) Low Income Home Energy Assistance (LIHEAP) Women Infants and Children (WIC) Earned Income Tax Credit (EITC) Free-Reduced Lunch (FRL) Housing Choice Voucher (Sec 8)	28-30% of state population	Maybe (20%)	
350% of federal poverty level	85% of state median income	Child Care Assistance (CCAP)		Likely (50%)	

^{*}Income levels described in this table are intended to communicate estimated ranges of eligibility; they are not a precise accounting of each program's unique eligibility rules

Working families with jobs that don't pay high wages often fall into the "hardship gap"

"Hardship Gap"

Earned Income is greater than poverty level but less than cost of living

Working but falling short of selfsufficiency even after supplementing wages with public benefits

Household Income* .		where programmatic Eligibility Ends	% of state population	Typically able meet basic needs withou	
20-50% of fede poverty level	85% of child neglect reports involved	A family with income at or below 100% of FPL is 22x more likely to		assistance No (0%)	
100-140% of fed poverty level	families with income	d Start licaid (med licaid (chilc licaid (Expa)	10-12% of state population	No (0%)	
200-250% of fed poverty level		plemental Nutrition Assistance (SNAP) 'dren's Health Insurance (CHIP) Income Home Energy Assistance (LIHEAP) men Infants and Children (WIC) ned Income Tax Credit (EITC) .c.2-Reduced Lunch (FRL) Iousing Choice Voucher (Sec 8)	28-30% of state population	Maybe (20%)	
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^{*}Income levels described in this table are intended to communicate estimated ranges of eligibility; they are not a precise accounting of each program's unique eligibility rules

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

60% SMI is roughly equivalent to 250% of the federal poverty level

Federal Poverty Level		Federal Poverty Level 30% SMI				فانتك	60% SMI					85% 5		100% SMI					150% SMI			
Household Size	Annual Income	Hourly Wage		Annual Income		Hourly Wage		Annual Income		Hourly Wage		Annual Income		Hourly Wage		Annual Income		Hourly Wage	130025	Annual Income		Hourly Wage
2	\$ 19,720	\$9.48	\$	23,359	\$	11.23	\$	46,717	\$	22.46	\$	66,183	\$	31.82	\$	77,862	\$	37.43	\$	116,793	\$	56.15
3	\$ 24,860	\$11.95	\$	28,855	\$	13.87	\$	57,710	\$	27.74	\$	81,755	\$	39.31	\$	96,183	\$	46.24	\$	144,274	\$	69.36
4	\$ 30,000	\$14.42	\$	34,351	\$	16.51	\$	68,702	\$	33.03	\$	97,328	\$	46.79	\$	114,503	\$	55.05	\$	171,755	\$	82.57
5	\$ 35,140	\$16.89	\$	39,847	\$	19.16	\$	79,694	\$	38.31	\$	112,900	\$	54.28	\$	132,823	\$	63.86	\$	199,235	\$	95.79
6	\$ 40,280	\$19.37	\$	45,343	\$	21.80	\$	90,686	\$	43.60	\$	128,472	\$	61.77	\$	151,144	\$	72.67	\$	226,716	\$	109.00
7	\$ 45,420	\$21.84	\$	46,374	\$	22.30	\$	92,747	\$	44.59	\$	131,392	\$	63.17	\$	154,579	\$	74.32	\$	231,869	\$	111.48
8	\$ 50,560	\$24.31	\$	47,404	\$	22.79	\$	94,808	\$	45.58	\$	134,312	\$	64.57	\$	158,014	\$	75.97	\$	237,021	\$	113.95
9	\$ 55,700	\$26.78	\$	48,435	\$	23.29	\$	96,870	\$	46.57	\$	137,232	\$	65.98	\$	161,449	\$	77.62	\$	242,174	\$	116.43
10	\$ 60,840	\$29.25	\$	49,465	\$	23.78	\$	98,931	\$	47.56	\$	140,152	\$	67.38	\$	164,884	\$	79.27	\$	247,326	\$	118.91

2023-24 State Median Income (SMI); Hourly wage is calculated assuming 2,080 hours worked per year per annual income range noted Multiple wage earners could combine earnings to attain the noted household (HH) income / hourly wage.



