

# SOUTH DAKOTA BOARD OF SOCIAL SERVICES

## Meeting Minutes

Tuesday, October 20, 2020

1:30pm – 4:00 pm CST

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**Board Members Present:** Hugh Grogan; Holly Bodenstedt; Linda Wordeman; Jesse Ronning; Patricia Johnson.

**Board Members Absent:** Barbara Garcia; Cecelia Fire Thunder.

**Others Present:** Laurie Gill, DSS Cabinet Secretary; Brenda Tidball-Zeltinger, DSS Deputy Secretary and Chief of Operations; Tiffany Wolfgang, Director of Behavioral Health; Virgena Wieseler, Chief of Children and Family Services; Bill Snyder, Director of Medical Services; Jeremy Lippert, Director of Legal Services; Sara Sheppick, Deputy Director of Child Protection Services; Jolynn Bostrom, Child Protection Services Program Specialist; Marilyn Kinsman, Senior Policy Analyst, DSS.

**Call to Order and Declaration of Quorum:** Grogan called the meeting to order at 1:42 PM (CDT) and determined a quorum.

**Adoption of Agenda:** Motion to approve agenda by Wordeman, seconded by Bodenstedt. The Board voted by roll call. Grogan, Bodenstedt, Wordeman, Ronning voted aye. Motion carried.

**Approval of Minutes from April 21, 2020 Board Meeting:** Motion to approve minutes by Bodenstedt, seconded by Wordeman. The Board voted by roll call. Grogan, Bodenstedt, Wordeman, Ronning voted aye. Motion carried.

**COVID-19 Update – HSC:** DSS Cabinet Secretary Laurie Gill provided an update on how the Department of Social Services has continued to serve individuals throughout the public health pandemic over the past six months. State offices were closed but staff worked remotely to get services to the folks we serve with little interruption. Core staff required presence at the office and field offices were initially opened for a couple days a week. Six months later, as a Department we learned to do our jobs virtually and have made the decision to continue in this way throughout this health emergency. Some staff will continue to work remotely while other staff will return to the office setting. The Department is being thoughtful as we analyze how we can continue to effectively work remotely, and we are rolling that out now. We are tracking programs and ensuring services are provided, finding some programs where services increased and others where services decreased. There may be a lag in claims submitted so services may adjust over the next six months.

Brenda Tidball-Zeltinger represents the Department on a special population's workgroup. This workgroup consists of multiple state agencies and is in existence to ensure there are entities to support testing and provide support for providers that serve special populations. The workgroup meets weekly to ensure South Dakota entities have what is needed to serve special populations and can manage COVID-19 in their facilities.

The Department received targeted federal dollars to help people during the public health emergency. Supplemental Nutrition Assistance Program (SNAP) benefits for those recipient households that were not receiving the maximum allotment received program benefits during the public health emergency at the highest amount. As of the end of October, over \$25 million was provided to help South Dakotans who were struggling with food costs, get a much-needed boost. We also started allowing SNAP recipients to purchase food online at authorized SNAP retailers. Recipients use their Electronic Benefit Transaction card (EBT) to make online purchases through Amazon or Walmart and between the two entities, recipients have purchased over \$600,000 of food online.

Families who lost access to free or reduced-price school meals received assistance with food costs in response to COVID-19 related school closures. Extra dollars went into accounts and since June 19, over \$16.5 million has been issued to 28,000 South Dakota households.

Daycare and child care are the back bone of our economy in South Dakota. The Department awarded more than \$3 million to child care providers in response to the COVID-19 pandemic as part of ongoing efforts to support South Dakota families. Funds assist providers with ongoing costs and new pandemic-related expenses. We need this structure in place so parents, emergency workers, health care workers, and other frontline workers can go to work.

The Division of Behavioral Health worked with the 211 Helpline to help people deal with stress, and there has been over 6,000 contacts through the month of September. The Department has also provided additional dollars to help people with mental health and substance use needs.

