

SOUTH DAKOTA BOARD OF SOCIAL SERVICES

Meeting Minutes

Tuesday, April 18, 2023

1:30 pm – 4:00 pm CT

Kneip Building, 1st Floor, DSS Conference Room

700 Governors Drive, Pierre, SD 57501

Zoom: <https://state-sd.zoom.us/j/91203644000?pwd=V3UwWHpEYWp0Z1BxUmQra29xL0RkUT09>

Meeting ID: 912 0364 4000

Passcode: 095959

Board Members Present: Colleen Winters, Elton Blemaster, Howard Grinager, Karen Michels, Stacey Tieszen, Cecelia Fire Thunder, and Sandy Diegel.

Board Members Absent: None

Others Present: Matt Althoff, Department of Social Services (DSS) Cabinet Secretary; Brenda Tidball- Zeltinger, Deputy Secretary and Chief of Operations; Tiffany Wolfgang, Chief of Behavioral Health; Jennifer Humphrey, Strategic Initiatives Program Specialist; Sarah Aker, Director of Medical Services, David Gall, Energy Assistance Program Administrator; and Tracy Mercer, Special Projects Coordinator. Members of the press: Bob Mercer, Kelo; and Mackenzie Huber, SD Search Light. Lawrence and Schiller representatives: Matt Hammer, Kristy Laue, And Cortney Carmody.

Call to Order and Declaration of Quorum: Cabinet Secretary Matt Althoff called the meeting to order at 1:34 p.m. (CDT).

Introductions and Welcome: Introductions of board members and DSS staff members present were made. Althoff gave a brief welcome and explained that the last time the board met it was decided to postpone the election of a Board Chair due to member absence and would now be taking nominations.

Election of Board Chair: The Chair of Board of Social Services facilitates the meetings, calls the meeting to order, and approves the minutes. Colleen Winters was nominated for the chair position. By consensus, Winters was selected by the Board to serve as its chair.

Adoption of Agenda: Motion to approve the agenda was made by Grinager, seconded by Blemaster. Motion carried. Tidball-Zeltinger asked the new chair for her preference for public comment. Take comment item by item or at the end of the meeting? Winters chose to pause for public comment after each agenda item was presented.

Approval of Minutes from October 2022: Motion to approve the October 18, 2022, meeting minutes was made by Blemaster, seconded by Michels. Motion carried.

Behavioral Health Awareness Campaign: The team from Lawrence and Schiller (L&S) presented on the new campaign. It was explained the foundation was built from a statewide online survey, discussion groups, and interviews. Althoff asked how the survey group was put together. L&S explained that the group was put together using a recruitment tool with screener questions.

The campaign is focused on two goals. The primary goal is to build awareness and eliminate stigmas around behavioral health issues, while emphasizing prevention and early intervention. The secondary goal is to educate South Dakota residents and promote the resources available.

Fire Thunder asked about the number of people who are available to provide services. Wolfgang stated that she'd be happy to visit with Fire Thunder further about this question further sharing that each county has a community mental health center that is able to provide services to individuals in need of mental health supports. Althoff asked about the number of licensed providers. Tidball-Zeltinger said that number can be gathered and offered after the meeting.

Fire Thunder asked how do we relate the message of the campaign to different communities and did the survey have a good cross section. Wolfgang explained that through the awareness campaign we will have to tweak the message for different groups. Wolfgang and L&S stated the cross-section demographic was excellent. L&S said they would develop or use different verbiage and even language for different cultural groups.

Althoff asked about the plan for "waves" or how long is the horizon. L&S explained that the first year would be focused towards eliminating stigma. There are different points during the year when different media will be used, the first couple of years will be more of an emotional approach. Wolfgang said they will be testing targeted messages for communities in crisis.

Althoff asked how do we destigmatize that everyone with mental health issues is suicidal. L&S is working with 988 to show that 988 is for everyone, not just those in a crisis. Comments were requested about the proposed campaign.