70% of jobs in the ND labor market pay an average wage of \$30/hour or less







Less than \$16 / hour
Childcare worker
Waiter/Waitress
Dishwasher
Bartender
Fast food cooks
Cashiers
Hotel clerk
Maid/Housecleaner
Farm Worker/Laborers

47,960 # of people employed in a job with average wage of <\$16/hour represents 12% of total jobs

\$16 - \$22 / hour Home health/PT aide Personal care aide Receptionist/secretary Restaurant cook Preschool teacher Assemblers Maintenance workers Nursing assistant Substitute teacher Stocker/order filler Landscaping/grounds **Janitor** Laundry/Dry cleaning Legal secretary

> 112,430 28%

\$22 - \$30 / hour Carpenter Loan processor Correctional officers Auto service tech Surgical tech **EMTs & paramedics** Roofer **Real Estate Sales** Lic Practical Nurse Dental assistant Firefighter Clergy Architectural drafter Social worker Hotel manager **Light Truck driver**

121,150

30%

Rotary drill operator Industrial Engineer HR specialist Constr mgr Accountant Gen/Op mgr Dental hygienist Electrician PR specialist Loan officer Counselor Lawyer **Police** Sales mgr Registered Nurse Software dev Comp network specialist Veterinarian Speech pathologist **Pharmacist** Production supervisor **Physician** Occupational therapist Dentist **Psychologist** 64,390

\$30 - \$38 / hour

52,920

>\$38 / hour

13%



16%

Health & Human Services

Source: Job Service ND 2023 Employment and Wages by Occupation dataset | median wage by occupation; 386,920 jobs included in statewide wage summary

Opportunity for differentiated response to prevent crisis from spreading

Most reliable economic predictors of child welfare involvement







(Conrad-Hiebner, 2020 systematic review) Strongest predictors of investigated neglect reports















(Slack, 2011 cross-study comparison)

Dakota | Health & Human Services

Data aggregated by: Anderson, C., Grewal-Kök, Y., Cusick, G., Weiner, D., & Thomas, K. (2023). Family and child well-being system: Economic and concrete supports as a core component. [Power Point slides]. Chapin Hall at the University of Chicago.

To be addressed in Section Detail

#4: Compare division request/recommendation totals, including FTE

#5: New positions approved by 23-25 Legislative Assembly, including timing and funding

#6: Discuss employee turnover and vacancies

#7: Funding included in each program line

Comparison of budgets and funding Armstrong Administration Budget by Major Expense (Millions)

Description		2023-25		Increase/		2025-27		
Description	[Budget Base		(Decrease)	Base Budget			
Salaries and Benefits	\$	200,784,510	\$	26,702,773	\$	227,487,283		
Operating		99,707,808		38,825,315		138,533,123		
IT Services		60,778,812		14,189,525		74,968,337		
Capital Asset Expense		682,979		729,295		1,412,274		
Capital Assets		173,152	1.77	94,711		267,863		
Grants		1,559,815,659		114,852,035		1,674,667,694		
Total	\$	1,921,942,920	\$	195,393,654	\$	2,117,336,574		
General Fund	\$	639,975,231	\$	89,626,397	\$	729,601,628		
Federal Funds		1,019,795,406		79,842,352		1,099,637,758		
Other Funds		262,172,283		25,924,906		288,097,189		
Total Funds	\$	1,921,942,920	\$	195,393,655	\$	2,117,336,575		

Comparison of budgets and funding

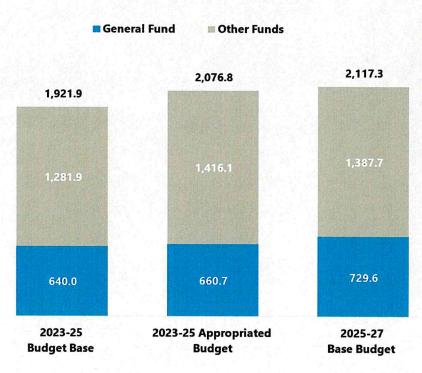
By Base Budget, Current Appropriated Budget, and 25-27 Base Budget (Millions)

23-25 Appropriated includes:

- Legislative Session changes one-time \$21.085 M (DD Family Caregiver, HB 1540 quality contracts, CCAP quality tiers)
- Carryover requests for COVID-era one-time funding \$133.596 M (multi-biennia COVID-era funding Eviction / Foreclosure Prevention, 10% HCBS Capacity Fund, ARPA Child Care, Vulnerable adults, HB 1540 Child Care Assistance, Research-based Year-before Kindergarten Programs)

