

PROPOSED AMENDMENTS TO ENGROSSED SENATE BILL NO. 2012

That the House recede from its amendments as printed on pages 1811-1832 of the Senate Journal and pages 2037-2058 of the House Journal and that Engrossed Senate Bill No. 2012 be amended as follows:

Page 1, line 2, after "services" insert "; to provide an appropriation to the university of North Dakota school of medicine and health sciences"

Page 1, line 2, after "exemption" insert "; to create and enact a new section to chapter 50-06 and a new subsection to section 50-24.1-07 of the North Dakota Century Code and two new subsections to the new section to chapter 54-52.1 as created by section 2 of Senate Bill No. 2140, as approved by the sixty-eighth legislative assembly, of the North Dakota Century Code, relating to public employee health benefits coverage of insulin, a North Dakota legislative health care task force, and Medicaid claims"

Page 1 line 2, after "reenact" insert "subsection 2 of section 12.1-04-07,"

Page 1, line 3, after "sections" insert "50-01.2-01,"

Page 1, line 3, after "50-06-42" insert ", 50-11.1-02, 50-11.1-22, 50-11.1-23, 50-11.1-24"

Page 1, line 3, after the first comma insert "and"

Page 1, line 3, after the second comma insert "subsection 5 of section 50-24.1-37, and sections 50-24.5-02.3"

Page 1, line 3, after "to" insert "fitness to proceed examination, human service zone board membership,"

Page 1, line 4, after "services" insert ", the best in class program, basic care payment rates, the Medicaid expansion program"

Page 1, line 6, after the second "a" insert "legislative management"

Page 1, line 7, remove "and"

Page 1, line 7, after "date" insert "; and to declare an emergency"

Page 1, remove lines 19 through 24

Page 2, remove lines 1 through 31

Page 3, replace lines 1 through 7 with:

"Salaries and wages	\$21,363,556	(\$21,363,556)	\$0
Salaries and wages block grant	0	456,750,493	456,750,493
Operating expenses	151,161,924	95,654,000	246,815,924
Capital assets	<u>75,000</u>	<u>0</u>	<u>75,000</u>
Total all funds	\$172,600,480	\$531,040,937	\$703,641,417
Less estimated income	<u>92,905,426</u>	<u>293,796,361</u>	<u>386,701,787</u>
Total general fund	\$79,695,054	\$237,244,576	\$316,939,630

Subdivision 2.

PROGRAM AND POLICY

	<u>Base Level</u>	<u>Adjustments or Enhancements</u>	<u>Appropriation</u>
Salaries and wages	\$122,081,310	(\$122,081,310)	\$0
Operating expenses	176,078,719	59,740,165	235,818,884
Capital assets	10,000	0	10,000
Grants	467,144,387	168,924,549	636,068,936
Grants - medical assistance	3,028,666,463	396,605,903	3,425,272,366
Opioid prevention	<u>0</u>	<u>2,000,000</u>	<u>2,000,000</u>
Total all funds	\$3,793,980,879	\$505,189,307	\$4,299,170,186
Less estimated income	<u>2,499,452,627</u>	<u>269,279,579</u>	<u>2,768,732,206</u>
Total general fund	\$1,294,528,252	\$235,909,728	\$1,530,437,980

Subdivision 3.

FIELD SERVICES

	<u>Base Level</u>	<u>Adjustments or Enhancements</u>	<u>Appropriation</u>
Human service centers	\$163,213,829	(\$115,810,747)	\$47,403,082
Institutions	<u>130,383,428</u>	<u>(69,570,994)</u>	<u>60,812,434</u>
Total all funds	\$293,597,257	(\$185,381,741)	\$108,215,516
Less estimated income	<u>114,273,300</u>	<u>(84,296,246)</u>	<u>29,977,054</u>
Total general fund	\$179,323,957	(\$101,085,495)	\$78,238,462

Subdivision 4.

COUNTY SOCIAL SERVICE FINANCING

	<u>Base Level</u>	<u>Adjustments or Enhancements</u>	<u>Appropriation</u>
County social services	<u>\$189,917,386</u>	<u>\$7,746,275</u>	<u>\$197,663,661</u>
Total all funds	\$189,917,386	\$7,746,275	\$197,663,661
Less estimated income	<u>188,676,995</u>	<u>8,969,793</u>	<u>197,646,788</u>
Total general fund	\$1,240,391	(\$1,223,518)	\$16,873

Subdivision 5.

TOTAL - SECTION 1

	<u>Base Level</u>	<u>Adjustments or Enhancements</u>	<u>Appropriation</u>
Grand total general fund	\$1,554,787,654	\$370,845,291	\$1,925,632,945
Grand total special funds	<u>2,895,308,348</u>	<u>487,749,487</u>	<u>3,383,057,835</u>
Grand total all funds	\$4,450,096,002	\$858,594,778	\$5,308,690,780
Full-time equivalent positions	2,265.33	0.00	2,265.33"

Page 3, replace line 11 with:

"Technology projects	\$67,596,372	\$71,000,000"
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Page 3, replace line 18 with:

"State hospital design	0	12,500,000
Service grants	0	585,000
Cross-disability advisory council	0	1,400,000
Behavioral health facility grants	0	1,950,000
Base care payment study	0	600,000
Health care task force	0	750,000"

Page 3, remove line 20

Page 3, replace lines 23 through 26 with:

"Law enforcement telehealth	<u>0</u>	<u>2,650,000</u>
Total all funds	\$216,080,305	\$118,234,498
Less estimated income	<u>191,847,089</u>	<u>103,752,326</u>
Total general fund	\$24,233,216	\$14,482,172

SECTION 3. APPROPRIATION - UNIVERSITY OF NORTH DAKOTA SCHOOL OF MEDICINE AND HEALTH SCIENCES - CLINICAL INTEGRATED NETWORK GRANT.

1. There is appropriated out of any moneys in the community health trust fund in the state treasury, not otherwise appropriated, the sum of \$3,500,000, or so much of the sum as may be necessary, to the university of North Dakota school of medicine and health sciences for the purpose of the center for rural health awarding a grant to a clinically integrated network, for the biennium beginning July 1, 2023, and ending June 30, 2025.
2. To qualify for a grant under this section, an applicant:
 - a. Must be a statewide value-based clinically integrated network that supports a majority of the independent critical access hospitals in the state.
 - b. Must certify one dollar of matching funds for every five dollars of grant funds awarded.
 - c. Shall demonstrate a strategic plan to accomplish the following goals:
 - (1) Implementation of a data-sharing platform;
 - (2) Utilization of value-based care contract modeling;
 - (3) Utilization of data analytics software to provide for risk stratification and referral management capabilities;
 - (4) Development of unified care management practices; and
 - (5) Staffing of the clinically integrated network.
 - d. Shall agree during the 2023-25 and 2025-27 bienniums to make annual reports to the department of health and human services and the center for rural health on the use of the grant funds and the status of accomplishing the clinically integrated network strategic plan goals.

SECTION 4. APPROPRIATION - 2021-23 BIENNIUM - CHILD SUPPORT.

There is appropriated out of any moneys in the department of health and human services operating fund in the state treasury, not otherwise appropriated, the sum of

\$4,500, or so much of the sum as may be necessary, to the the department of health and human services for the purpose of repayment of moneys, including interest, not withheld by the state in accordance with section 14-09-09.16 from an obligor's unemployment benefits from June 1, 2021, through September 30, 2021, for the period beginning with the effective date of this section and ending June 30, 2023."

Page 3, line 29, remove "and"

Page 3, line 29, after "3" insert ", and 4"

Page 4, remove lines 3 through 8

Page 4, line 9, replace "health and human services." with "The department of health and human services may use the transfer authority in this section to transfer or expend funds for the continuation of the community behavioral health program pursuant to section 54-23.3-10."

