

Department of Human Services

Budget No. 325

House Bill Nos. 1012, 1015, 1038, 1040, and 1041; Senate Bill Nos. 2015 and 2206

	FTE Positions	General Fund	Other Funds	Total
2017-19 legislative appropriations	2,162.23	\$1,339,231,350	\$2,573,880,782	\$3,913,112,132
2017-19 base budget	2,211.08	1,262,925,021	2,199,169,861	3,462,094,882
Legislative increase (decrease) to base budget	(48.85)	\$76,306,329	\$374,710,921	\$451,017,250

ONGOING AND ONE-TIME GENERAL FUND APPROPRIATIONS

	Ongoing General Fund Appropriation	One-Time General Fund Appropriation	Total General Fund Appropriation
2017-19 legislative appropriations	\$1,313,231,350	\$26,000,000	\$1,339,231,350
2015-17 adjusted legislative appropriations	1,262,925,021	18,709,177 ¹	1,281,634,198 ¹
2017-19 legislative increase (decrease) to 2015-17 adjusted appropriations	\$50,306,329	\$7,290,823	\$57,597,152
Percentage increase (decrease) to 2015-17 adjusted appropriations	4.0%	39.0%	4.5%

¹The 2015-17 biennium general fund appropriations reflect general fund deficiency appropriations of \$617,000 made in House Bill No. 1012. See the **Deficiency Appropriations** section below for additional information.

SUMMARY OF LEGISLATIVE CHANGES TO THE BASE BUDGET AND MAJOR FUNDING ITEMS

Salaries and Wages

The Legislative Assembly did not include funding for employee salary increases.

	Changes to Base Budget			Total
	FTE Positions	General Fund	Other Funds	
The legislative action:				
Departmentwide				
Adjusted funding for base payroll changes for cost-to-continue 2015-17 biennium salaries and benefit increases and for other base payroll changes.	(23.85)	(\$7,417,300)	\$13,084,171	\$5,666,871
Added funding for employee health insurance premiums to reflect a revised premium rate of \$1,240.83 per month.		4,962,381	952,072	5,914,453
Reduced funding for staff overtime.		(1,082,857)	(749,410)	(1,832,267)
Reduced departmentwide FTE positions.	(33.00)	(3,127,902)	(1,921,098)	(5,049,000)
Adjusted departmentwide funding for operating expenses.		1,920,723	(1,126,056)	794,667
Transferred the Head Start program from the Department of Human Services (DHS) to the Department of Public Instruction.		(4,900)	(261,137)	(266,037)

Management**Administration**

Restored funding relating to 2015-17 biennium budget reductions.	161,283		161,283
Adjusted funding for continued program changes.	1,191,459	(113,803)	1,077,656

Information Technology

Adjusted funding for continued program changes.	8,406,264	18,211,092	26,617,356
Adjusted for funding source changes.	366,888	(366,888)	0
Removed funding for equipment and software over \$5,000.	(13,000)	(13,000)	(26,000)
Added one-time funding, from the temporary assistance for needy families (TANF) incentive grant, for a child care licensing system.		3,000,000	3,000,000
Added one-time funding, from federal Medicaid funding provided through the Centers for Medicare and Medicaid Services--Medicaid advanced planning document and 10 percent state matching funds, for a health information technology and care coordination system. The 10 percent matching funds are anticipated to be generated from billing providers, payers, and from the electronic health information exchange fund.		40,800,000	40,800,000

Program and Policy Division**Economic Assistance Policy - Grants**

Adjusted funding for continued program changes.	(97,243)	6,013,065	5,915,822
Restored funding relating to 2015-17 biennium budget reductions.	34,015		34,015
Reduced funding for operating expenses.	(28,667)	(82,494)	(111,161)
Adjusted funding for child care assistance eligibility.	(2,160,357)	(578,229)	(2,738,586)
Adjusted funding for grant cost and caseload changes.	(1,784,525)	(12,445,945)	(14,230,470)
Adjusted for funding source changes.	69,767	(69,767)	0
Added funding for a pilot project relating to employment and training programs.	173,250	554,400	727,650
Adjusted funding for county social services financing, relating to Indian country allocation payment changes effective January 1, 2018, as a result of implementing a state-paid economic assistance and social services pilot program pursuant to 2017 Senate Bill No. 2206, to provide a total of \$1,629,964 for the first 6 months of the 2017-19 biennium.	(5,020,286)		(5,020,286)
Added federal TANF funds for alternatives to abortion services to provide a total of \$600,000.		100,000	100,000