25-27 Base compared to 23-25 Base:

- Cost to continue programs (utilization and cost) \$81.19M (Child care assistance, child welfare, developmental disabilities, LIHEAP and SNAP)
- Does not include previous one-time funded items \$21.085 M (child care grants, child care assistance quality tiers)
- Increase in general fund primarily due to FMAP shift (DD), increases in cost to continue for child care assistance and the general fund portion of provider inflation and salary increases
- Increase in federal funds primarily due to cost to continue (ex. SNAP)





#8: Purpose and use of one-time funding items

81

#9: One-time funding items requested 2025-27

2023-25 One-time funding

One-Time Funding - \$21,085,000

- \$2,500,000 Family Caregiver program
- \$3,000,000 HB1540 Early Childhood infrastructure contracts (quality coaches, business coaches)
- \$7,000,000 HB1540 Child Care Grants
- \$5,000,000 HB 1540 Working Parent Child Care Relief
- \$3,000,000 HB 1540 Child Care Assistance quality payment tiers
- \$585,000 Grants to homeless outreach / engagement providers

Large Carryover Items – One Time – \$133.6 million

- \$23.5 million 10% HCBS Capacity funds (one-time COVID funds, multi-biennia)
- \$89.4 million Emergency Renter and Homeowner Assistance / Eviction Prevention, child care, aging, infant development (one-time COVID funds, multi-biennia)
- \$9.5 million Working Parent Child Care Relief funding allocation from 2021 special session
- \$3.2 million Money Follows the Person capacity building
- \$3.6 million Aging ADRL, adult protective services, respite, CFS Family First transition | Health & Human Services

2025-27 Executive Budget Recommendation One-time funding

- Retire Economic Assistance and Medicaid legacy systems on mainframe - \$4 million *
- Conversion of DD eligibility assessment tool for kids (ICAP to SIS) - \$400,000
- Implement comprehensive Vocational Rehab technology system - \$8 million
- LSTC Roof for Cedar Grove -\$712,480

- Best in Class expansion \$6 million
- Child care grants and shared services - \$5 million
- Early childhood quality infrastructure \$3 million
- Inclusion support for child care -\$172,500
- Access to outcome measurement system for quality rated child care programs - \$100,000
- Quality tiers in Child Care
 Assistance payments \$3 million

- Housing assistance for people at risk of housing instability -\$10 million
- Eviction prevention programs - \$3.5 million
- Home renovation incentives for accessibility - \$1 million



#10: Fees charged by agency, including amounts and uses

Fees

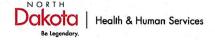
- Life Skills Transition Center Variable fee-based delivery of services to people with disabilities
 - Revenue per biennium \$44,768,281.43
- Child Support User Fee \$5 \$35, and \$550
 - Revenue per biennium \$670,851
- Child Care Licensing \$15 \$95
 - Revenue per biennium \$82,962



#11: Federal state fiscal relief funds to be spent, including purpose, amount and timeline

State Local Relief Funds

- ARPA State Local Relief Funds yet to expend = \$0
 - Child Care Assistance \$7.4 million; 100% expended
 - Working Parent Child Care Relief \$9.6 million; returned \$7.8 million to OMB as unobligated in Nov 2024
- Other time-limited funds
 - Housing Stability and Eviction Prevention 9/30/25 expenditure deadline; \$200 million original award;
 anticipate 100% expenditure by end of grant period
 - Homeowner Assistance Fund 9/30/26 expenditure deadline; \$50 million original award; anticipate 100% expenditure by end of grant award period
 - 10% HCBS Capacity Building Fund (Section 9817) 12/31/2025 expenditure deadline; anticipate 100% expenditure by end of fund expenditure period



#13: Any other bills being considered and their potential budgetary impact on HHS

Other bills

- HB 1034 re-establishment of terminated parental rights
- HB 1066 establishment of a programmatic wage for the Senior Community Employment Program (SECEP)
- HB 1119 streamlined child care licensing framework
- SB 2107 child care licensing and training timeline
- SB 2112 youth served by Life Skills Transition Center
- SB 2138 grants to organizations providing care for the elderly



#12: Need for any other sections to be added to the Appropriations bill None at this time

#14: One-page itemized listing of any changes needed to executive budget recommendation

N/A