Page 4, after line 22, insert:

"SECTION 7. FULL-TIME EQUIVALENT POSITION BLOCK GRANT PROGRAM - REPORT. Subdivision 1 of section 1 of this Act includes funding for a full-time equivalent position block grant program. This funding, along with salaries and wages funding appropriated in House Bill No. 1004, as approved by the sixty-eighth legislative assembly, is available to fund full-time equivalent positions as determined by the department of health and human services. Notwithstanding any other provision of law, the department is authorized to increase or decrease authorized full-time equivalent positions subject to the availability of funds and the provisions of this section. The department may not increase full-time equivalent positions for the purpose of transferring human service zone employees to state employment. Pursuant to section 5 of this Act, the department is authorized to transfer funding to and from the salaries and wages block grant line item. The department shall report to the office of management and budget and legislative council any adjustments to full-time equivalent positions. The department shall provide reports to the legislative management regarding the use of funding for the program."

Page 4, line 25, replace "\$21,600,000" with "\$26,950,000"

Page 4, line 28, replace "item" with "items"

Page 4, line 28, replace "subdivision" with "subdivisions 1 and"

Page 4, line 28, replace "\$221,600,000" with "\$226,950,000"

Page 5, line 2, replace "item" with "items"

Page 5, line 2, replace "subdivision" with "subdivisions 1 and"

Page 5, line 2, replace "\$20,400,000" with "\$24,317,500"

Page 5, line 3, remove "defraying expenses of the child support computer"

Page 5, line 4, replace "replacement project" with "the following purposes:

1. The sum of \$20,400,000 for the child support computer replacement project;
2. The sum of \$1,867,500 for the 988 crisis hotline program;

3. The sum of \$700,000 for costs to implement the cross-disability advisory council;
4. The sum of \$600,000 for a study of basic care funding rates; and
5. The sum of \$750,000 for costs of the health care task force"

Page 5, replace lines 5 through 7 with:

"SECTION 11. ESTIMATED INCOME - HEALTH CARE TRUST FUND. The estimated income line item in subdivision 2 of section 1 of this Act includes the sum of \$500,000 from the health care trust fund for basic care facility bad debt expense.

SECTION 12. ESTIMATED INCOME - FEDERAL STATE FISCAL RECOVERY FUND. The estimated income line items in subdivisions 2 and 3 of section 1 of this Act includes the sum of \$3,235,000 from the federal state fiscal recovery fund for the following purposes:

1. The sum of \$2,650,000 to implement a virtual behavioral health crisis care program for rural law enforcement;
2. The sum of \$300,000 for crisis organizations that provide crisis services to young adults who are at risk of being homeless or experiencing other serious adverse life events. After July 1, 2024, this funding may be provided only to organizations that are certified in services provided by the organization; and
3. The sum of \$285,000 for grants to volunteer-based ecumenical ministry organizations.

SECTION 13. ESTIMATED INCOME - CHARITABLE GAMING OPERATING FUND. Notwithstanding section 53-06.1-11.2, the estimated income line item in subdivision 2 of section 1 of this Act includes the sum of \$500,000 from the charitable gaming operating fund for costs of gambling disorder prevention services."

Page 5, line 10, replace "\$17,735,154" with "\$25,235,154"

Page 5, line 13, replace "\$5,000,000" with "\$12,500,000"

Page 5, after line 15, insert:

"SECTION 15. BEHAVIORAL HEALTH FACILITY GRANTS. Section 1 of this Act includes the sum of \$1,950,000 from the general fund for the purpose of providing a one-time behavioral health facility grant to establish a behavioral health facility in the northwest human service center region, for the biennium beginning July 1, 2023, and ending June 30, 2025. The department of health and human services shall provide a grant as follows:

1. The grant recipient must provide matching funds of \$1,750,000 to establish the facility.
2. The grant term must be for five years.
3. The requirements of chapter 54-44.4 do not apply to the selection of a grant recipient, the grant award, or payments made under this section.

4. To receive the grant, the behavioral health facility shall:
 - a. Submit an application in the form and manner prescribed by the department;
 - b. Enter a grant agreement with the department;
 - c. Use grant funds to support the provision of behavioral health in the grant award service areas;
 - d. Provide and disclose information needed to comply with the department's data collection requirements; and
 - e. Operate in compliance with grant requirements.
5. The department may recapture grant funds distributed to a grant recipient found by the department to be out of compliance with the requirements established by the grant program, including ending or reducing the operation of the behavioral health facility in the service area.
6. The department may not collect property, equipment, or supplies purchased with grant funds from the grant recipient after successful completion of the terms of the grant.

SECTION 16. HEALTH CARE TASK FORCE - APPROPRIATION - REPORT.

Subdivision 1 of section 1 of this Act includes the sum of \$750,000 from the community health trust fund for expenses of the health care task force and for the purpose of facilitating the task force. The task force may seek funding from outside sources and any funds received are appropriated to the department of health and human services for activities of the task force for the biennium beginning July 1, 2023, and ending June 30, 2025. The purpose of the task force is to understand and create transparency around health care costs and the drivers of cost growth with the goal of lessening the impact of rising health care costs to citizens, businesses, and government. The task force shall take a holistic view to include the full payor mix, including the uninsured and charity care. The task force shall collect and analyze health care spending data to create meaningful actions to slow spending growth and improve health care access and quality. The task force shall meet at least once each quarter and may request, obtain, review, and analyze information relating to North Dakota health care, including data, reports, audits, and other information as requested by the task force."

Page 5, line 18, after "hospital" insert ", southeast human service center,"

Page 5, line 19, replace "3" with "5"

Page 5, line 24, after "hospital" insert ", southeast human service center,"

Page 5, line 30, replace "3" with "5"

Page 6, remove lines 9 and 10

Page 6, line 11, remove "and ending June 30, 2025."

Page 6, line 23, replace "\$5,000,000" with "\$12,500,000"

Page 6, line 24, after "fund" insert "as identified in section 14 of this Act"

Page 6, line 30, after the period insert "The requirements of chapter 54-44.7 do not apply to the selection of a vendor, the procurement award, or payments made under this section regarding the design process and design of the new state hospital."

Page 7, line 3, replace "\$942,550,279" with "\$802,616,809"

Page 7, line 4, replace "\$94,225,028" with "\$80,261,681"

Page 7, line 21, remove "Critical access hospitals may not be paid less than one"

Page 7, remove line 22

Page 7, line 26, after "reimbursement" insert ". Critical access hospitals may not be paid less than one hundred percent of Medicare allowable costs and human service centers may not be paid less than one hundred percent of the current traditional Medicaid rate. Behavioral health services involving partial hospitalization, intensive outpatient, professional services, and residential behavioral health services provided in facilities that are not institutions for mental diseases are not subject to the provisions in subsection 6"

Page 8, after line 2, insert:

- "6. Except for the provisions in subsection 4, managed care organization premium payments must be built using the assumption that rates paid to providers under the medical assistance expansion program may not exceed one hundred forty-five percent of Medicare reimbursement. This subsection applies to any medical assistance expansion program provider fee schedule that becomes effective on or after January 1, 2025.

SECTION 23. DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND PARENTING RESOURCE WEBSITE. The department of health and human services shall develop and maintain a state internet website that provides information and links to social services, financial assistance, parenting information, maternal and childbirth life services, planning guidance, care centers and agencies, and other available public and private resources for expectant families and new parents. The department may contract with a third party for the development of the website. The website must be operational by August 1, 2023, and have a domain name life.nd.gov or a similar domain name. The website must be distinct from the department's website and the department shall place a clear and conspicuous link to the website on the department website.

SECTION 24. QUARTERLY BUDGET AND UTILIZATION REPORTS. During the biennium beginning July 1, 2023, and ending June 30, 2025, the department of health and human services shall make quarterly reports available that detail the status of the department's budget and the utilization rates of programs. The reports must be made available within 30 days of the close of each quarter.

SECTION 25. AMENDMENT. Subsection 2 of section 12.1-04-07 of the North Dakota Century Code is amended and reenacted as follows:

2. An examination must occur within fifteen days from receipt of material necessary to examine the fitness of the individual and notice of entry of the order served upon the tier 1a mental health professional. Attorneys shall disclose any materials necessary to examine the fitness of the individual to the tier 1a examiner contemporaneously with the order. For good cause

shown, the court may grant an extension allowing an additional seven days to complete the examination."