Winters liked the Note to Self-campaign. It will resonate with a lot of different audiences. Diegel said it should resonate with different audiences. Just wondering if we should use a different message to those on the reservation. Wolfgang said she really wants this campaign to look like South Dakota. Blemaster liked the randomness. It shows that there is so much out there. It's never just the one thing. Tiezen said she felt like the it was very suicided oriented. It should be inclusive of all disorders or addictions. Fire Thunder wants to hear more about emotional healing

and feelings. She felt the presentation was more adult oriented. More messages for youth should be created. Michels thought it was a well thought out campaign with a wide range of appeal. It could be focused on different ages and cultures. Diegel is happy to see info out there but is concerned about not having adequate providers out there to get these referrals. Wolfgang said the workforce challenges are significant and perhaps we can talk about some of that work at the next meeting. Grinager asked about the tools used in the campaign. Will they use Tik Tok? Wolfgang said they will not use Tik Tok. Instagram and Snap Chat will be used. Fire Thunder asked about the high rate of suicide among farmers. Althoff said he was just part of a meeting that discussed tools to help that group. A lot of it is through faith leaders.

Public Comment: No one appeared for public comment.

Medicaid Updates/Discussion: Sarah Aker, Director of Medical Services gave a presentation on Medicaid Updates that included the topics of: Continuous Coverage Requirement & Unwinding, Medicaid Expansion/Pregnancy Coverage Changes, and Pregnancy Health Home Program. Aker stated that South Dakota Medicaid monthly enrollment has increased over 30% from 114,689 in March 2020 to 151,640 in January 2023 due to the continuous coverage requirement. Effective April 1, 2023, Medicaid coverage can be closed again for individuals who are no longer eligible. This period where states return to regular operations is called the “unwinding.” States must meet certain federal conditions during unwinding to qualify for enhanced FMAP funding. The Department of Social Services (DSS) has been proactively planning for unwinding and a Return to Regular Operations for Medicaid as it awaited the Federal declaration to end the continuous coverage requirement. Planning included: continuing to process annual renewals for Medicaid recipients, providing regular updates to Medicaid recipients, reminding Medicaid recipients to keep information current; and alerting Medicaid recipients of the unwinding process that would ensue once the public health emergency was ended at the federal level.

South Dakota submitted its plan for unwinding to CMS in February 2023. The proposed plan prioritizes cases for review focusing first on cases most likely to be ineligible. This prioritization arises based on multiple factors: those who no longer meet a coverage group, person who have aged out of a coverage group, the time limit in the coverage group has expired, or as shown in a previous renewal, a recipient’s income has increased.

Grinager asked whether driver’s license information is used in the renewal process? Aker responded that DSS does not have a direct line to drivers license information. It was asked how many people may no longer be eligible. Aker explained that 22,000 persons have been identified in the “likely to be ineligible” group during renewals conducted in 2022. However, full eligibility will be determined using updated income information. The 22,000 is an estimate, actual individuals ineligible for Medicaid may change based on an individual’s current circumstances. Household incomes may have changed and, hence, updated information is used in the redetermination process.

Grinager asked if they are ineligible will the reason be explained. Aker said the reason will be provided in the letter informing the recipient of the discontinuance in eligibility. Grinager also asked if a change of address form is given at the provider and does the provider submit it. Aker responded that yes, most providers are helping with submitting the change of address form. Grinager followed by asking if there is DSS staff that can help individuals. Aker responded that there are several navigation resources.

Michels asked of the 22,000 who are likely to be ineligible, how many will be eligible under expansion. Aker said that of the 22,000, data gathered during last year's renewals would suggest that approximately one-half may be eligible under expansion. However, it is not possible to know an exact number until after updated income information has been gathered during the renewal process.

Grinager asked what about the people that could be left out for a month. Aker said coverage through the Federal marketplace was a possible option.

Grinager asked if there was office space for new workers needed for Medicaid expansion and are there workers available. Aker said so far, we have had good responses to our job posts.

Winters asked about challenges for Medicaid providers. Aker said that DSS has robust provider participation. One area that has had some difficulty was dental. Additional sources of funding now bring dental reimbursement up to 70% of billed charges.

Grinager commented that at the last meeting we heard health care in the prison system will transfer to corrections. Will pregnant prisoners have access to Medicaid services? Aker answered that they are working on the transitions and support with the Department of Corrections, but federal regulation prohibits Medicaid funding care for inmates.

Diegel asked about the income guidelines. Is the application completely income based. Aker emphasized that income was not the sole determinate of eligibility. She encouraged persons to review the eligibility guidelines on the DSS website. These are set by the federal government. She noted there was a significant increase in between 2022 and 2023.

