

SOUTH DAKOTA BOARD OF SOCIAL SERVICES
Meeting Minutes
Tuesday, April 16, 2019
1:30pm – 3:30pm CT
Teleconference
Dial in: 1-866-410-8397
Conference code: 986-314-4547
Kneip Building, 1st Floor Kneip Conference Room #3, Pierre

Board Members Present: Hugh Grogan; Patricia Johnson; Linda Wordeman; Barbara Garcia; Holly Bodenstedt

Board Members Absent: Cecelia Fire Thunder; Jesse Ronning

Others Present: Greg DeSautel, Department of Social Services (DSS) Cabinet Secretary; Brenda Tidball-Zeltinger, DSS Deputy Secretary; Amy Iversen-Pollreisz, DSS Deputy Secretary; Carrie Johnson, Director of Economic Assistance; David Gall, Administrator of Energy Assistance & Weatherization; Bill Snyder, Director of Medical Services; Tiffany Wolfgang, Director of Behavior Health; Marilyn Kinsman, Senior Policy Analyst, DSS

Call to Order and Declaration of Quorum: The meeting was called to order by Hugh Grogan, at 1:45 PM (CDT) and a quorum was determined.

Adoption of Agenda: Motion to approve agenda by Patricia Johnson, seconded by Linda Wordeman. Motion carried.

Approval of Minutes from October 23, 2018 Board Meeting: Motion to approve minutes by Barbara Garcia, seconded by Patricia Johnson. Motion carried.

2019 Legislative Session Update: Amy Iversen-Pollreisz provided an update regarding bills the Department was involved in during the 2019 Legislative Session. SB 30 removed unnecessary federal references and dates for certain statutes related to DSS. HB 1029 was a bill that required criminal background checks for all adults working in child care institutions as a result of changes to federal law. Per federal law - Family First Prevention Services Act - the bill added any adult working in a child care institution, including a group home, residential treatment center, intensive residential treatment center, or shelter care facility to the statute requiring background checks. Both bills passed.

Licensing Boards overseen by the Department also had bills they brought before the Legislature. SB 31 removed Federal Bureau of Investigation (FBI) criminal background check requirements for assistant behavior analysts and paraprofessionals. Current law was intended for private agencies who employ certified assistant behavior analysts and paraprofessionals to conduct background checks through the Division of Criminal Investigations (DCI). However, the current statute also requires an FBI background check, which cannot be requested by a private agency. This bill amends the statute to reflect current practice. SB 32 amended the board composition for the Board of Social Examiners, so the membership reflects the needs of the Board. Both bills passed.

HB 1028 was brought forward by the Counselors and Marriage and Family Therapists Examiners to revise provisions related to professional counselors and marriage and family therapists. Statutes pertaining to this Board had not been comprehensively updated in over 20 years. The

majority of the revisions and updates were aimed at correcting inconsistencies and making general clean up amendments. Additionally, counselors are currently licensed under a dual-tier system. The Board's proposed changes would have created one level of licensure for applicants after July 1, 2019, and would have transitioned to one level of licensure, making the practice act consistent with neighboring states to allow for easier portability of licenses. HB 1028 was amended, and HB 1250 was brought forward; however, neither bill passed.

Career Connector: Carrie Johnson discussed progress made with the Career Connector program. The Department submitted a waiver in July 2018 which would require Medicaid adults in the Low Income Families group to participate in the work component (unless they qualify for an exemption) and meet monthly milestones. The Career Connector program will be piloted in Minnehaha and Pennington counties. These two counties were identified as pilot locations to operate the program based on population and access to employment and training. Both Minnehaha and Pennington counties have a Department of Labor and Regulation office that will provide supports for individuals in the program. The intent is for each participant to have an individualized plan, unique to the barriers and skill sets they have or need.

There are transitional benefits available for a year and potential premium assistance for another year after that (e.g. if the individual continues to be active in the program and meets certain milestones such as preventive health visits.) The Department began operating the work requirement in July 2018 as a voluntary program. Once the Centers for Medicare and Medicaid Services (CMS) approves the waiver, the work component will be implemented as mandatory. Since starting the volunteer program, the Department has made over 1,100 referrals to the Department of Labor for the two counties. Of the 124 appointments that were scheduled, 35 participants attended and 14 are currently actively participating. As we have been working with the individuals in the volunteer program, we are learning about barriers and challenges they face – they may have moved, their phones get shut off, etc.

South Dakota's waiver is unique from other states in the individualized plan approach. The program will also focus on improving health outcomes for participants by increasing identification and treatment of behavioral health conditions including substance use disorders and through promoting the utilization of preventative services. Participants are given multiple opportunities to comply before losing Medicaid eligibility. Failure to comply will result in a 90-day ineligibility period of the participant's Medicaid coverage.