Jeremy Johnson, Administrator of the Human Services Center (HSC), provided a COVID-19 update for HSC. All staff continue to self-screen prior to each shift. HSC is piloting thermal scanning devices to measure temperatures upon entrance and staff receive a printed sticker indicating clearance to enter the building. Patients continue to be screened prior to admission, at admission, and daily for symptoms and vitals check. Limited visitation to the nursing home continues in accordance with CMS guidance. The isolation unit remains activated, treating people on emergency holds or commitments admitted to HSC. The Center has avoided campus spread of the virus to patients. Currently, there is an uptick in census with statewide cases going up and an uptick in staff positives with community spread. When a staff positive is identified, internal contact tracing is completed, the unit is placed on precautions to limit traffic, and patients are restricted to the unit. Testing is done weekly in the nursing home while the rest of the campus is doing point of prevalence testing. There is an emergency staffing plan in place in the event it needs to be activated. If there is a disruption in the dietary operations, there is an emergency food plan. Availability of Personal Protective Equipment (PPE) has improved and supplies continue to be managed. Employee Assistance Program (EAP) services are offered to staff on a regular basis to assist in managing prolonged stress. To help with prevention and treatment efforts, HSC also continues to look at physical improvements to the campus. Bi-weekly communication continues with staff regarding numbers or changes in guidance. Virtual

town hall meetings are held weekly and information is shared on a regular basis if there are changes to policy or practices as related to COVID-19.

**DSS Organizational Enhancements Update:** Laurie Gill provided an update regarding high-level organizational changes the Department has implemented. In addition to the management team, a seven-member executive team was created and now there is only one deputy secretary, Brenda Tidball-Zeltinger. Brenda is also Chief of Operations overseeing all the operational needs of the Department and provides oversight for the new Office of Licensing and Accreditation. A communications area was created and is run by Max Wetz as the Administrator of Communications. Jeremy Lippert became the Director of Legal Services and Laura Ringling is now the Chief of Behavioral Health which consists of HSC, community behavioral health, and correctional behavioral health. A Division of Children and Family Services was created with Child Support, Child Protection and Economic Assistance making up this division. Virgena Wieseler is the Chief of Children and Family Services. Bill Snyder is the Director of Medical Services. Laurie Mikkonen remains Chief of Finance.

**Medical Services Update:** Director of Medical Services Bill Snyder shared information about the comprehensive review of South Dakota's Medicaid structure and strategy, provided updates on telemedicine and automation and outcomes of the innovation grants.

- **Comprehensive Review of SD Medicaid Structure and Strategy:** The Division of Medical Services has undertaken an independent review of the Medicaid program to ensure smart use of resources and that quality services are provided to South Dakotans. Thirteen firms from across the country responded and the award went to a national consulting firm that offers expertise in Medicaid program design. Work is underway. The consultants are gathering input from internal and external stakeholders and will present recommendations by the end of the year.
- **Telemedicine Update:** Telemedicine was a covered service prior to COVID-19. In the face of the public health emergency, we found ways to continue to provide services when it's not advisable to go to the clinic. To address COVID-19, Medicaid expanded the types of services that can be provided via telehealth to include well-child visits, therapy services, teledentistry, and remote patient monitoring. These expanded services are effective through the end of the Public Health Emergency as declared by the US Department of Health and Human Services. Telemedicine claims reached a high of 10,240 claims in May 2020.
- **Automation Update:** The number of provider calls coming into the Telephone Service Unit has decreased with information now available online. Additionally, portal claims submissions are increasing while paper claims submissions are decreasing.
- **Innovation Grant Report:** Funding of \$1 million was approved by the Legislature for the purpose of innovation grants and three projects were awarded \$333,000 each. Avera helps pregnant women in South Dakota who are diagnosed with gestational diabetes by providing remote blood sugar monitoring, specialized test strips and video visits with a diabetic educator. Native Women's Health Care helps patients by linking primary and prenatal services to behavioral health services leveraging a comprehensive care team including primary care, behavioral health, and community health workers. The Center for Family Medicine provides patients with a birth center/pregnancy health home approach to provide a full array of prenatal and postnatal care. This project will also train family medicine resident physicians in innovative, evidence-based prenatal care models. Goals are similar across sections, to improve access to OB care and treatment for gestational diabetes; reduce number of c-sections, birth complications, infant mortality and other complications; increase rates of healthy babies; improve adherence rates to SUD treatment, preventive and prenatal

care; and increase number of women accessing prenatal services, wellness checks, and behavioral health services. Between January – July 2020, Avera has supported 49 women, Native Women’s Health Care served three women, and the Center for Family Medicine has supported 36 women.