Added funding for additional cost and caseload changes relating to the supplemental nutrition assistance program and the TANF program (House Bill No. 1041).	110,916	1,532,785	1,643,701
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Child Support Enforcement

Adjusted funding for continued program changes.	(152,764)	(128,949)	(281,713)
Restored funding relating to 2015-17 biennium budget reductions.	58,741		58,741
Reduced funding for operating expenses.	(21,482)	(56,996)	(78,478)
Reduced funding for overtime.	(15,305)	(28,968)	(44,273)

Medical Services

Adjusted funding for continued program changes.	864,283	539,155	1,403,438
Restored funding related to 2015-17 biennium budget reductions.	88,828		88,828
Restored funding related to 2015-17 biennium budget reductions - Cost and caseload changes.	4,610,087		4,610,087
Reduced funding for operating expenses.	(17,710)	(19,990)	(37,700)
Adjusted professional fee schedule to 100 percent of Medicare and policy changes.	(10,612,966)	(24,189,744)	(34,802,710)
Adjusted funding for grant cost and caseload changes.	20,989,553	(109,028,047)	(88,038,494)
Adjusted for funding source changes.	431,372	(431,372)	0
Federal medical assistance percentage changes.	17,233,048	(17,233,048)	0
Added funding to increase age of autism waiver through 11 years of age.	183,647	183,647	367,294
Adjusted physical, occupational, and speech therapy rates to the level approved during the 2015 session.	468,630		468,630
Adjusted Part B premium increase.	(1,700,941)	(1,915,238)	(3,616,179)
Reduced funding for autism spectrum disorder program to provide a total of \$18,251,750.	(1,000,000)	(1,000,000)	(2,000,000)
Adjusted funding for qualified service provider vendor contracts leaving a total of \$1,445,157.	(153,827)	(52,624)	(206,451)
Added funding for Medicare clawback payments to provide a total of \$40,361,496.	7,819,983		7,819,983
Adjusted funding for county social services financing, relating to traditional Medicaid grants effective January 1, 2018, as a result of implementing a state-paid economic assistance and social services pilot program pursuant to 2017 Senate Bill No. 2206, leaving a total of \$6,942,268 for the first 6 months of the 2017-19 biennium.	(10,416,499)	10,416,499	0

Reduced federal funds spending authority for medical assistance grants.		(1,558,318)	(1,558,318)
Restored federal funds spending authority for medical assistance grants (House Bill No. 1015).		1,558,318	1,558,318
Added funding for physical, occupational, and speech therapy service provider rate increases to 75 percent.	56,485	56,485	112,970
Added funding to continue Medicaid Expansion for 19 and 20 year olds as managed care.	1,653,008	1,652,962	3,305,970
Added \$13.3 million of one-time funding from the tobacco prevention and control trust fund and related federal funding to continue the Medicaid Expansion program as managed care at commercial rates.		226,000,000	226,000,000
Added 1 FTE position for administering tribal health care agreements.	1.00	76,500	153,000
Replaced general fund support with funding from the community health trust fund.	(18,000,000)	18,000,000	0
Replaced general fund support with funding from the tobacco prevention and control trust fund.	(22,175,000)	22,175,000	0
Long-Term Care			
Restored funding relating to 2015-17 biennium budget reductions - Cost and caseload changes.	3,027,699		3,027,699
Added funding for nursing home operating margin, rebasing, and incentives.	1,783,181	9,976,914	11,760,095
Added funding, of which \$1 million is from the health care trust fund to increase nursing facility operating margin, effective January 1, 2018.		2,000,000	2,000,000
Adjusted funding for basic care services.	68,094	2,345	70,439
Adjusted funding for homemaker services.	110,445	429	110,874
Adjusted funding for grant cost and caseload changes.	22,352,910	20,771,623	43,124,533
Adjusted for funding source changes.	(888,144)	888,144	0
Added funding for Money Follows the Person grants.	527,954	527,953	1,055,907
Added funding to increase age of autism waiver through 11 years of age.	183,609	183,628	367,237
Added funding from the tobacco prevention and control trust fund for basic care services.		450,000	450,000
Adjusted funding for community services relating to the Fair Labor Standards Act - Home Care Rule funding for qualified service providers, effective October 1, 2017.	(646,780)	(2,110,526)	(2,757,306)