SECTION 26. AMENDMENT. Section 50-01.2-01 of the North Dakota Century Code is amended and reenacted as follows:

50-01.2-01. Human service zone board - Members - Qualifications.

The board of county commissioners of each county within the human service zone shall appoint the appointed members of the human service zone board based upon fitness to serve as members by reason of character, experience, and training without regard to political affiliation. Appointed members of the human service zone board must consist of local elected officials and other key community partners, including at least one member of the legislative assembly. If a human service zone consists of two or more counties, each county must be represented on the human service zone board by only one county commissioner of that county. If a human service zone consists of a single county, the county must be represented on the human service zone board by no more than two county commissioners of that county and the human service zone board must have at least five appointed members. Appointed members shall elect a vice presiding officer and appoint a secretary, and other officers as the human service zone board determines necessary. The human service zone director shall serve as presiding officer of the human service zone board as a nonappointed member.

Page 9, after line 11, insert:

"SECTION 28. A new section to chapter 50-06 of the North Dakota Century Code is created and enacted as follows:

North Dakota legislative health care task force - Duties - Membership - Legislative management report.

There is created a North Dakota legislative health care task force. The task force shall meet at least once each quarter and may request, obtain, review, and analyze information relating to North Dakota health care, including data, reports, audits, and other information as requested by the task force. The department of health and human services shall provide staff services for the task force. The task force shall submit a report of its activities and any recommendations to improve health care in the state to the legislative management by October first of each year. The chairman of the task force must be a member of the legislative assembly appointed by the chairman of the legislative management. The chairman of the task force may invite guests to participate in task force activities. The task force consists of the following members:

1. The chairman of the house appropriations committee human resources division, or the chairman's designee;
2. The chairman of the senate appropriations committee human resources division, or the chairman's designee;
3. The chairman of the house human services committee, or the chairman's designee;
4. The chairman of the senate human services committee, or the chairman's designee;

5. One member of the house of representatives as appointed by the house minority leader;
6. One member of the senate as appointed by the senate minority leader;
7. The commissioner of the department of health and human services, or the commissioner's designee;
8. Two members of the department of health and human services, including the state health officer and one member appointed by the commissioner of the department of health and human services;
9. One member from the governor's office, appointed by the governor;
10. The insurance commissioner, or the insurance commissioner's designee;
11. Two members to represent the North Dakota health insurance industry;
12. One member of the public, appointed by an organization that represents North Dakota businesses;
13. One member appointed by the Indian affairs commissioner to represent tribal health care;
14. One member from a North Dakota association that represents physicians;
15. Five members from a North Dakota association that represents hospitals, of which:
 - a. Two members must represent rural hospitals, including one representative of a hospital in a city with a population of ten thousand or more and one representative of a hospital in a city with a population under ten thousand;
 - b. Two members must represent urban hospitals, including one representative of an independent hospital and one representative of an integrated health care system; and
 - c. One member must represent a psychiatric hospital; and
16. Any other members appointed by the chairman of legislative management.

SECTION 29. AMENDMENT. Section 50-11.1-02 of the North Dakota Century Code is amended and reenacted as follows:

50-11.1-02. Definitions. (~~Effective through June 30, 2025~~)

As used in this chapter, unless the context or subject matter otherwise requires:

1. "Authorized agent" means the human service zone, unless another entity is designated by the department.
2. "Child care center" means an early childhood program licensed to provide early childhood services to nineteen or more children.
3. "Department" means the department of health and human services.

4. "Drop-in care" means the care of children on a one-time, occasional, or unscheduled basis to meet the short-term needs of families.
5. "Early childhood program" means any program licensed under this chapter where early childhood services are provided for at least two hours a day for three or more days a week.
6. "Early childhood services" means the care, supervision, education, or guidance of a child or children, which is provided in exchange for money, goods, or other services. Early childhood services does not include:
 - a. Substitute parental child care provided pursuant to chapter 50-11.
 - b. Child care provided in any educational facility, whether public or private, in grade one or above.
 - c. Child care provided in a kindergarten which has been established pursuant to chapter 15.1-22 or a nonpublic elementary school program approved pursuant to section 15.1-06-06.1.
 - d. Child care, preschool, and prekindergarten services provided to children under six years of age in any educational facility through a program approved by the department.
 - e. Child care provided in facilities operated in connection with a church, business, or organization where children are cared for during periods of time not exceeding four continuous hours while the child's parent is attending church services or is engaged in other activities, on the premises.
 - f. Schools or classes for religious instruction conducted by religious orders during the summer months for not more than two weeks, Sunday schools, weekly catechism, or other classes for religious instruction.
 - g. Summer resident or day camps for children which serve no children under six years of age for more than two weeks.
 - h. Sporting events, practices for sporting events, or sporting or physical activities conducted under the supervision of an adult.
 - i. Head start and early head start programs that are federally funded and meet federal head start performance standards.
 - j. Child care provided in a medical facility by medical personnel to children who are ill.
7. "Family child care" means a private residence licensed to provide early childhood services for no more than seven children at any one time, except that the term includes a residence licensed to provide early childhood services to two additional school-age children.
8. "Four-year old program" means an approved child care program operated by a public or private educational entity or an early childhood program designed to serve four-year olds.

9. "Group child care" means a child care program licensed to provide early childhood services for thirty or fewer children.
10. "Household member" means an adult living in the private residence out of which a program is operated, regardless of whether the adult is living there permanently or temporarily.
11. "Human service zone" means a county or consolidated group of counties administering human services within a designated area in accordance with an agreement or plan approved by the department.
12. "In-home provider" means any person who provides early childhood services to children in the children's home.
13. "Licensed" means an early childhood program has the rights, authority, or permission granted by the department to operate and provide early childhood services.
14. "Multiple licensed program" means an early childhood program licensed to provide more than one type of early childhood services.
15. "Owner" or "operator" means the person who has legal responsibility for the early childhood program and premises.
16. "Parent" means an individual with the legal relationship of father or mother to a child or an individual who legally stands in place of a father or mother, including a legal guardian or custodian.
17. "Premises" means the indoor and outdoor areas approved for providing early childhood services.
18. "Preschool" means a program licensed to offer early childhood services, which follows a preschool curriculum and course of study designed primarily to enhance the educational development of the children enrolled and which serves no child for more than three hours per day.
19. "Public approval" means a nonlicensed early childhood program operated by a government entity that has self-certified that the program complies with this chapter.
20. "Registrant" means the holder of an in-home provider registration document issued by the department in accordance with this chapter.
21. "Registration" means the process whereby the department maintains a record of all in-home providers who have stated that they have complied or will comply with the prescribed standards and adopted rules.
22. "Registration document" means a written instrument issued by the department to publicly document that the registrant has complied with this chapter and the applicable rules and standards as prescribed by the department.
23. "School-age child care" means a child care program licensed to provide early childhood services on a regular basis for nineteen or more children aged five years through eleven years.

24. "School-age children" means children served under this chapter who are at least five years but less than twelve years of age.
25. "Self-declaration" means voluntary documentation of an individual providing early childhood services in a private residence for up to five children through the age of eleven, of which no more than three may be under the age of twenty-four months.
26. "Staff member" means an individual:
 - a. Who is an employee of an early childhood program or of an early childhood services provider under a self-declaration;
 - b. Whose activities involve the care, supervision, or guidance of children of an early childhood program; or
 - c. Who may have unsupervised access to children under the care, supervision, or guidance of an early childhood program or early childhood services provider under a self-declaration.