**Behavioral Health:** Tiffany Wolfgang, Director of Behavioral Health, shared information about the behavioral health needs and gap analysis, treatment outcomes, and the suicide prevention grant.

- **Needs and Gap Analysis:** When the Board last met, the RFP had just been published. Since then, it’s been secured. The Division of Behavioral Health will oversee the study to be conducted by Human Services Research Institute (HRSI). The study team will look at both publicly and privately funded services and will review previous work on the states’ system, reaching out to interview people with experience of the system at all. HRSI is in the process of conducting interviews, listening sessions, and focus groups began in September 2020. The study will identify the number of people with behavioral health conditions in the state, the number using existing services and the locations of those services, populations that may be having a harder time accessing services, and workforce issues or shortages that are affecting service delivery. The study’s findings and recommendations will help guide the state’s planning efforts to improve outcomes for people in the state. An implementation plan will be developed after the study team produces its final report in November 2020. It is important to ensure we have comprehensive behavioral health services across the state, and we are working to ensure we are not duplicating efforts; rather, complimenting any efforts already made.
- **Treatment Outcomes:** A comprehensive report of behavioral health outcomes for treatment services in South Dakota was recently completed. An executive summary and a more in-depth report are available online so consumers and the public can view how publicly treatment agencies are performing. Each publicly funded behavioral health agency has information listed on the website. We will continue to work with treatment agencies across the state to improve outcomes of those individuals who receive services.
- **Suicide Prevention Grant:** The Division of Behavioral Health was awarded \$1,200,000 (\$400,000 annually for a three-year period) for the 2020 Grants to Implement the National Strategy for Suicide Prevention (NSSP) funding from the Substance Abuse and Mental Health Services Administration (SAMHSA). The purpose of this grant is to support states and communities in advancing efforts to prevent suicide attempts among adults age 25 and older. For people hospitalized due to a suicide attempt, a follow-up program will be created. The grant also helps us increase the number of health care organizations that adopt “Zero Suicide” practices and focuses on veterans not already receiving Veterans Health Administration Services. Partners for this effort include The Helpline Center, inpatient behavioral health hospitals, and the South Dakota Department of Veterans Affairs.
- **Additional Information:** Additionally, the following handouts were provided to members: *South Dakota FY2020 Disaster Response State Grant, South Dakota Emergency Treatment Grant- COVID-19; and South Dakota Statewide COVID-19 Crisis Counseling Program.*

**Legislative Activities:**

- **Special Session:** Governor Noem called a Special Session for legislators to talk about \$1.3 billion the state acquired in response to COVID-19. The Administration determined the coronavirus funds could help businesses and healthcare providers across the state. As part of the proposed plan, staff in the Department of Social Services, Governor’s Office of Economic Development, and Department of Human Services worked to assist the state’s

contractor to create processes to receive and process grant applications. Brenda Tidball-Zeltinger provided an overview of the Small Business and Healthcare Provider Relief Program, which utilizes Coronavirus Relief Fund (CRF) dollars to assist small businesses, community-based healthcare providers, and non-profits negatively impacted by the COVID-19 pandemic. The healthcare track has two programs. The Acute Care in Hospitals program will provide up to \$15 million to eligible hospitals that are licensed by the state to provide acute inpatient care. Larger hospitals, e.g., Avera, Sanford, 11 larger hospitals in the state, all critical access hospitals, specialty hospitals, etc., can apply for funding October 13-23, 2020. The first week of October, the State contracted with a firm, Guidehouse, which merged with Navigant Consulting. While the consultant has a nationally accredited healthcare team, they also have presence in South Dakota. From an application perspective, they have done webinars with all the healthcare entities. Guidehouse is providing assistance to vendors walking through the process of how to submit an application. The vendor must submit total revenue and operating expenditures to provide a snapshot of comparison from this year in comparison to last year. Vendors will also disclose federal dollars received. The calculation for awards will be based on eligible expenses. Final awards will use a pro-rata formula. The other group is a substantially larger pool consisting of community-based healthcare providers, e.g., nursing facilities, assisted living centers, residential treatment facilities for youth, senior nutrition providers, behavioral health providers, community support providers, providers of Medicaid waiver services, in-home services to the elderly population and adult daycare, etc. The timeframe to apply is the same and requirements are similar. The allocation amount for this healthcare track is \$115 million. Eligible organizations are encouraged to apply.

