

# Department of Social Services Overview

Presented to the Joint Committee on Appropriations  
January 10, 2022



South Dakota  
Department of  
**Social Services**

Laurie R. Gill, Cabinet Secretary



# DSS Acronyms

ACF - Administration for Children and Families  
CARE - Comprehensive Assistance with Recovery and Empowerment  
CBISA - Cognitive Behavioral Interventions for Substance Abuse  
CJI - Criminal Justice Initiative  
CMS - Centers for Medicare and Medicaid Services  
DHS - Department of Human Services  
DME - Durable Medical Equipment  
DOC - Department of Corrections  
DOE - Department of Education  
DOH - Department of Health  
DSH - Disproportionate Share Hospital  
DSS - Department of Social Services  
EBT - Electronic Benefits Transfer  
EPSDT - Early and Periodic Screening, Diagnosis, Treatment  
FFM - Federally Facilitated Marketplace  
FMAP - Federal Medical Assistance Percentage  
FTE - Full Time Equivalent  
GME - Graduate Medical Education  
HIT - Health Information Technology

HH - Health Homes  
JJRI - Juvenile Justice Reinvestment Initiative  
IDEA - Individuals with Disabilities Education Act  
IHS - Indian Health Services  
IMPACT - Individualized Mobile Programs of Assertive Community Treatment  
LIEAP - Low Income Energy Assistance Program  
MCN - Mickelson Center for the Neurosciences  
MOE - Maintenance of Effort  
MRT - Moral Reconation Therapy  
Part D - Medicare Prescription Drug Program  
SED - Serious Emotional Disturbance  
SNAP - Supplemental Nutrition Assistance Program  
SSA - Social Security Administration  
SSI - Supplemental Security Income  
TANF - Temporary Assistance for Needy Families  
Title IV E - Foster Care and Adoption Assistance  
Title XIX - Medicaid  
Title XXI (CHIP) - Children's Health Insurance Program  
UJS - Unified Judicial System

**Department of Social Services Website:** <http://dss.sd.gov/>

# The South Dakota

## Department of Social Services

is a large agency with nearly **1,600** employees and **42** offices in communities across South Dakota.

### **Our Guiding Principles:**

#### **Focus on Impact:**

We focus on important issues and challenges to maximize impact.

#### **Customer Centric:**

We treat customers with respect and provide a “no wrong door” approach.

#### **Build Partnerships to Maximize Results:**

We believe collaboration, teamwork, and partnerships are key to delivering results.