Definitions. (Effective after June 30, 2025)

As used in this chapter, unless the context or subject matter otherwise requires:

- ~~1. "Authorized agent" means the human service zone, unless another entity is designated by the department.~~
- ~~2. "Child care center" means an early childhood program licensed to provide early childhood services to nineteen or more children.~~
- ~~3. "Department" means the department of health and human services.~~
- ~~4. "Drop-in care" means the care of children on a one-time, occasional, or unscheduled basis to meet the short-term needs of families.~~
- ~~5. "Early childhood program" means any program licensed under this chapter where early childhood services are provided for at least two hours a day for three or more days a week.~~
- ~~6. "Early childhood services" means the care, supervision, education, or guidance of a child or children, which is provided in exchange for money, goods, or other services. Early childhood services does not include:

 - ~~a. Substitute parental child care provided pursuant to chapter 50-11.~~
 - ~~b. Child care provided in any educational facility, whether public or private, in grade one or above.~~
 - ~~c. Child care provided in a kindergarten which has been established pursuant to chapter 15.1-22 or a nonpublic elementary school program approved pursuant to section 15.1-06-06.1.~~
 - ~~d. Child care, preschool, and prekindergarten services provided to children under six years of age in any educational facility through a program approved by the department.~~~~

- e. ~~Child care provided in facilities operated in connection with a church, business, or organization where children are cared for during periods of time not exceeding four continuous hours while the child's parent is attending church services or is engaged in other activities, on the premises.~~
 - f. ~~Schools or classes for religious instruction conducted by religious orders during the summer months for not more than two weeks, Sunday schools, weekly catechism, or other classes for religious instruction.~~
 - g. ~~Summer resident or day camps for children which serve no children under six years of age for more than two weeks.~~
 - h. ~~Sporting events, practices for sporting events, or sporting or physical activities conducted under the supervision of an adult.~~
 - i. ~~Head start and early head start programs that are federally funded and meet federal head start performance standards.~~
 - j. ~~Child care provided in a medical facility by medical personnel to children who are ill.~~
7. ~~"Family child care" means a private residence licensed to provide early childhood services for no more than seven children at any one time, except that the term includes a residence licensed to provide early childhood services to two additional school-age children.~~
 8. ~~"Group child care" means a child care program licensed to provide early childhood services for thirty or fewer children.~~
 9. ~~"Household member" means an adult living in the private residence out of which a program is operated, regardless of whether the adult is living there permanently or temporarily.~~
 10. ~~"Human service zone" means a county or consolidated group of counties administering human services within a designated area in accordance with an agreement or plan approved by the department.~~
 11. ~~"In-home provider" means any person who provides early childhood services to children in the children's home.~~
 12. ~~"Licensed" means an early childhood program has the rights, authority, or permission granted by the department to operate and provide early childhood services.~~
 13. ~~"Multiple licensed program" means an early childhood program licensed to provide more than one type of early childhood services.~~
 14. ~~"Owner" or "operator" means the person who has legal responsibility for the early childhood program and premises.~~
 15. ~~"Parent" means an individual with the legal relationship of father or mother to a child or an individual who legally stands in place of a father or mother, including a legal guardian or custodian.~~

16. ~~"Premises" means the indoor and outdoor areas approved for providing early childhood services.~~
17. ~~"Preschool" means a program licensed to offer early childhood services, which follows a preschool curriculum and course of study designed primarily to enhance the educational development of the children enrolled and which serves no child for more than three hours per day.~~
18. ~~"Public approval" means a nonlicensed early childhood program operated by a government entity that has self-certified that the program complies with this chapter.~~
19. ~~"Registrant" means the holder of an in-home provider registration document issued by the department in accordance with this chapter.~~
20. ~~"Registration" means the process whereby the department maintains a record of all in-home providers who have stated that they have complied or will comply with the prescribed standards and adopted rules.~~
21. ~~"Registration document" means a written instrument issued by the department to publicly document that the registrant has complied with this chapter and the applicable rules and standards as prescribed by the department.~~
22. ~~"School-age child care" means a child care program licensed to provide early childhood services on a regular basis for nineteen or more children aged five years through eleven years.~~
23. ~~"School-age children" means children served under this chapter who are at least five years but less than twelve years of age.~~
24. ~~"Self-declaration" means voluntary documentation of an individual providing early childhood services in a private residence for up to five children through the age of eleven, of which no more than three may be under the age of twenty-four months.~~
25. ~~"Staff member" means an individual:~~
 - a. ~~Who is an employee of an early childhood program or of an early childhood services provider under a self-declaration;~~
 - b. ~~Whose activities involve the care, supervision, or guidance of children of an early childhood program; or~~
 - c. ~~Who may have unsupervised access to children under the care, supervision, or guidance of an early childhood program or early childhood services provider under a self-declaration.~~

SECTION 30. AMENDMENT. Section 50-11.1-22 of the North Dakota Century Code is amended and reenacted as follows:

50-11.1-22. Early childhood grant for best in class four-year old experiences. (Expired effective July 1, 2025)

1. A four-year old program deemed eligible under section 50-11.1-23 may submit an application for the best in class four-year old experiences grant.

An approved program is eligible for an annual award of one hundred twenty thousand dollars per approved group size. The grant award must be matched with no less than twenty thousand dollars in other funds. The department shall assign a program support coach to each approved program. An approved program:

- a. Shall utilize the assigned support coach and utilize the sliding fee scale for parent fees, as established by the department.
 - b. May use grant funds to support the provision of quality early childhood experiences, including expenditures related to staffing, training, equipment, and supplies.
 - c. May not use grant funds for construction or rehabilitation. An approved program must enter a grant agreement with the department.
2. The department may not collect equipment or supplies purchased with grant funds from the approved program after successful completion of the term of the grant.

SECTION 31. AMENDMENT. Section 50-11.1-23 of the North Dakota Century Code is amended and reenacted as follows:

50-11.1-23. Eligibility for best in class four-year old experiences grant.
(Expired effective July 1, 2025)

1. A four-year old program may submit, in the form and manner prescribed by the department, an application to the department for a grant under section 50-11.1-22, if the provider certifies to the department the provider:
 - a. Operates a four-year old program in this state;
 - b. Operates a four-year old program for children who have reached four years of age before August first in the year of enrollment;
 - c. Operates a four-year old program that has a duration of at least four hundred hours over a period of at least thirty-two consecutive weeks;
 - d. Incorporates within the four-year old program at least ten hours of research-based family engagement;
 - e. Has been determined to meet the standards and expectations of no less than step three in the North Dakota early childhood quality improvement system;
 - f. Is willing to admit children of all learning abilities into the four-year old program;
 - g. Is willing to admit children who receive assistance from the child care assistance program into the four-year old program; and
 - h. Is willing to operate in compliance with the grant requirements, including:
 - (1) Maintaining the recommended group size for number of children served in the four-year old program;

- (2) Complying with requirements related to qualifications, training, and professional development of staff delivering services in the four-year old program; and
 - (3) Adhering to expectations established by the department related to four-year old program monitoring and oversight.
2. The department may distribute grants under this section to approved four-year old programs, including four-year old programs operated as early childhood programs by educational facilities or federally funded head start programs or in connection with a church, business, or organization that operates a four-year old program.
 3. The department may recapture grant funds distributed to an approved four-year old program found by the department to be out of compliance with requirements established for the best in class four-year old experiences grant program.

SECTION 32. AMENDMENT. Section 50-11.1-24 of the North Dakota Century Code is amended and reenacted as follows:

50-11.1-24. Grant program data collection - Requirements. (~~Expired effective July 1, 2025~~)

The state agency with approval authority over four-year old programs, with the advice and consent of the department, shall implement a uniform system for the accounting, budgeting, and reporting of data by any four-year old program provider to whom or to which grants are distributed under section 50-11.1-23. Grants may be withheld or forfeited, in whole or in part, if information required in accordance with this section is not submitted at the time or in the manner requested by the state agency with approval authority over four-year old programs. A grant recipient shall consent to provide information needed to comply with data collection requirements. The state agency with approval authority over four-year old programs shall disclose the requested information to the department.

SECTION 33. A new subsection to section 50-24.1-07 of the North Dakota Century Code is created and enacted as follows:

In any probate proceedings in which the department has filed a claim under this section, no additional evidence of foundation may be required for the admission of the department's payment record supporting the department's claim if the payment record is certified as a true copy and bears the signature of a representative of the department. There is a rebuttable presumption that the amount of medical assistance on the claim was incurred and paid on behalf of the recipient of medical assistance and is an allowable claim."