Developmental Disabilities Council

Restored funding relating to 2015-17 biennium budget reductions. 73 73

Adjusted funding for continued program changes. 59,773 59,773

Aging Services

Adjusted funding for continued program changes. 105,755 321,166 426,921

Restored funding relating to 2015-17 biennium budget reductions. 46,361 46,361

Adjusted funding for operating expenses. (7,480) (656) (8,136)

Adjusted funding source for nutrition service program. (466,694) 466,694 0

Adjusted funding for vulnerable adult contracts. (8,500) 319,292 310,792

Added federal funding for administering a lifespan respite care program, including public information about the program (House Bill No. 1038). 200,000 200,000

Children and Family Services

Adjusted funding for continued program changes. (405,146) 1,529,195 1,124,049

Restored funding relating to 2015-17 biennium budget reductions. 305,576 305,576

Restored funding relating to 2015-17 biennium budget reductions - Cost and caseload changes. 1,233,182 1,233,182

Adjusted funding for operating expenses. (373) (627) (1,000)

Adjusted funding for grant cost and caseload changes. 11,548,425 2,587,856 14,136,281

Restored funding for Healthy Families program. 150,000 150,000

Adjusted for funding source changes. 4,897,464 (4,768,241) 129,223

Restored funding for child care quality contract. 850,000 850,000

Restored funding for child care inclusion grants. 100,000 100,000

Restored funding for child care inclusion specialists. 200,000 200,000

Adjusted funding for county social services financing, relating to county administration, family preservation, child abuse and neglect, and child care licensing reimbursement costs as a result of implementing a state-paid economic assistance and social services pilot program pursuant to 2017 Senate Bill No. 2206. (10,563,215) (17,358,767) (27,921,982)

Behavioral Health Division

Adjusted funding for continued program changes. 16,307 5,462,077 5,478,384

Restored funding relating to 2015-17 biennium budget reductions. 1,322,327 1,322,327

Reduced funding for parents listen, educate, ask, discuss program to provide a total of \$100,000.		(160,000)		(160,000)
Reduced funding for operating expenses.		(80,859)		(80,859)
Adjusted for funding source changes.		1,071,399	(1,071,399)	0
Adjusted funding for Governor's Advisory Council.		30,000		30,000
Restored Robinson Recovery Center funding.		237,500		237,500
Reduced funding for compulsive gambling services.		(237,673)		(237,673)
Adjusted funding for the substance use disorder voucher program, of which \$1,779,159 is from the tobacco prevention and control trust fund to provide a total of \$2,779,159.		(500,000)	1,779,159	1,279,159
Added funding from the tobacco prevention and control trust fund for tobacco prevention-related activities.			75,000	75,000
Added federal funds for opioid treatment programs.			4,000,000	4,000,000
Added funding for a children's prevention and early intervention behavioral health services pilot project (\$150,000); peer-to-peer support services (\$100,000); and family-to-family support services (\$100,000) (House Bill No. 1040).		350,000		350,000
Added funding from other funds from the Department of Corrections and Rehabilitation and 6 FTE positions for implementing the community behavioral health program (\$7,000,000); and funding from the general fund for the purpose of contracting with a public or private entity to create, initiate, and facilitate the implementation of a strategic plan to increase the availability of all types of behavioral health services in all regions of the state (\$500,000) (Senate Bill No. 2015).	6.00	500,000	7,000,000	7,500,000
Vocational Rehabilitation				
Adjusted funding for continued program changes.		(230,587)	61,854	(168,733)
Restored funding relating to 2015-17 biennium budget reductions.		233,781		233,781
Adjusted funding for operating expenses.		(12,251)	(63,854)	(76,105)
Removed funding for the winter recreation program at Bottineau.		(65,000)		(65,000)
Added funding for assistive technology.		160,000		160,000
Developmental Disabilities				
Adjusted funding relating to continued program changes.		90,413	(446,703)	(356,290)
Restored funding relating to 2015-17 biennium budget reductions.		51,278		51,278