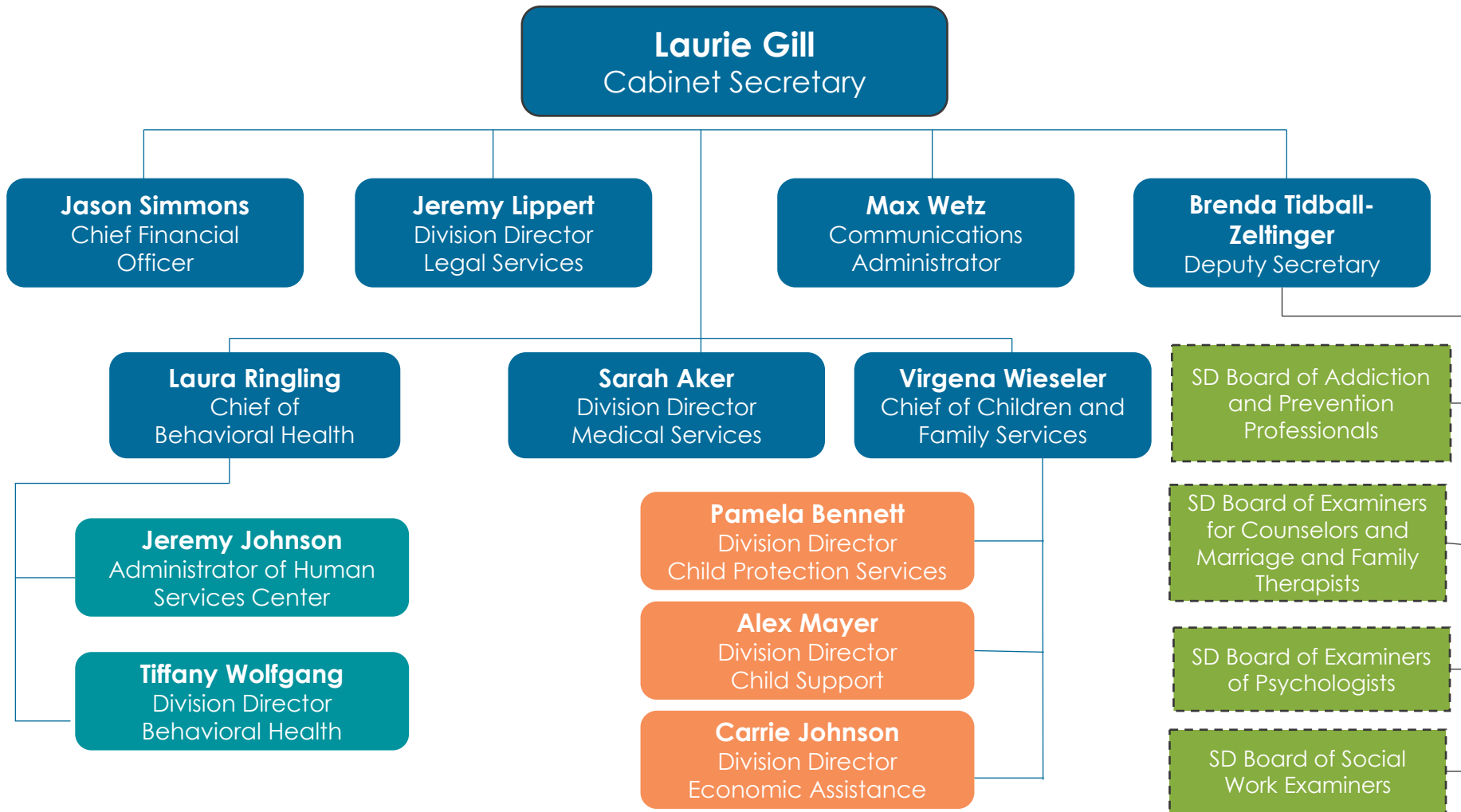
#### **Develop Our People:**

We promote professional growth and development by empowering staff.

## About DSS

We are here to help children, families, individuals, seniors and people with disabilities through some of the most difficult times in their lives with the programs and services we provide.

# Department of Social Services



# Department of Social Services – Contact List

## Department of Social Services

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## Division of Child Support

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# Our Vision and Mission

**Strong families – South Dakota's foundation and our future**

## **The South Dakota Department of Social Services**

is dedicated to strengthening families to foster health, wellbeing, and independence.

# Strategic Plan

Strategic Plan 2021-2025

## Goal 1

Creating a culture to pursue innovative solutions and enhanced collaboration

## Goal 2

Investing in continuous improvement of efficiencies, effectiveness and technology

## Goal 3

Recruiting, developing, and retaining our quality staff

Strategic Plan Outcomes: <https://dss.sd.gov/docs/contactus/outcomes.pdf>

# Nationally Recognized for Program Quality

## Program Integrity – National Awards

- **Medicaid** – Only state in the nation to receive continuous exemption since 2010 from recovery audit contractor requirements.
- South Dakota's payment accuracy rate is **98.96%** compared to the national average of **78.31%**
- Collected **\$10.3** million in third party liability, estate recovery and fraud collections
  - **Less than** 1% of collections are fraud related
- **Child Support – \$119 million** in collections in SFY 2021 for **55,238** cases. Ranked in the top twelve nationally for the last 15 years. As a result, the program earned financial program awards for top performance each year.
- **Child Care – 99%** payment accuracy compared to national average of **95%**.

Medicaid	Outcome	Target
Collections	\$10.3 million	\$9.0 million
Child Support	Outcome	Target
Percent of Current Support Collected	63%	64%
Administrative Costs	\$11.74 / \$1	\$10.75 / \$1
Child Care	Outcome	Target
Payment Accuracy	99%	95%