Page 9, after line 19, insert:

"SECTION 35. AMENDMENT. Subsection 5 of section 50-24.1-37 of the North Dakota Century Code is amended and reenacted as follows:

5. Provider and managed care organization reimbursement rate information received or held by the department under this section is an open record.

SECTION 36. AMENDMENT. Section 50-24.5-02.3 of the North Dakota Century Code is amended and reenacted as follows:

50-24.5-02.3. Basic care payment rates.

1. ~~The department shall establish, by rule, procedures for determining rates~~determine limits for the care of residents of basic care facilities that qualify as vendors of an aged, blind, and disabled persons program and for implementing provisions of this chapter. ~~The procedures must be based on methods and standards that the department finds are adequate to recognize the data demonstrating the most recent costs that must be incurred for the care of residents in efficiently and economically operated basic care facilities. The department shall determine the limits every four years by July first, beginning with July 1, 2023.~~
2. ~~The department shall identify costs that are recognized for establishing payment rates~~establish the limits by using the median rates from the most recent data available. The direct care limit must be the median plus eighteen percent. The indirect care limit must be the median plus twelve percent.
3. ~~For the rate year beginning July 1, 2016~~2023, the department shall establish the limits by using the average of the highest and lowest rates from the 2014 rate year. ~~The direct care limit must be ninety-five percent of the average and the indirect care limit must be ninety percent of the average. Beginning with the July 1, 2017, rate year, the department shall adjust the limits by using the cost percentage change from the prior two rate years, within the limits of legislative appropriations~~increase rates and limits three and one-half percent for inflation. For the rate year beginning July 1, 2024, the department shall increase rates and limits three and one-half percent for inflation.
4. ~~The department shall provide, by rule, within the limits of legislative appropriations, for payment of rates paid by the aged, blind, and disabled persons program for a maximum of thirty days per occurrence for leave days for a resident who is in a licensed health care facility when the resident is expected to return to the facility~~provide a rate increase in the amount of five dollars per day for the period beginning July 1, 2023, and ending June 30, 2025, after which the increase is not effective. This rate increase may not be included in any calculation of inflation increase.
5. ~~Within the limits of legislative appropriations, the department shall establish an uncompensated care expense of one hundred eightythree hundred sixty-five days."~~

Page 10, after line 2, insert:

SECTION 38. Two new subsections to the new section to chapter 54-52.1 of the North Dakota Century Code as created by section 2 of Senate Bill No. 2140, as approved by the sixty-eighth legislative assembly, are created and enacted as follows:

If application of subsection 3 would result in the ineligibility of a health benefit plan that is a qualified high-deductible health plan to qualify as a health savings account under section 223 of the Internal Revenue Code [26 U.S.C. 223], the requirements of subsection 3 do not apply with

respect to the deductible of the health benefit plan until after the enrollee has satisfied the minimum deductible under section 26 U.S.C. 223.

This section does not apply to the Medicare part D prescription drug coverage plan.

Page 10, line 19, remove "**CONTINGENT**"

Page 10, line 19, after "**REPORT**" insert "- **EXEMPTION**"

Page 10, line 20, replace "Beginning with the effective date of this Act, the" with "1. The"

Page 10, line 21, replace "three" with "at least one"

Page 10, line 21, replace "centers" with "center"

Page 10, line 24, remove "up to fifty"

Page 10, after line 27, insert:

- "2. The department may consider the inclusion of providers of integrated, wraparound crisis services to young adults, who are at risk of being homeless or experiencing serious adverse life events, into the creation of any certified community behavioral health clinic.
3. The \$15,000,000 from the general fund appropriated to the department of health and human services for the substance use disorder treatment voucher system in chapter 12 of the 2021 Session Laws is not subject to the provisions of section 54-44.1-11, and any unexpended funds of up to \$4,150,000 from this appropriation may be continued and spent for defraying the expenses of additional human service centers to begin the process of becoming a certified community behavioral health clinic to provide continuous community-based behavioral health services for children and adults during the biennium beginning July 1, 2023, and ending June 30, 2025."

Page 11, line 15, remove "of which the amount"

Page 11, remove line 16

Page 11, line 17, remove "home- and community-based services 10 percent enhancement plan"

Page 11, line 25, remove the second "and"

Page 11, line 28, after "50-06-42.1" insert ";

10. The sum of \$175,000 for home and community-based services housing assistance in chapter 12 of the 2021 Session Laws; and
11. The sum of \$15,000,000 appropriated from the general fund and the sum of \$15,000,000 appropriated from federal funds for the child welfare technology project in chapter 12 of the 2021 Session Laws"

Page 12, line 10, after the first "of" insert "underfunding,"

Page 12, line 11, remove "and"

Page 12, line 12, after "percentage" insert ", and unexpected contract cost increases that exceed ten percent"

Page 12, line 16, replace "four" with "three"

Page 12, line 18, replace "seven" with "two"

Page 12, line 18, replace "the first" with "each"

Page 12, line 18, remove "of the biennium and four percent the"

Page 12, line 19, remove "second year"

Page 12, line 20, after "facilities" insert "or prospective payment system hospitals that have different inflation rates"

Page 12, after line 20, insert:

"SECTION 49. DEVELOPMENTAL DISABILITY PROVIDER ADJUSTMENT.

Subdivision 2 of section 1 of this Act includes funding for developmental disability provider rate adjustments. Adjustments must provide for the equivalent of a one dollar per hour increase for direct care staff and the equivalent of a one dollar per hour increase for indirect program support staff of licensed developmental disability providers. Developmental disability providers shall provide a report to the department of health and human services as determined by the department. The increase to direct care staff and related indirect program support staff does not apply to qualified service provider rates as established under the long-term care program."

Page 13, after line 2, insert:

SECTION 52. LEGISLATIVE MANAGEMENT STUDY - SOCIAL WORK LICENSURE COMPACT. During the 2023-24 interim, the legislative management shall consider studying the feasibility and desirability of the legislative assembly enacting the social work licensure compact. The study may include consideration of whether the public and the social work community support enactment and whether the North Dakota board of social work examiners has the capacity to participate in the compact. The legislative management shall report its findings and recommendations, together with any legislation required to implement the recommendations, to the sixty-ninth legislative assembly.

SECTION 53. LEGISLATIVE MANAGEMENT STUDY - MEDICAID PROVIDER REIMBURSEMENT ARRANGEMENTS. During the 2023-24 interim, the legislative management shall study the benefits of basing provider reimbursement rates for the Medicaid program in accordance with a provider's performance under established and accepted value-based care metrics. The legislative management shall report its findings and recommendations, together with any legislation required to implement the recommendations, to the sixty-ninth legislative assembly.

SECTION 54. LEGISLATIVE MANAGEMENT STUDY - INTERMEDIATE CARE FACILITY RATE FORMULA. During the 2023-24 interim, the legislative management shall consider studying the payment rates for intermediate care facilities, including options to increase the rates. The study must consider the funded percentage of costs for services including day and small group care, individual employment, in-home supports, respite care, habilitative care, independent habitation, and residential habitation. The legislative management shall report its findings and

recommendations, together with any legislation required to implement the recommendations, to the sixty-ninth legislative assembly.

SECTION 55. SUPREME COURT STUDY - WELLNESS COURT - REPORT TO LEGISLATIVE MANAGEMENT. During the 2023-24 interim, the supreme court, in consultation with the department of corrections and rehabilitation, the department of health and human services, and the attorney general, shall study and identify those provisions of the North Dakota Century Code which pertain to drug court and assess whether the term wellness court should be adopted to replace drug court. The supreme court shall report its findings and recommendations, together with any legislation required to implement the statutory change of drug court to wellness court, to the legislative management by June 1, 2024.

Page 13, line 7, replace "19" with "39"

Page 13, line 8, after "2024" insert "; Senate Bill No. 2181, as approved by the sixty-eighth legislative assembly, becomes effective on October 1, 2023; and section 2 of Senate Bill No. 2276, as approved by the sixty-eighth legislative assembly, becomes effective on April 1, 2024"

Page 13, after line 8, insert:

"SECTION 58. EMERGENCY. Section 4 of this Act is declared to be an emergency measure."