Adjusted funding for 2015-17 biennium budget reductions - Cost and caseload changes.		4,047,111		4,047,111
Adjusted funding for operating expenses.		(12,617)	(15,098)	(27,715)
Adjusted funding for grant cost and caseload changes.		14,447,931	14,432,321	28,880,252
Adjusted funding relating to federal medical assistance percentage changes.		(141,841)	141,841	0
Added funding for specialized services for individuals with a developmental disability.		100,000	100,000	200,000
Removed funding for family subsidy program.		(112,888)		(112,888)
Added funding for the experienced parent program to provide a total of \$260,000.		100,000	160,000	260,000
Added funding for equipment over \$5,000.			10,000	10,000
Added funding for rate adjustments.		6,109,044	6,109,045	12,218,089
Added 1 FTE position and related funding for specialized services for individuals with developmental disabilities.	1.00	250,307	260,666	510,973
Added funding for corporate guardianship services for individuals with developmental disabilities to provide a total of \$2,848,075.		112,000		112,000

Field Services

Institutions

Reduced funding for vacant positions and employee turnover savings - Institutions.		(2,027,897)		(2,027,897)
Added funding for continued program changes.		2,311,163	(1,063,812)	1,247,351
Added funding for equipment over \$5,000 - State Hospital.		453,299		453,299
Added funding for extraordinary repairs - State Hospital.		900,000		900,000
Restored funding relating to 2015-17 biennium budget reductions - State Hospital.		1,301,188		1,301,188
Adjusted funding for operating expenses - State Hospital.		(364,515)	(13,405)	(377,920)
Added funding for equipment over \$5,000 - Life Skills and Transition Center (LSTC).		169,764		169,764
Added funding for extraordinary repairs - LSTC.		476,367		476,367
Restored funding relating to 2015-17 biennium budget reductions - LSTC.		838,184		838,184
Adjusted funding for operating expenses - LSTC.		(300,784)	(53,301)	(354,085)

Human Service Centers

Reduced funding for vacant positions and employee turnover savings - Institutions.		(3,250,499)		(3,250,499)
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Added funding for continued program changes.	1,406,994	(4,166,214)	(2,759,220)
Adjusted for funding source changes.	(982,540)	982,540	0
Adjusted funding for grant cost and caseload changes.	(1,313,398)	(1,087,709)	(2,401,107)
Added funding for extraordinary repairs - Southeast Human Service Center.	39,600		39,600
Restored funding for 2015-17 biennium budget reductions.	2,338,741		2,338,741
Adjusted funding for operating expenses.	(1,046,996)	(163,312)	(1,210,308)
Restored funding for mobile crisis services in Bismarck.	250,000		250,000

County Social Services Financing

County Social Services Financing

Added funding for the county social services financing pilot program.	26,000,000		26,000,000
Added funding from a transfer from the tax relief fund to the social services finance fund for the county social services financing pilot program (Senate Bill No. 2206).		134,700,000	134,700,000
Total	<u>(48.85)</u>	<u>\$76,306,329</u>	<u>\$374,710,921</u>
		<u>\$374,710,921</u>	<u>\$451,017,250</u>

FTE Changes

The 2017-19 biennium appropriation includes funding for 2,162.23 FTE positions, a decrease of 48.85 FTE positions from the 2015-17 biennium authorized level of 2,211.08 FTE positions. The Legislative Assembly added 6 FTE positions to implement community behavioral health programs, 1 FTE position to administer tribal health care agreements, and 1 FTE position for specialized services for individuals with developmental disabilities. The Legislative Assembly reduced 56.85 FTE positions, of which 23.85 FTE positions related to base payroll adjustments, and 33 FTE positions related to a departmentwide reduction.

One-Time Funding

In Section 3 of House Bill No. 1012, the Legislative Assembly identified \$295.8 million of one-time funding, of which \$26 million is from the general fund and \$269.8 million is from special funds. An additional \$134.7 million of one-time funding from other funds is identified in Senate Bill No. 2206. These items, summarized as follows, are not to be considered part of the agency's base budget for preparing the 2019-21 biennium executive budget, and DHS is to report to the Appropriations Committees during the 2019 legislative session on the use of this funding.

	General Fund	Special Funds	Total
Medicaid Expansion - Fee schedule enhancement		\$226,000,000 ¹	\$226,000,000
County social services pilot program	\$26,000,000	134,700,000	160,700,000
Child care licensing and data system		3,000,000	3,000,000
Health information network and care coordination		40,800,000 ²	40,800,000
Total	\$26,000,000	\$404,500,000	\$430,500,000

¹Includes \$13.3 million from the tobacco prevention and control trust fund, and \$212.7 million of federal funds.