Weatherization State Plan: David Gall presented information about South Dakota's Weatherization State Plan. The Weatherization Assistance Program is 100% federally funded. The US Department of Energy oversees the program and sets the guideline for eligibility at 200% of the federal poverty level. Dave provided an overview of the breakdown of the \$2,136,561 total budget. The Department contracts with four agencies that complete weatherization work throughout the state – Inter-Lakes Community Action Partnership; Northeast South Dakota Community Action Program, Rural Office of Community Services, Inc., and Western South Dakota Community Action Agency, Inc. The funding formula is based on 90% of low-income households in their service area; 10% is based on square miles in their service area. The average cost per home weatherized is \$9,538. Priority is given to the elderly, individuals with disabilities, and families with children. Federal rule prohibits homes that were weatherized after September 30, 1994, to be weatherized again. Refer to the *Application for Federal Assistance SF-424* handout.

Medicaid Community Health Worker: Bill Snyder shared information regarding Medicaid Community Health Worker services. Funding for this program is made possible by care

coordination between Indian Health Services (IHS) and other providers in South Dakota. A State Plan Amendment established coverage criteria and a reimbursement methodology for community health worker services that became effective April 1, 2019. Community health worker services are a preventive health service to prevent disease, disability, and other health conditions or their progression for individuals with a chronic condition or at risk for a chronic condition who are unable to self-manage the condition or for individuals with a documented barrier that is affecting the individual's health. A community health worker agency is required to be enrolled in Medicaid to be reimbursed for services. Individual community health workers must be employed and supervised by an enrolled community health worker agency. Covered services include resource coordination, health system navigation, health promotion and coaching, and health education to teach or promote methods and measure that have been proven effective in avoiding illness and/or lessening its effects. These services are available both on and off the reservation. Refer to the *Community Health Worker (CHW) Services* handout.

Primary Care/Nursing Home Innovation Grants: Bill Snyder presented information regarding the Department of Social Services publication of RFP #1661 Primary Prenatal Care Innovation Grants and the Department of Human Services plan regarding nursing home innovation grants. One-time funding (\$5 million for nursing homes and \$1 million for primary prenatal care) was appropriated to develop new and innovative approaches to care. The grant will test innovative service delivery models and evaluate outcomes over the length of the projects. The goal will be to identify cost effective strategies that could be sustained over the long term and for primary/prenatal care that reduce costs and achieve positive birth outcomes and increased preventive care. A grant application for nursing homes is in process by the Department of Human Services. A Request for Proposals for primary prenatal care grants was published on April 1, 2019. The requirement of a letter of intent was extended to Thursday April 18. The anticipated award decision/contract negotiation date is July 1, 2019. Refer to the *Innovation Grants* handout.

Behavioral Health - New Initiatives: Amy Iversen-Pollreisz shared information regarding the Division of Behavioral Health's new initiatives that support Governor Noem's priority to address the meth crisis in South Dakota. Funding was requested and approved by the legislature related to this initiative, including one-time funding in the amount of \$1.3 million for the development of a meth prevention media campaign plus ongoing funding of \$250,000 to support the campaign. Additionally, \$731,000 will be used to implement school-based meth prevention activities, targeting middle school age youth and bringing educational information to youth across the state to help them understand the dangers of meth as well as other substances. In addition, funding of \$547,500 will be available to support sober living environments for individuals with substance use disorders. The Department will also receive funding to expand on school-based mental health services and is partnering with the Department of Education in this area. \$351,000 will be available to allow the addition of five more system of care coordinators to be placed in schools across South Dakota to screen and identify students who may need treatment and link them to treatment. Additionally, \$220,000 will be available to support activities previously funded through the Youth Suicide Prevention grant. Funding will be used to follow up on individuals hospitalized due to suicidal ideations, help make sure they are getting to appointments, provide suicide training, and continue to support the *Be the 1* campaign.

SB 8 passed and will allow the Department of Social Services to partner with counties to implement a statewide call in resource network.

Featured Program - DSS Opioid Grants: Tiffany Wolfgang shared information regarding ongoing work the Department has done to address the opioid crisis. Enough doses of opiates

were prescribed to South Dakotans in 2017 to medicate every South Dakota adult around-the-clock for 15 straight days (17 days in 2016 and 19 days in 2015). As shared during the last meeting, although South Dakota is not experiencing the opioid crisis other states are, we want to raise awareness so that South Dakota does not become a national statistic. We remain focused on being proactive in assessing the impact of the opioid epidemic in South Dakota and have been providing coordinated efforts in the areas of education, prevention, treatment and recovery. Tiffany provided an overview of the Department's work with the Federal State Targeted Response to the Opioid Crisis grant as well as the State Opioid Response Grant. Activities include supporting evidence-based prevention and treatment across the state of South Dakota including community and school-based educational events; professional development and training; and raising awareness and access to Medication Assisted Treatment. Information can be found at <https://www.avoidopioidsd.com/>. Refer to the two *Avoid Opioids* handouts.

Additional Agenda Items: Greg DeSautel shared the Department's highest priorities include updating the MMIS system and the Medicaid Eligibility and Enrollment System in addition to suicide prevention and responding to the meth and opioid use/abuse in South Dakota.

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

Establish Next Meeting Date: The next meeting date is set for Tuesday, October 22, 2019 from 10:00 to noon (CDT) in Pierre.

Adjourn: The meeting was adjourned at 2:55 PM (CDT).