- **Upcoming Session:** Jeremy Lippert, Director of Legal Services, highlighted information about the upcoming session. The Governor's Office is considering three proposed substantive bills and one proposed budget bill by the Department of Social Services and will be circulating decisions to DSS and other agencies in mid-November. 1) Corrects South Dakota confidentiality law to include a child's legal parents as parties who can receive information on a child who is receiving intervention services from Child Protection Services; 2) Removes and corrects incorrect cross-references identified in 2020 HB 1012 and 1013 throughout current code; 3) Fixes an issue highlighted by a recent Supreme Court case to enable Medicaid to be awarded restitution in future cases, where it has paid for medical services for a victim of a crime; and 4) Appropriates money for construction of an auto/welding building adjacent to the physical plant building at HSC to provide safer and more efficient space for staff. The Department will be working with Governor's Office and expect to finalize decisions in November or December. The first day of session will be January 12, 2021.

**Administrative Rules Update:** Jeremy Lippert provided an update regarding administrative rules.

- **Economic Assistance TANF Eligibility:** Senate Bill 96 was passed during the 2020 session, meaning that South Dakota will now opt out of the federal prohibition on TANF benefits for those convicted of a felony related to controlled substances. This rule amended the ARSD to repeal the prohibition and references to it in compliance with the law.
- **Economic Assistance Annual Update:** These changes are regular updates to the Economic Assistance rules updating or removing outdated citations, and updating references to federal dates, figures, and requirements.
- **Medical Services:** These rules bring references to medical code books and claims manuals up to date and are updated to align with a change in federal regulations that allows other

licensed practitioners to order home health services and durable medical equipment. The rules allow physician assistants, certified nurse practitioners, and certified nurse midwives to be primary care providers for care management purposes.

- **Child Protection Services:** Most of the changes in these rules are federal requirements under the Model Licensing Standards for Foster Care. The remaining changes were made to clarify existing policies and practices which are covered by the rules.
- **Behavioral Health Designation of Appropriate Regional Facilities:** This is a proposed rule change pursuant to SB 4 from the 2020 session, which gives DSS the responsibility for designating facilities as appropriate regional facilities to receive patients committed for emergency mental health holds.
- **Board of Counselors and Marriage and Family Therapists:** The rules implement legislation passed in 2020 reorganizing the current chapters pertaining to professional counseling, professional counseling-mental health, and marriage and family therapy to be consistent, user friendly for licensees and prospective licensees, and clearly articulate the requirements for licensure and the expectations of licensees.
- **Board of Examiners of Psychologists:** The rules update the code of ethics to the most recent version, and add a new chapter that sets a minimum continuing education requirement of 15 contact hours or 1.5 units, defines a continuing education unit, provides guidance on courses eligible for continuing education credit and documentation needed for continuing education, and provides for an exception to the requirements where applicable.

**Request for Proposal for Grievance Monitor:** Virgena Wieseler, Chief of Children and Family Services provided an update on the Request for Proposal (RFP) for a grievance monitor to review and respond to complaints related to the care provided to youth in the custody or care of certain care facilities, treatment centers, and programs. In September 2019 the Department submitted a report to Governor Noem which outlined findings and recommendations for treatment facilities licensed and accredited to serve children and youth in South Dakota. One of the recommendations was to create a monitor. DSS was successful in the bill passing both the House and Senate and the law went into effect on July 1, 2020. DSS published an RFP for a grievance monitor; however, no entities submitted a proposal. DSS is exploring other options to create a grievance monitor. Additionally, Child Protection Services brought forward proposed rules before the Legislative Interim Committee in August which added a standardized grievance procedure within Administrative Rules of South Dakota and became effective September 10, 2020.