²Includes federal Medicaid funding of \$40.8 million, which is being provided through the Centers for Medicare and Medicaid Services - Medicaid advanced planning document. This funding will require a 10 percent match. The department anticipates the matching funds will be generated from billing providers, payers, and from the electronic health information exchange fund.

Deficiency Appropriations

Section 11 of House Bill No. 1012 provides a deficiency appropriation of \$9 million of federal funds for defraying medical assistance grant costs. Section 12 of House Bill No. 1012 provides a deficiency appropriation of \$834,020, of which \$417,010 is from the general fund for rebasing, operating margins, and incentives for the long-term care facility rates for the 2015-17 biennium. Section 13 of House Bill No. 1012 provides a deficiency appropriation of \$200,000 from the general fund for the substance use disorder voucher program. Section 1 of House Bill No. 1024 provides a deficiency appropriation of \$9 million from the strategic investment and improvements fund for defraying medical assistance grant costs for the 2015-17 biennium.

Other Sections in House Bill No. 1012

Health insurance increase - Section 2 identifies the amount included in the agency appropriations relating to increases in employee health insurance premiums from \$1,130 to \$1,241 per month.

Transfers - Section 4 provides DHS may transfer appropriation authority between line items within subdivisions 1 through 3 of Section 1.

Medicaid management information system replacement project - Section 5 provides for the continuation of legislative appropriations for the Medicaid management information system replacement project in the 2017-19 biennium.

Modification of the eligibility systems project - Section 6 provides for the continuation of legislative appropriations for the modification of the eligibility systems project in the 2017-19 biennium.

Electronic health records system - Section 7 provides for the continuation of legislative appropriations for the development of the electronic health records system in the 2017-19 biennium.

Tobacco prevention and control trust fund - Section 8 identifies \$37,779,159 from the tobacco prevention and control trust fund appropriated to DHS for defraying expenses, of which \$22,175,000 is for medical services grants, \$13,300,000 is to continue the Medicaid Expansion program as managed care at commercial rates, \$1,779,159 is for the substance use disorder voucher program, \$450,000 is for basic care services, and \$75,000 is for tobacco prevention-related activities.

Health care trust fund - Section 9 identifies \$1,686,191 from the health care trust fund appropriated to DHS, of which \$1 million is to increase nursing facility operating margin, effective January 1, 2018, \$546,786 is to increase payments to basic care and long-term care facilities, and \$139,405 is to increase nursing home per-bed property cost limitations for single- and double-occupancy construction.

Community health trust fund - Section 10 identifies \$18 million from the community health trust fund appropriated to DHS for defraying medical assistance grant costs.

Medical assistance grants for the 2015-17 biennium - Section 11 appropriates an additional \$9 million of federal funds to DHS for medical assistance grants for the 2015-17 biennium. Section 43 declares the section an emergency measure.

Long-term care funding for the 2015-17 biennium - Section 12 appropriates an additional \$834,020, of which \$417,010 is from the general fund, to DHS for rebasing, operating margins, and incentives for the long-term care facility rates for the 2015-17 biennium. Section 43 declares the section an emergency measure.

Substance use disorder voucher program for the 2015-17 biennium - Section 13 appropriates an additional \$200,000 from the general fund to DHS for the purpose of defraying the expenses of the substance use disorder voucher program for the 2015-17 biennium. Section 43 declares the section an emergency measure.

Substance use disorder voucher program - Legislative intent - Section 14 provides legislative intent that DHS include medication assisted treatment as an allowable service under the substance use disorder voucher program.

Basic care services - Prioritization of restoration funding - Legislative intent - Section 15 provides legislative intent that DHS prioritize the restoration of basic care provider rates.

Medicaid Expansion - Fee schedule - Legislative intent - Section 16 provides legislative intent that the one-time funding of \$226 million of which \$13.3 million is from the tobacco prevention and control trust fund, provided for defraying a portion of the expenses of the Medicaid Expansion program, be used for establishing the provider fee schedule at the maximum level possible without exceeding the current levels of reimbursement for the Medicaid Expansion contracted providers.

Home health - Legislative intent - Section 17 provides legislative intent that DHS adopt rules for home health services in accordance with federal regulations and require home health agencies to be certified. The section also allows the department to adopt rules defining medical equipment, supplies, and appliances and to specify allowable timeframes for face-to-face visits between a physician and Medicaid beneficiary.