Renumber accordingly

STATEMENT OF PURPOSE OF AMENDMENT:

Senate Bill No. 2012 - Summary of Conference Committee Action

	Base Budget	Senate Version	Conference Committee Changes	Conference Committee Version	House Version	Comparison to House
UND Medical Center						
Total all funds	\$0	\$0	\$3,500,000	\$3,500,000	\$3,500,000	\$0
Less estimated income	0	0	3,500,000	3,500,000	3,500,000	0
General fund	\$0	\$0	\$0	\$0	\$0	\$0
FTE	0.00	0.00	0.00	0.00	0.00	0.00
DHHS - Management						
Total all funds	\$172,600,480	\$265,550,380	\$438,091,037	\$703,641,417	\$702,891,417	\$750,000
Less estimated income	92,905,426	186,160,843	200,540,944	386,701,787	385,951,787	750,000
General fund	\$79,695,054	\$79,389,537	\$237,550,093	\$316,939,630	\$316,939,630	\$0
FTE	97.85	113.90	2,151.43	2,265.33	2,265.33	0.00
DHHS - Program/Policy						
Total all funds	\$3,793,980,879	\$4,617,924,174	(\$318,753,988)	\$4,299,170,186	\$4,100,427,740	\$198,742,446
Less estimated income	2,499,452,627	2,988,736,618	(220,004,412)	2,768,732,206	2,613,495,737	155,236,469
General fund	\$1,294,528,252	\$1,629,187,556	(\$98,749,576)	\$1,530,437,980	\$1,486,932,003	\$43,505,977
FTE	666.17	687.32	(687.32)	0.00	0.00	0.00
DHHS - County Social Services Financing						
Total all funds	\$189,917,386	\$225,361,586	(\$27,697,925)	\$197,663,661	\$193,913,661	\$3,750,000
Less estimated income	188,676,995	224,010,514	(26,363,726)	197,646,788	193,896,788	3,750,000
General fund	\$1,240,391	\$1,351,072	(\$1,334,199)	\$16,873	\$16,873	\$0
FTE	159.00	164.00	(164.00)	0.00	0.00	0.00
DHHS - Field Services						
Total all funds	\$293,597,257	\$352,897,223	(\$244,681,707)	\$108,215,516	\$107,857,691	\$357,825

Less estimated income	114,273,300	95,698,581	(65,721,527)	29,977,054	29,977,054	0
General fund	\$179,323,957	\$257,198,642	(\$178,960,180)	\$78,238,462	\$77,880,637	\$357,825
FTE	1,342.31	1,394.11	(1,394.11)	0.00	0.00	0.00
Bill total						
Total all funds	\$4,450,096,002	\$5,461,733,363	(\$149,542,583)	\$5,312,190,780	\$5,108,590,509	\$203,600,271
Less estimated income	2,895,308,348	3,494,606,556	(108,048,721)	3,386,557,835	3,226,821,366	159,736,469
General fund	\$1,554,787,654	\$1,967,126,807	(\$41,493,862)	\$1,925,632,945	\$1,881,769,143	\$43,863,802
FTE	2,265.33	2,359.33	(94.00)	2,265.33	2,265.33	0.00

Senate Bill No. 2012 - UND Medical Center - Conference Committee Action

	Base Budget	Senate Version	Conference Committee Changes	Conference Committee Version	House Version	Comparison to House
Clinical integrated network grant			\$3,500,000	\$3,500,000	\$3,500,000	
Total all funds	\$0	\$0	\$3,500,000	\$3,500,000	\$3,500,000	\$0
Less estimated income	0	0	3,500,000	3,500,000	3,500,000	0
General fund	\$0	\$0	\$0	\$0	\$0	\$0
FTE	0.00	0.00	0.00	0.00	0.00	0.00

Department 232 - UND Medical Center - Detail of Conference Committee Changes

	Adds Funding for Clinical Integrated Network Grant ¹	Total Conference Committee Changes
Clinical integrated network grant	\$3,500,000	\$3,500,000
Total all funds	\$3,500,000	\$3,500,000
Less estimated income	3,500,000	3,500,000
General fund	\$0	\$0
FTE	0.00	0.00

¹ Funding is added from the community health trust fund to allow the Center for Rural Health to award a grant to a clinical integrated network. The House also added this funding.

Senate Bill No. 2012 - DHHS - Management - Conference Committee Action

	Base Budget	Senate Version	Conference Committee Changes	Conference Committee Version	House Version	Comparison to House
Salaries and wages	\$21,363,556	\$24,409,456	(\$24,409,456)			
Operating expenses	151,161,924	241,065,924	5,750,000	\$246,815,924	\$246,065,924	\$750,000
Capital assets	75,000	75,000		75,000	75,000	
Salary block grant program			456,750,493	456,750,493	456,750,493	
Total all funds	\$172,600,480	\$265,550,380	\$438,091,037	\$703,641,417	\$702,891,417	\$750,000
Less estimated income	92,905,426	186,160,843	200,540,944	386,701,787	385,951,787	750,000
General fund	\$79,695,054	\$79,389,537	\$237,550,093	\$316,939,630	\$316,939,630	\$0
FTE	97.85	113.90	2,151.43	2,265.33	2,265.33	0.00

Department 326 - DHHS - Management - Detail of Conference Committee Changes

	Adjusts Funding for Management¹	Total Conference Committee Changes
Salaries and wages	(\$24,409,456)	(\$24,409,456)
Operating expenses	5,750,000	5,750,000
Capital assets		
Salary block grant program	<u>456,750,493</u>	<u>456,750,493</u>
Total all funds	\$438,091,037	\$438,091,037
Less estimated income	<u>200,540,944</u>	<u>200,540,944</u>
General fund	\$237,550,093	\$237,550,093
FTE	2,151.43	2,151.43

¹ Funding is adjusted for management as follows:

2023-25 Ongoing Funding Changes	FTE Positions	General Fund	Other Funds	Total
Transfers salary increase funding to a new FTE position block grant program, the same as the House.		(\$862,063)	(\$283,496)	(\$1,145,559)
Transfers health insurance funding to a new FTE position block grant program, the same as the House.		(436,667)	(139,099)	(575,766)
Transfers funding for salaries and wages to a new salary block grant program, the same as the House.	(112.40)	(16,918,521)	(5,622,318)	(22,540,839)
Creates a new departmentwide FTE block grant program, the same as the House.	2,265.33	247,896,527	190,940,966	438,837,493
Provides a salary increase for the FTE block grant program of 6 percent the 1 st year and 4 percent the 2 nd year of the 2023-25 biennium, the same as the House.		16,629,803	10,869,007	27,498,810
Provides funding for increases in health insurance premiums from \$1,429 to \$1,643 per month, the same as the House.		5,861,794	4,052,396	9,914,190
Underfunds salaries and wages in anticipation of vacant positions, the same as the House.		(19,500,000)		(19,500,000)
Removes new criminal background check positions added by the Senate. The House also removed these positions.	(1.50)	(120,780)	(26,512)	(147,292)
Reduces operating reductions made by the Senate from \$19.9 million to \$13.9 million. The House also made this adjustment.		6,000,000		6,000,000
Total ongoing funding changes	<u>2,151.43</u>	<u>\$238,550,093</u>	<u>\$199,790,944</u>	<u>\$438,341,037</u>

One-time Funding Items

Removes one-time funding added by		(\$1,000,000)		(\$1,000,000)
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the Senate to automate the criminal background check process. The House also removed this funding.