**Stronger Families Together:** Sara Sheppick, Deputy Director of Child Protection Services (CPS) provided an overview of *Stronger Families Together*, which is a new foster and adoptive parent recruitment campaign developed by the Department of Social Services. *Stronger Families Together* provides families and children that are not able to remain home to have a foster or adoptive family to meet their needs. More foster families are needed to provide children a safe, stable, and permanent forever family if children cannot return home. Recruiting foster and adoptive families' efforts continue through the campaign. Encouragement and supports for foster, adoptive, kinship and birth families are needed to provide additional supports to allow children to safely remain in a family setting. On June 30, 2020, there were 890 licensed foster homes compared to 854 the

year prior. As part of the ongoing targeted recruitment, CPS wants more native American foster and adoptive families; foster families to care for older children ages 10-18 and children with medical, emotional, and behavioral needs requiring specialized care; and foster families who are able to keep brothers and sisters together. There are many stakeholders involved in this effort including Governor Noem, the Department of Social Services, South Dakota Kids Belong, Tribal child welfare programs, foster and adoptive parents, foster care alumni, business and municipal leaders across the state, faith-based organizations and child placement agencies. A steering committee comprised of stakeholder representatives convened to propose foster and adoptive family recruitment strategies and analyze effectiveness. A launch event will be held to communicate the vision and call to action. The communication plan is to continue to get the word out, provide testimonials, advertise on websites, social media, email, etc. Additionally, monthly statewide activities are scheduled to highlight fostering and adopting throughout the year. Targeted regional recruitment activities are planned with faith-based and community organizations to provide outreach and up-close opportunities to engage potential foster families. A schedule will be developed to rotate targeted recruitment based on greatest need for foster families. The campaign will focus on counties where there is a need for more foster and adoptive families, e.g., Rapid City and Yankton).

**Policy Academy for Developing a Comprehensive Approach to Serving Infants with Prenatal Substance Exposure and Their Families:** Child Protection Services Program Specialist Jolynn Bostrom shared information regarding the Policy Academy for developing a comprehensive approach to serving infants with prenatal substance exposure and their families. The primary goals for South Dakota includes to: 1) Develop criteria for substance use screening by providers and/or birthing hospitals; 2) Develop standardized definitions, to include infants affected by substance use; 3) Develop an oversight committee to guide changes in organizations; 4) Develop a pathway for reporting and monitoring; and 5) Provide education regarding Plans of Safe Care. Team members include the Division of Child Protection Services, Division of Behavioral Health, Division of Family and Community Health, Division of Developmental Disabilities, University of South Dakota Sanford School of Medicine and Center for Disabilities, South Dakota Indian Child Welfare Act Coalition, Avera Health, Monument Health, Sanford Health, Great Plains Tribal Chairmen's Health Board, and the Unified Judicial System.

**DSS Outcomes Report:** Brenda Tidball-Zeltinger shared a preview of an outcomes template with the members. In the past the Department has provided an outcomes document that lays out metrics and measurements to benchmark progress. This year the Department received instruction from GOAC on the format they want to see for reporting outcomes in each agency. This compilation will show more historical data and a status trend line showing trajectory. Once populated and delivered, the new outcomes document will be shared with members.

**Other Updates:** No other updates.

**Future Agenda Items:** Topics for future meetings include NONE.

**Public Comment:** No one appeared for public comment. No public comments were heard.

**Establish Next Meeting Date:** The next meeting date is set for April 20, 2021.

**Adjourn:** Ronning made a motion to adjourn. Seconded by Bodenstedt. The Board voted by roll call. Grogan, Bodenstedt, Wordeman, Ronning voted aye. Motion carried and the meeting was adjourned at 3:51 PM (CST).

DRAFT