Care coordination agreements - Legislative intent - Section 18 provides legislative intent that DHS establish requisite agreements with tribal health care organizations that will result in 100 percent federal funding for eligible medical assistance provided to American Indians through care coordination agreements.

Care coordination agreements - Health care trust fund - Legislative intent - Section 19 provides legislative intent that DHS deposit federal funding received in excess of the state's regular federal medical assistance percentage, resulting from the department establishing requisite agreements with tribal health care organizations, in the health care trust fund.

Traumatic brain injury - 1915(i) state plan amendment - Legislative intent - Section 20 provides legislative intent that DHS apply for the 1915(i) state plan amendment for traumatic brain injury services.

Grafton Job Service of North Dakota building - Legislative intent - Section 21 provides legislative intent that DHS purchase the Job Service of North Dakota building in Grafton, from donated funds, for uses at the LSTC.

Life Skills and Transition Center - Conveyance of land - Section 22 authorizes the conveyance of 3.46 acres of land at the LSTC. Section 43 declares the section an emergency measure.

Developmental disabilities - Case management services - Legislative intent - Section 23 provides legislative intent that DHS to provide case management services for individuals with a developmental disability, if possible, within the ratio provided pursuant to North Dakota Administrative Code.

Developmental disabilities - Programmatic and administrative requirements - Legislative intent - Section 24 provides legislative intent that DHS report all new programmatic and administrative requirements to the Centers for Medicare and Medicaid Services for individuals with developmental disabilities.

Developmental disabilities - Conflict-free case management - Legislative intent - Section 25 provides legislative intent that DHS request waivers or delay implementation of conflict-free case management rules and requirements for individuals with a developmental disability.

Developmental disabilities - Variance - Legislative intent - Section 26 provides legislative intent that DHS authorize a treatment or care center's variance request relating to the treatment or care center's bedrooms or bathrooms if the variance does not pose a threat.

Process and outcomes measures - Legislative intent - Section 27 provides legislative intent that behavioral health service providers that receive funding from DHS submit process and outcome measures to the department for programs and services supported by the state.

Telephone support and directory services - Legislative intent - Section 28 provides legislative intent that the vendor of telephone and directory services, under contract with DHS, include private behavioral health service providers in the vendor's directory at no cost to the private behavioral health service provider.

Youth access to tobacco - Section 29 identifies \$75,000 from the tobacco prevention and control trust fund appropriated to DHS for complying with youth access to tobacco reporting requirements under Title 45, Code of Federal Regulations, Part 96, Section 130. The section also requires the State Department of Health and local public health units to collect and disclose all required data reporting elements to DHS.

Robinson Recovery Center - Section 30 allows DHS to utilize other providers for substance use disorder treatment services if the current contractor is unable to provide the full capacity of services anticipated under the current contract for the 2017-19 biennium.

Operating expenses - Legislative intent - Section 31 provides legislative intent that DHS analyze its budgetary needs and reallocate up to \$650,000 appropriated from the general fund for operating expenses to other items based on the department's priorities resulting from its analysis.

State medical assistance programs - Legislative Management study - Section 32 provides for a Legislative Management study regarding options to operate the state medical assistance program and other related programs, as managed care.

Behavioral health and developmental disabilities - Legislative Management study - Section 33 provides for a Legislative Management study regarding state and federal laws and regulations relating to the care and treatment of individuals with developmental disabilities or behavioral health needs.

Department of Human Services delivery system - Legislative Management study - Section 34 provides for a Legislative Management study of the DHS delivery system.

Nursing facility rates - Legislative Management study - Section 35 provides for a Legislative Management study of nursing facility rate components to determine the adequacy of reimbursement and evaluate the efficiency of nursing facility operations.

Basic care and nursing facilities licensed beds - Sections 36 and 37 extend the moratoria on basic care and nursing facility bed capacity.

Medicaid Expansion - Effective date - Section 38 amends North Dakota Century Code Section 50-24.1-37 to continue Medicaid Expansion until July 31, 2019, unless the federal government discontinues the program; provides for the contract between the department and carrier to include the carrier providing the department with provider reimbursement rate information when selecting a carrier, and providing for the cumulative and trend data regarding the provider reimbursement rates.