Aker explained the changes to pregnancy coverage. Current Coverage is limited to pregnancy related services including prenatal care, labor/delivery, hospitalization due to delivery, and treatment of medical issues caused by the pregnancy or that directly affect the health of the baby. Effective July 1, pregnant women will have full Medicaid coverage. Unborn Children coverage will not change. Current coverage is limited to the postpartum exam, family planning, and medical conditions directly related to the pregnancy and/or delivery. Coverage is limited to 60 days following delivery. Effective

July 1, postpartum women will have full Medicaid coverage. Effective July 1, postpartum coverage will extend to 12 months after delivery.

Aker referenced Governor Noem's announcement in her State of the State address which included a budget request for enhanced care for pregnant women. Over half of South Dakota's children will rely on Medicaid or the Children's Health Insurance Program (CHIP) during the first year of life and Medicaid covers just under half of all births in the state. Research confirms that quality pregnancy and postpartum care are key to ensuring the health of both mom and baby. Evidence also confirms that enhanced care management makes a difference in improving outcomes and reducing costs. DSS also tested the concept of enhanced care management for pregnant women through our Primary and Prenatal Care Innovation Grants that were funded several years ago by the legislature. DSS results show increased high risk screening rates, increased breastfeeding, and the opportunity to decrease the number of infants requiring a NICU stay. Governor Noem's recommended budget included \$3.1 million to support the creation of a new Pregnancy Health Home to deliver enhanced care coordination and care management services to ensure that pregnant women receive all of the support needed during their pregnancy. This program will incentivize providers to deliver enhanced care coordination and care management services to ensure that pregnant women receive all of the support needed during their pregnancy. DSS anticipates improving infant and maternal outcomes, reducing preterm deliveries and NICU stays.

Public Comment: No one appeared for public comment.

Weatherization and Energy Assistance Update: David Gall, Energy Assistance Program Administrator presented on the Weatherization Assistance Program. He explained the purpose of the program is to improve energy efficiency of homes occupied by low-income individuals and families, reduce monthly heating and cooling costs, improve the health and safety, and educate households on energy saving practices. Weatherization is a 100% federally funded by the U.S. Department of Energy. The State contracts with Community Action Agencies to weatherize a home. To be eligible income must be below 200% Federal Poverty Level. Priority is given to households with elderly, disabled, or children under the age of 19. Once a home is weatherized, federal rule states that a home cannot receive additional Weatherization services for 15 years. Weatherization measures may include weather-stripping of doors and windows; caulking and sealing cracks and holes in a building structure; insulating attics, walls and under floors; repair, tune-up, or replacement of non-functional heating systems; and incidental repairs necessary to protect the weatherization material. Health and safety of occupants is also considered so it can also include" testing heating systems and appliances for combustion safety, testing for carbon monoxide and gas leaks, monitoring for possible moisture damage or mold infestations, checking electrical panels and wiring for safety, replacing and/or providing tune-ups for unsafe heating systems, and installing smoke and carbon monoxide detectors.

Gall also explained the Low-Income Energy Assistance Program (LIEAP). The program helps eligible households with home heating costs by paying the energy supplier directly. LIEAP eligibility is also based on income. Household income must be at a or below 200% of the Federal Poverty level. The program is 100% federally funded. In South Dakota, five tribes administer their own LIEAP program.

Grinager asked if the program is for owners and renters. Gall said both, landowners must contribute to the process. Grinager asked about a conducting a survey with energy costs before and after weatherization. Gall explained that they are working to expand on that, we are currently seeing a savings of about \$400 per year. Winters asked if the program has a waiting list. Gall confirmed it did. Tidball-Zeltinger stated while there is a waiting list for weatherization assistance program, LIEAP does not.

Legislative Update: Althoff provided an overview of the bills which DSS monitored and were approved by the Legislature during its 2023 session. He referenced the five bills which became law and which will directly impact the day-to-day functioning of DSS. A huge part of the process is appropriations. Althoff expressed appreciation on behalf of DSS for the work of the Legislature to anticipate Medicaid expansion and its associated costs and to plan accordingly in the budget process.

Future Agenda Items/Next Meeting Date:

Next meeting date is set for October 17th – 1:30-4:00 p.m.

Adjourn- Grinager motioned to adjourn. Seconded by Blemaster. Motion carried and the meeting was adjourned.