Adds one-time funding from the community health trust fund for expenses of the health care task force including a health care study.			750,000	750,000
Total one-time funding changes	0.00	(\$1,000,000)	\$750,000	(\$250,000)
Total changes to base level funding	2,151.43	\$237,550,093	\$200,540,944	\$438,091,037

Senate Bill No. 2012 - DHHS - Program/Policy - Conference Committee Action

	Base Budget	Senate Version	Conference Committee Changes	Conference Committee Version	House Version	Comparison to House
Salaries and wages	\$122,081,310	\$141,618,507	(\$141,618,507)			
Operating expenses	176,078,719	231,801,268	4,017,616	\$235,818,884	\$228,468,330	\$7,350,554
Capital assets	10,000	10,000		10,000	10,000	
Grants	467,144,387	657,651,069	(21,582,133)	636,068,936	634,074,486	1,994,450
Grants - Medical assistance	3,028,666,463	3,584,843,330	(159,570,964)	3,425,272,366	3,235,874,924	189,397,442
Opioid prevention		2,000,000		2,000,000	2,000,000	
Total all funds	\$3,793,980,879	\$4,617,924,174	(\$318,753,988)	\$4,299,170,186	\$4,100,427,740	\$198,742,446
Less estimated income	2,499,452,627	2,988,736,618	(220,004,412)	2,768,732,206	2,613,495,737	155,236,469
General fund	\$1,294,528,252	\$1,629,187,556	(\$98,749,576)	\$1,530,437,980	\$1,486,932,003	\$43,505,977
FTE	666.17	687.32	(687.32)	0.00	0.00	0.00

Department 328 - DHHS - Program/Policy - Detail of Conference Committee Changes

	Adjusts Funding for Program and Policy ¹	Total Conference Committee Changes
Salaries and wages	(\$141,618,507)	(\$141,618,507)
Operating expenses	4,017,616	4,017,616
Capital assets		
Grants	(21,582,133)	(21,582,133)
Grants - Medical assistance	(159,570,964)	(159,570,964)
Opioid prevention		
Total all funds	(\$318,753,988)	(\$318,753,988)
Less estimated income	(220,004,412)	(220,004,412)
General fund	(\$98,749,576)	(\$98,749,576)
FTE	(687.32)	(687.32)

¹ Funding for program and policy is adjusted as follows:

	FTE Positions	General Fund	Other Funds	Total
2023-25 Ongoing Funding Changes				
Transfers salary increase funding to a new FTE position block grant program, the same as the House.		(\$2,661,463)	(\$3,528,496)	(\$6,189,959)
Transfers health insurance funding to a new FTE position block grant program, the same as the House.		(1,338,470)	(1,865,110)	(3,203,580)
Transfers salaries and wages funding to a new FTE block grant program, the same as the House.	(675.32)	(52,606,648)	(77,965,332)	(130,571,980)

Reduces funding for provider inflation from 4 percent per year to 3 percent per year except as noted in medical services, long-term care, and developmental disabilities. The House provided 2 percent per year inflationary adjustments.	(10,189,967)	(11,820,510)	(22,010,477)
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Economic assistance

Removes funding added by the Senate to increase the utilization of the child care assistance program for children ages 0 to 3. The House also removed this funding.	(22,000,000)		(22,000,000)
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Removes funding added by the Senate to improve the ability of low-income parents to obtain child care, the same as the House.	(12,900,000)		(12,900,000)
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Medical Services

Removes new Medicaid provider strike team positions added by the Senate. The House also removed these positions.	(2.00)	(48,642)	(266,995)	(315,637)
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Adjusts inflation for prospective payment system hospital to 0 percent the 1 st year and 2 percent the 2 nd year of the biennium. The House removed provider inflation for prospective payment system hospitals.		(4,385,331)	(4,133,123)	(8,518,454)
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Reduces estimated utilization rates for Medicaid Expansion (\$110,753,873) and provides for a realigned rate structure to pay 145 percent of traditional Medicaid costs effective January 1, 2025 (\$29,179,602) except for behavioral health providers.		(13,993,347)	(125,940,128)	(139,933,475)
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Long-Term Care

Adds funding for a long-term care value based payment program, the same as the House.		6,000,000	6,000,000	12,000,000
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Reduces estimated long-term care utilization rates, the same as the House.		(9,949,900)	(11,220,100)	(21,170,000)
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Adds funding to rebase basic care rates. The House also added funding to rebase basic care rates.		3,880,000	2,120,000	6,000,000
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Increases basic care daily rate by \$5.		4,067,056	1,474,184	5,541,240
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Adds funding from the health care trust fund for basic care facility bad debt expense, the same as the House.			500,000	500,000
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Provides additional funding to increase basic care inflation to 3.5 percent each year of the 2023-25 biennium.		301,358	141,244	442,602
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Aging Services

Removes new home- and community-based services positions added by the Senate. The House also removed these positions.	(3.00)	(143,912)	(143,912)	(287,824)
Removes a new aging services compliance position added by the Senate. The House also removed this position.	(1.00)	(103,868)	(103,868)	(207,736)
Removes a new aging services lawsuit coordinator position added by the Senate. The House also removed this position.	(1.00)			0

Children and Family Services

Adds funding for kinship childcare, the same as the House.		460,000		460,000
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Behavioral Health

Removes new community behavioral health positions added by the Senate. The House also removed these positions.	(2.00)	(223,946)		(223,946)
Adjusts funding for the free through recovery program to provide funding directly to DHHS for the program rather than using passthrough funds. The House also made this adjustment.		15,500,000	(15,500,000)	0
Increases school behavioral health grants to provide a total of \$9.5 million, the same as the House.		3,000,000		3,000,000
Adds funding from the community health trust fund for the 988 crisis hotline program, the same as the House.			1,867,500	1,867,500
Adds funding from the charitable gaming operating fund for additional gambling disorder services. This will result in a general fund reduction of \$500,000.			500,000	500,000

Developmental Disabilities

Removes a new quality assurance position added by the Senate. The House also removed this position.	(1.00)	(103,868)	(103,868)	(207,736)
Removes a new early intervention position added by the Senate. The House also removed this position.	(1.00)	(86,602)	(86,602)	(173,204)
Adjusts enhanced payment rates for developmental disabilities providers to provide for a \$1 per hour increase for workers and 2 percent annual inflation increases. The House had provided		2,664,879	2,971,677	5,636,556

3 percent annual inflation adjustments.

Early Childhood

Combines the best in class program and the kindergarten readiness program into the research-based 0-4 program, the same as the House.		2,400,000		2,400,000
Removes funding added by the Senate for early childhood career grants, the same as the House.		(2,000,000)		(2,000,000)
Removes a new program administrator position added by the Senate. The House also removed this position.	(1.00)	(236,905)		(236,905)
Adds federal funds spending authority for the child care development fund and the preschool development grant, the same as the House.			21,514,027	21,514,027
Total ongoing funding changes	(687.32)	(\$94,699,576)	(\$215,589,412)	(\$310,288,988)

One-Time Funding Items

Adds funding for a behavioral health facility grant in the Northwest human service region, the same as the House.		\$1,950,000		\$1,950,000
Adds funding from the federal state fiscal recovery fund for grants to organizations that provide youth crisis services, the same as the House.			300,000	300,000
Adds funding from the federal state fiscal recovery fund for grants to volunteer-based ecumenical ministry organizations, the same as the House.			285,000	285,000
Adds one-time funding from the community health trust fund (\$700,000) and from federal funds (\$700,000) for consultant and other costs to implement the cross disability advisory council. The House did not add the federal funding.			1,400,000	1,400,000
Adds one-time funding from the community health trust fund for a study of the basic care payment system. The House and Senate did not include this funding.			600,000	600,000

Workforce Initiative One-Time Funding

Removes funding added by the Senate for early childhood rating infrastructure. The House also removed this funding.		(3,000,000)		(3,000,000)
Removes funding added by the Senate for quality tiers in the child care reimbursement program. The House also removed this funding.		(3,000,000)		(3,000,000)
Removes funding added from legacy fund earnings to expand public-private child care benefits. The House also removed			(1,000,000)	(1,000,000)

this funding.