Community health trust fund - Reallocation - Section 39 amends Section 54-27-25(1) to increase the tobacco settlement proceeds deposited in the community health trust fund from 10 to 55 percent for the 2017-19 biennium, and to eliminate the 45 percent allocation from the tobacco settlement proceeds deposited in the common schools trust fund for the 2017-19 biennium.

Medicaid Expansion repeal - Contingent effective date - Sections 40 and 41 include a contingent repeal of Medicaid Expansion if the federal government discontinues the program.

Emergency - Section 43 provides that Sections 11, 12, 13, and 22 are declared to be emergency measures.

Related Legislation

House Bill No. 1013 - Medicaid matching funds - Section 12 requires the Department of Public Instruction to pay DHS an amount equal to the matching funds required to be paid by a school district or special education unit for students eligible for Medicaid that are receiving Medicaid-eligible services.

House Bill No. 1015 - Department of Human Services 2017-19 biennium appropriation - Related funding - Section 8 provides an appropriation of \$1,558,318 of federal funds to DHS for medical assistance grants. Section 14 requires the Board of University and School Lands to award a grant of up to \$261,000 from the oil and gas impact grant fund to a community-based provider serving individuals with developmental disabilities. This section requires the recipient to only use grant proceeds to provide settlement for any amounts owed to DHS or a bank.

House Bill No. 1024 - Deficiency appropriation - Section 1 provides a deficiency appropriation of \$9 million from the strategic investment and improvements fund for medical assistance grants for the 2015-17 biennium.

House Bill No. 1038 - Family caregiver supports and services - Provides an appropriation of \$200,000 of federal funds to DHS for administering a lifespan respite care program. The bill also requires DHS to establish a caregiver resource center website and review options and provide recommendations to the Legislative Management to expand home- and community-based services.

House Bill No. 1040 - Behavioral health services program expansion - Requires DHS to adopt rules for an evidence-based alcohol and drug education program for certain individuals under 21 years of age. The bill also appropriates \$350,000 from the general fund to DHS, of which \$150,000 is for a pilot project expanding children's prevention and early intervention behavioral health services, \$100,000 is for peer-to-peer support services, and \$100,000 is for family-to-family support services.

House Bill No. 1041 - Department of Human Services 2017-19 biennium appropriation - Justice reinvestment - Provides for justice reinvestment initiatives including an appropriation of \$1,643,701 to DHS for implementing changes relating to statutory changes that will allow individuals convicted of certain felony offenses to qualify for TANF, and changes that will allow faith-based organizations to provide services to individuals needing addiction treatment services.

House Bill No. 1043 - State Hospital accreditation - Amends Section 25-02-01.1 relating to accreditation of the State Hospital.

House Bill No. 1085 - Brain injury advisory council - Provides for creating a brain injury advisory council for the purpose of improving the quality of life for an individual with brain injury and the individual's family through brain injury awareness, prevention, research, education, collaboration, support services, and advocacy.

House Bill No. 1117 - Substance abuse and behavioral health - Amends Chapters 14-10, 50-06, and 50-31 relating to changes in terminology for substance abuse and behavioral health.

House Bill No. 1118 - Aged, blind, and disabled persons - Amends Section 50-24.5-01 relating to the definition of eligible beneficiary for the aid to aged, blind, and disabled persons.

House Bill No. 1119 - Service payments for elderly and disabled - Amends Sections 50-06.2-10 and 50-24.7-02 relating to collection of overpayments for the service payments for elderly and disabled (SPED) and expanded SPED programs.

House Bill No. 1120 - Prior authorization program - Amends Section 50-24.6-04 relating to the prior authorization program.

House Bill No. 1134 - Developmental disabilities - Amends Century Code sections relating to developmental disabilities.

House Bill No. 1135 - Committee on Employment Of People with Disabilities - Amends sections relating to consolidating the committee on Employment of People with Disabilities into the North Dakota State Rehabilitation Council, and updating categories of positions in the state service.

House Bill No. 1136 - Substance use disorder voucher program - Section 13 creates a new section to Chapter 50-06 to require DHS to establish and administer a voucher system to address underserved areas and gaps in the state's substance abuse treatment system and to assist in payment of addiction treatment services provided by private licensed substance abuse treatment programs and hospitals.

House Bill No. 1155 - Budget allotments - Amends Section 54-44.1-12 relating to control over rate of expenditures to change the allotment process, including an exemption for DHS direct care programs after a 2.5 percent allotment has been ordered.