# Department of Social Services – FPL

2021 CALENDAR YEAR FEDERAL POVERTY GUIDELINES							
Annual Amount at Various Income Percentage Levels							
Family Size	100%	130%	138%	182%	185%	200%	209%
1	\$12,880	\$16,744	\$17,775	\$23,442	\$23,828	\$25,760	\$26,920
2	\$17,420	\$22,646	\$24,040	\$31,705	\$32,227	\$34,840	\$36,408
3	\$21,960	\$28,548	\$30,305	\$39,968	\$40,626	\$43,920	\$45,897
4	\$26,500	\$34,450	\$36,570	\$48,230	\$49,025	\$53,000	\$55,385
5	\$31,040	\$40,352	\$42,836	\$56,493	\$57,424	\$62,080	\$64,874
6	\$35,580	\$46,254	\$49,101	\$64,756	\$65,823	\$71,160	\$74,363
7	\$40,120	\$52,156	\$55,366	\$73,019	\$74,222	\$80,240	\$83,851
8	\$44,660	\$58,058	\$61,631	\$81,282	\$82,621	\$89,320	\$93,340
Each Additional (approximately)	\$4,540	\$5,902	\$6,265	\$8,263	\$8,399	\$9,080	\$9,489

## South Dakota

Medicaid (Pregnant Women)	138%
Medicaid Children	182%
CHIP Children's Health Insurance Program	209%
SNAP	130%
LIEAP	200%
Child Care	209%
Community Behavioral Health	185%

# Department of Social Services - FTE

FTE Utilization	FTE Budget			(Over)/Under Utilization				
	FY20	FY21	FY22	FY20	FY21		FY20	FY21
<b>Department of Social Services</b>	<b>1,561.3</b>	<b>1,562.3</b>	<b>1,563.3</b>	<b>93.3</b>	<b>109.7</b>		<b>6.0%</b>	<b>7.0%</b>
Administration	175.2	175.2	205.2	16.2	14.8		9.3%	8.4%
Economic Assistance	320.5	320.5	320.5	1.9	0.3		0.6%	0.1%
Medical Services	55.0	56.0	56.0	(5.0)	(6.1)		-9.0%	-10.9%
Children's Services	376.3	376.3	350.3	8.5	7.5		2.3%	2.0%
Behavioral Health	633.0	633.0	630.0	71.8	92.2		11.3%	14.6%
Human Services Center **	553.0	551.0	550.0	64.6	85.3		11.7%	15.5%
Boards	1.3	1.3	1.3	(0.2)	1.1		-13.8%	80.8%

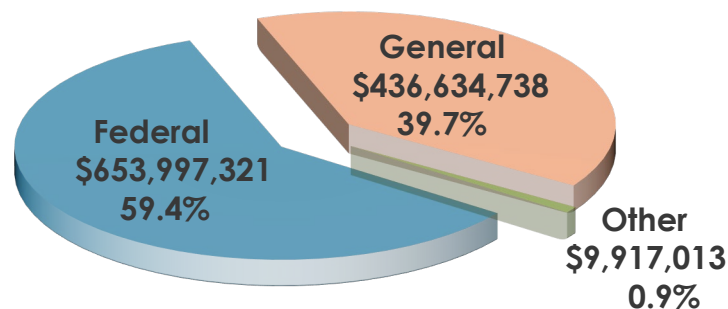
\*\*HSC is also included in the Behavioral Health amounts

# Department of Social Services

LRC Budget Brief Detail Pages 1-3

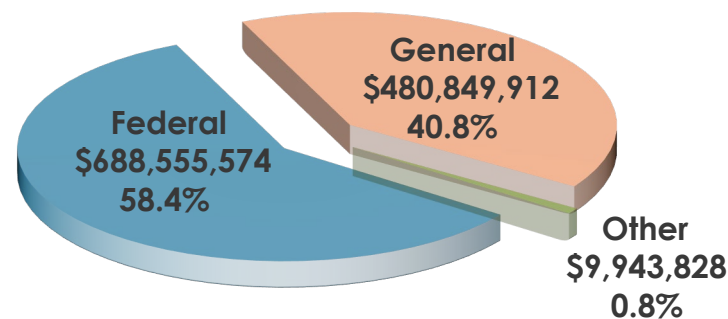
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$1,100,549,072 and 1,563.3 FTE**

**FY23 Recommended Budget**



**Total: \$1,179,349,314 and 1,562.0 FTE**

	GENERAL	FEDERAL	OTHER	TOTAL
<b>FY2022 Operating Budget – 1,563.3 FTE:</b>	\$436,634,738	\$653,997,321	\$9,917,013	\$1,100,549,072
<b>FY2023 Recommended Budget – 1,562.0 FTE:</b>	\$480,849,912	\$688,555,574	\$9,943,828	\$1,179,349,314
<b>FY2023 Recommended Inc./Dec. – (1.3) FTE:</b>	\$44,215,174	\$34,558,253	\$26,815	\$78,800,242