Removes funding added from legacy fund earnings for child care business operating grants. The House also removed this funding.			(5,000,000)	(5,000,000)
Removes funding added from legacy fund earnings for a pilot program for child care during nontraditional hours. The House also removed this funding.			(1,000,000)	(1,000,000)
Total one-time funding changes	0.00	(\$4,050,000)	(\$4,415,000)	(\$8,465,000)
Total changes to base level funding	(687.32)	(\$98,749,576)	(\$220,004,412)	(\$318,753,988)

Senate Bill No. 2012 - DHHS - County Social Services Financing - Conference Committee Action

	Base Budget	Senate Version	Conference Committee Changes	Conference Committee Version	House Version	Comparison to House
County social services	\$189,917,386	\$225,361,586	(\$27,697,925)	\$197,663,661	\$193,913,661	\$3,750,000
Total all funds	\$189,917,386	\$225,361,586	(\$27,697,925)	\$197,663,661	\$193,913,661	\$3,750,000
Less estimated income	188,676,995	224,010,514	(26,363,726)	197,646,788	193,896,788	3,750,000
General fund	\$1,240,391	\$1,351,072	(\$1,334,199)	\$16,873	\$16,873	\$0
FTE	159.00	164.00	(164.00)	0.00	0.00	0.00

Department 333 - DHHS - County Social Services Financing - Detail of Conference Committee Changes

	Adjusts Funding for County Social Services ¹	Total Conference Committee Changes
County social services	(\$27,697,925)	(\$27,697,925)
Total all funds	(\$27,697,925)	(\$27,697,925)
Less estimated income	(26,363,726)	(26,363,726)
General fund	(\$1,334,199)	(\$1,334,199)
FTE	(164.00)	(164.00)

¹ Funding for the county social services program is adjusted as follows:

2023-25 Ongoing Funding Changes	FTE Positions	General Fund	Other Funds	Total
Transfers salary increase funding to a new FTE position block grant program, the same as the House.		(\$61,440)	(\$1,486,858)	(\$1,548,298)
Transfers health insurance funding to a new FTE position block grant program, the same as the House.		(30,807)	(721,687)	(752,494)
Funding is transferred to a new FTE position block grant program. The House also transferred this funding.	(157.00)	(1,241,952)	(27,900,463)	(29,142,415)
Adds funding to provide for 2023-25 biennium human service zone salary increases of 6 percent on July 1, 2023, and 4 percent on July 1, 2024, the same as the House. The Senate provided salary adjustments of 4 percent on July 1, 2023, and July 1, 2024.			2,097,313	2,097,313

Increases funding added by the Senate for human service zone employee salary equity adjustments to provide \$3.75 million. The House did not include any equity funding.		2,750,000	2,750,000
Removes new FTE positions added by the Senate for home- and community-based services.	(7.00)	(1,102,031)	(1,102,031)
Total ongoing funding changes	(164.00)	(\$1,334,199)	(\$26,363,726)

Senate Bill No. 2012 - DHHS - Field Services - Conference Committee Action

	Base Budget	Senate Version	Conference Committee Changes	Conference Committee Version	House Version	Comparison to House
Human service centers	\$163,213,829	\$189,374,455	(\$141,971,373)	\$47,403,082	\$47,045,257	\$357,825
Institutions	130,383,428	163,522,768	(102,710,334)	60,812,434	60,812,434	
Total all funds	\$293,597,257	\$352,897,223	(\$244,681,707)	\$108,215,516	\$107,857,691	\$357,825
Less estimated income	114,273,300	95,698,581	(65,721,527)	29,977,054	29,977,054	0
General fund	\$179,323,957	\$257,198,642	(\$178,960,180)	\$78,238,462	\$77,880,637	\$357,825
FTE	1,342.31	1,394.11	(1,394.11)	0.00	0.00	0.00

Department 349 - DHHS - Field Services - Detail of Conference Committee Changes

	Adjust Funding for Field Services ¹	Total Conference Committee Changes
Human service centers	(\$141,971,373)	(\$141,971,373)
Institutions	(102,710,334)	(102,710,334)
Total all funds	(\$244,681,707)	(\$244,681,707)
Less estimated income	(65,721,527)	(65,721,527)
General fund	(\$178,960,180)	(\$178,960,180)
FTE	(1,394.11)	(1,394.11)

¹ Funding for field services is adjusted as follows:

	FTE Positions	General Fund	Other Funds	Total
2023-25 Ongoing Funding Changes				
Transfers salary increase funding to a new FTE position block grant program, the same as the House.		(\$8,926,423)	(\$2,830,652)	(\$11,757,075)
Transfers health insurance increase funding to a new FTE position block grant program, the same as the House.		(4,161,185)	(1,449,231)	(5,610,416)
Transfers salaries and wages to an FTE block grant funding pool, the same as the House.	(1,320.61)	(172,296,141)	(77,619,785)	(249,915,926)
Removes FTE positions added by the Senate for community-based behavioral health. The House also removed these positions.	(28.50)	(950,906)		(950,906)
Removes FTE positions added by the Senate for crisis support services. The House also removed these positions.	(21.00)	(2,813,836)		(2,813,836)

Adjusts provider inflation to provide 3 percent annual adjustments. The Senate provided 4 percent annual adjustment and the House provided 2 percent annual adjustments.		(357,870)		(357,870)
Reduces the number of certified community behavioral health clinics from 3 to 1 and removes new FTE positions added for the clinics. The House also made this adjustment.	(24.00)	(5,711,959)		(5,711,959)
Restores operating reductions made in the executive budget for Human Service Centers (\$13,200,000) and the State Hospital (\$7,586,281). The House also restored this funding.		20,786,281		20,786,281
Adds funding to provide telehealth psychiatric services in correctional facilities, the same as the House.		1,500,000		1,500,000
Adds ongoing general fund support to replace funding at facilities due to a revenue shortfall, the same as the House.		30,000,000	(30,000,000)	0
Total ongoing funding changes	(1,394.11)	(\$142,932,039)	(\$111,899,668)	(\$254,831,707)
One-Time Funding Items				
Increases funding from the strategic investment and improvements fund for State Hospital design from \$5 to \$12.5 million, the same as the House.			\$7,500,000	\$7,500,000
Removes one-time general fund support to replace funding at facilities due to a revenue shortfall. The House also removed this funding.		(36,028,141)	36,028,141	0
Adds funding from the state fiscal recovery fund for a rural law enforcement telehealth program, the same as the House.			2,650,000	2,650,000
Total one-time funding changes	0.00	(\$36,028,141)	\$46,178,141	\$10,150,000
Total changes to base level funding	(1,394.11)	(\$178,960,180)	(\$65,721,527)	(\$244,681,707)

Senate Bill No. 2012 - Other Changes - Conference Committee Action

This amendment also:

- Provides a 2021-23 biennium appropriation from the DHHS operating fund for the repayment of funds withheld from unemployment benefits. The House also included an appropriation.
- Authorizes DHHS to adjust the number of authorized full-time equivalent positions subject to the availability of funds. The House also authorized this provision.
- Adjusts the amount of the transfer from the strategic investment and improvements fund to the human service finance fund from \$21.6 million to \$26.95 million. The House transferred \$23.2 million.
- Identifies appropriations from the strategic investment and improvements fund, human service finance fund, community health trust fund, health care trust fund, and the federal State Fiscal Recovery Fund.
- Directs the department to create a parenting resource website. The House also included this provision.

- Directs the department to provide quarterly budget and utilization information.
- Creates a North Dakota legislative health care task force. The House also included this provision.
- Removes the sunset clause on the best in class program. The House also included this provision.
- Adjusts Medicaid language relating to probate proceedings and reimbursement rate information. The House also included this provision.
- Provides for the rebasement of basic care payment rates. The House also included this provision.
- Provides statutory clarification regarding public employee health plan coverage of insulin.
- Adjusts guidelines for the development of certified community behavioral health clinics. The House also adjusted the guidelines.
- Authorizes the carryover of unexpended appropriation to be used for the certified community behavioral health clinics. This will reduce the general fund beginning balance by \$4.15 million.
- Adjusts the amount of funding allowed to be continued from the 2021-23 biennium into the 2023-25 biennium.
- Provides for a Legislative Management study of the social work licensure compact. The House also included this study.
- Provides for a Legislative Management study of Medicaid provider reimbursement arrangements. The House also included this study.
- Provides for a Legislative Management study of the intermediate care facility rate formula.
- Adds effective dates for Senate Bill No. 2181 relating to medical assistance for pregnant women and Senate Bill No. 2276 relating to a family caregiver pilot project.