House Bill No. 1215 - Basic care facility - Amends Section 23-09.3-01 relating to the definition of a basic care facility.

House Bill No. 1226 - Medicaid fraud control unit - Study - Requires DHS, along with the Governor and Attorney General's office, to study the feasibility and desirability of establishing a Medicaid fraud control unit.

House Bill No. 1315 - Nursing home rates - Amends Section 50-24.4-17 relating to adjustments of nursing home rates.

House Bill No. 1427 - Refugee resettlement - Legislative Management study - Provides for a Legislative Management study of refugee resettlement in the state.

Senate Bill No. 2015 - Community behavioral health program - Appropriation - Legislative Management study - Sections 4 and 5 provide an appropriation of \$7 million from other funds to DHS and authorize 6 FTE positions for implementing a community behavioral health program; and an appropriation of \$500,000 from the general fund for contracting with a public or private entity to create, initiate, and facilitate the implementation of a strategic plan to increase the availability of all types of behavioral health services in all regions of the state. Section 12 provides for a Legislative Management study of the Tompkins Rehabilitation Center at the State Hospital, including the operation, management, conditions, caseload, and physical plant.

Senate Bill No. 2033 - Clinical supervision of behavioral health professionals - Provides statutory changes relating to licensure requirements for behavioral health professionals, and provides for a report to the Legislative Management.

Senate Bill No. 2038 - Behavioral health services policy changes - Extends the holding period from 24 to 72 hours for emergency involuntary commitments for individuals with a serious physical condition or illness, changes youth mental health training requirements, and creates a children's behavioral health task force.

Senate Bill No. 2039 - Role and function of Department of Human Services - Behavioral Health Services - Changes the role and function of DHS behavioral health services, including behavioral health definitions; administration of behavioral health programs; licensure process for regional human service centers; services available to individuals with serious and persistent mental illness; membership and role of advisory groups for human service centers; designation of behavioral health providers to furnish preventive diagnostic, therapeutic, rehabilitative, or palliative services to individuals eligible for medical assistance; and designation of the location of a second state hospital.

Senate Bill No. 2041 - Eligibility assistance for developmental disability - Study - Section 1 allows individuals with Down syndrome to be eligible for developmental disabilities services. Section 2 requires DHS to study its Medicaid waivers and provide a report to Legislative Management.

Senate Bill No. 2042 - Mental health professionals - Establishes a tiered system for the roles of mental health professionals.

Senate Bill No. 2088 - Licensed addiction counselor - Creates a new section to Chapter 43-45 relating to licensed clinical addiction counselors, and amends sections relating to the scope of practice for addiction counselors, and the licensure authority of the Board of Addiction Counseling Examiners.

Senate Bill No. 2090 - Early childhood services - Amends sections of Chapters 50-11.1 and 50-06 relating to early childhood services criminal record checks, licensing, definitions, registration, applications, and fees.

Senate Bill No. 2114 - Foster homes - Amends sections of Chapters 27-20 and 50-11 relating to the definition of permanency hearing, reasonable efforts for sibling placement, definition of group home, and liability coverage to foster homes for children.

Senate Bill No. 2115 - Autism Spectrum Disorder Task Force - Amends Section 50-06-32 relating to the members of the Autism Spectrum Disorder Task Force.
Senate Bill No. 2117 - Criminal history record checks - Creates a new section to Chapter 50-24.1 relating to criminal history record checks for Medicaid services applicants, providers, and staff members, and amends Section 50-06-01.9 relating to criminal history record checks for job applicants, department staff, county employees, contractors, and Medicaid services applicants, providers, and staff members.

Senate Bill No. 2118 - Compulsive gambling disorder - Amends sections of Chapters 50-06 and 53-12.1 relating to gambling disorder prevention awareness, crisis intervention, rehabilitation, and treatment services.

Senate Bill No. 2206 - State paid economic assistance and social services programs - Provides an appropriation of \$134.7 million from the social services finance fund and allocates \$26 million from the general fund within DHS budget for a state-paid economic assistance and social services pilot program.

Senate Bill No. 2325 - Developmental disabilities - Early intervention services - Legislative Management study - Amends Section 54-07-01 relating to the coordination of early intervention services for children from birth to age 3 who are at high risk for developmental delay or disability. Section 2 provides for a Legislative Management study of the state's early intervention system for children from birth to age 3 with developmental disabilities.