# Department of Social Services

## FY2023 General Fund - Major Impacts

### Federal Medical Assistance Percentage (FMAP)

- Determines how much the state and federal government pay for their share of Medicaid expenditures
- Determined annually for the federal fiscal year (10/1 – 9/30) using the previous three years of personal income data from each state
- Formula compares each state's average per capita income change in relation to each other state
- FMAP rates range from 50% to 74%
- Because the state and federal fiscal years do not align, for state budgeting purposes, a “blended” FMAP rate is calculated using the FMAP rate in effect for each quarter
  - This includes a blend of one quarter from one federal fiscal year and three quarters from another federal fiscal year

### SFY2023 FMAP Blended Rates

#### Title XIX (Medicaid)

- State match of 41.41% in SFY2022 to a **state match of 42.77% in SFY2023**
- Federal match of 58.59% in SFY2022 to a **federal match of 57.23% in SFY2023**

#### Title XXI (CHIP)

- State match of 28.99% in SFY2022 to a **state match of 29.94% in SFY2023**
- Federal match of 71.01% in SFY2022 to a **federal match of 70.06% in SFY2023**

# Department of Social Services

## FY2023 General Fund - Major Impacts

**Federal Medical Assistance Percentage (FMAP): \$7,899,799**

**Provider Inflation: \$25,213,930**

- Mandatory Inflation for Medicare Part A, B, D, and Crossovers
- 6.0% Discretionary Inflation

**Medical Services: \$10,569,909**

- Title XIX (Medicaid) and Title XXI (CHIP) for Eligibles, Utilization, and Cost

**Children's Services: \$2,020,191**

- Subsidized Adoptions & Subsidized Guardianships
- Federal Policy Reducing IV-E Federal Funding for Group Care Services

**Behavioral Health: \$207,634**

- Food Service and Utilities

**Economic Assistance: (\$1,696,289)**

- Transfer general fund match for services for youth in state custody receiving services at community support providers and community intermediate care facilities to the Department of Human Services

# Division of Medical Services

LRC Budget Brief Detail Pages 15-21

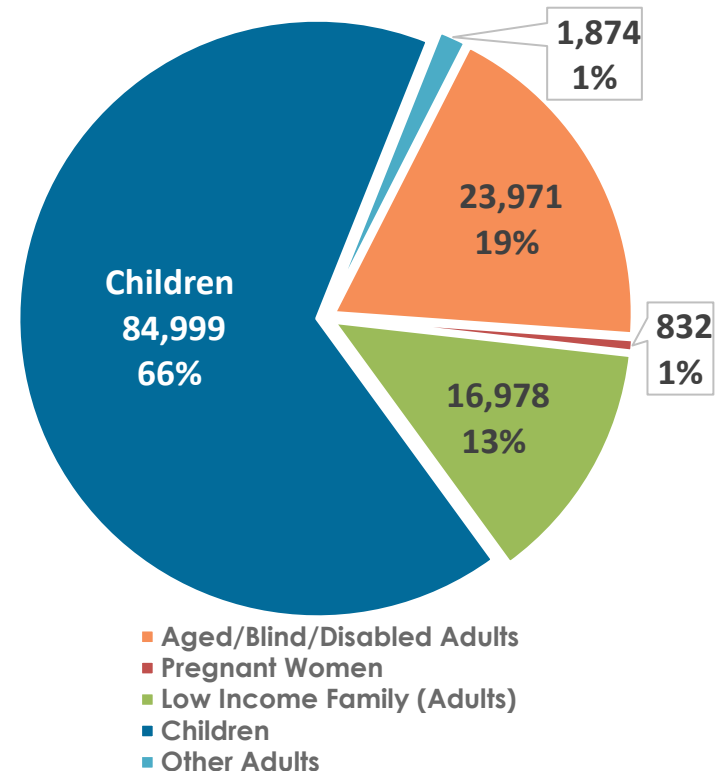
# Division of Medical Services

South Dakota operates a conservative program with income guidelines at federal minimums with the exception of CHIP

- Covered services must be medically necessary and physician ordered
- Over **16,000** enrolled providers with **3,000** on average providing services each month

***SD remains the only state in the nation to receive a continuous exemption from additional federal audit requirements due to the low prevalence of payment errors***

**SFY2021: 128,654**  
**Average Monthly Eligible**



# Division of Medical Services

*Medicaid is the nation's public financed health care coverage program for low-income people enacted in 1965 under Title XIX of the Social Security Act and Title XXI of the Children's Health Insurance Program (CHIP) enacted in 1997*

## Who we serve

- Low-income families, pregnant women, and children
- Elderly
- People with disabilities
- Participating providers

## Covered Services

- Physician services
- In-patient & out-patient hospital
- Prescription drugs
- Medicare premiums
- Other medical, dental, medically necessary services for children etc.

## Services provided

- Provider enrollment
- Process claims
- Program integrity unit
- Prior authorizations for services
- Medicaid is an entitlement program-all people eligible must be served
- Federal-state partnership governed by the Medicaid State Plan



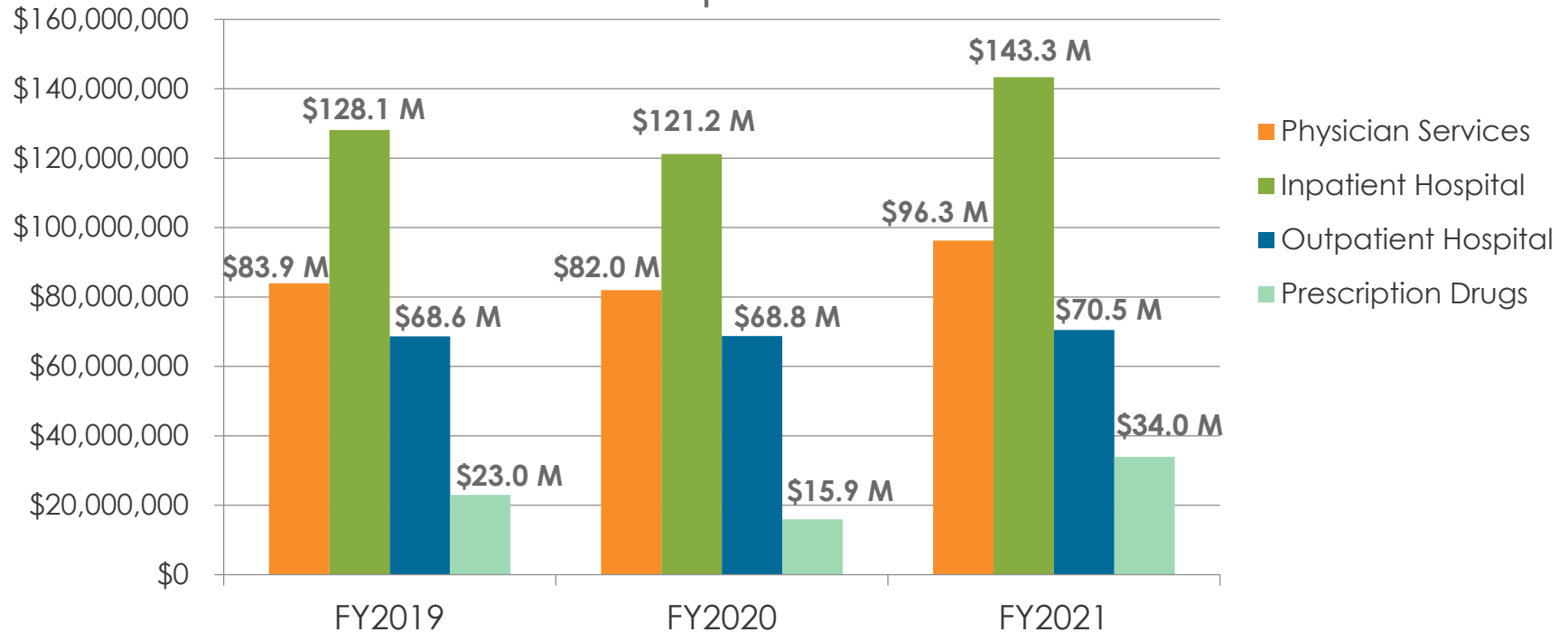


# Division of Medical Services

## Health Care Services

Certain health care services represent the largest share of our Medical Services budget. These are sometimes referred to as “The Big 4”.

### Actual Expenditures



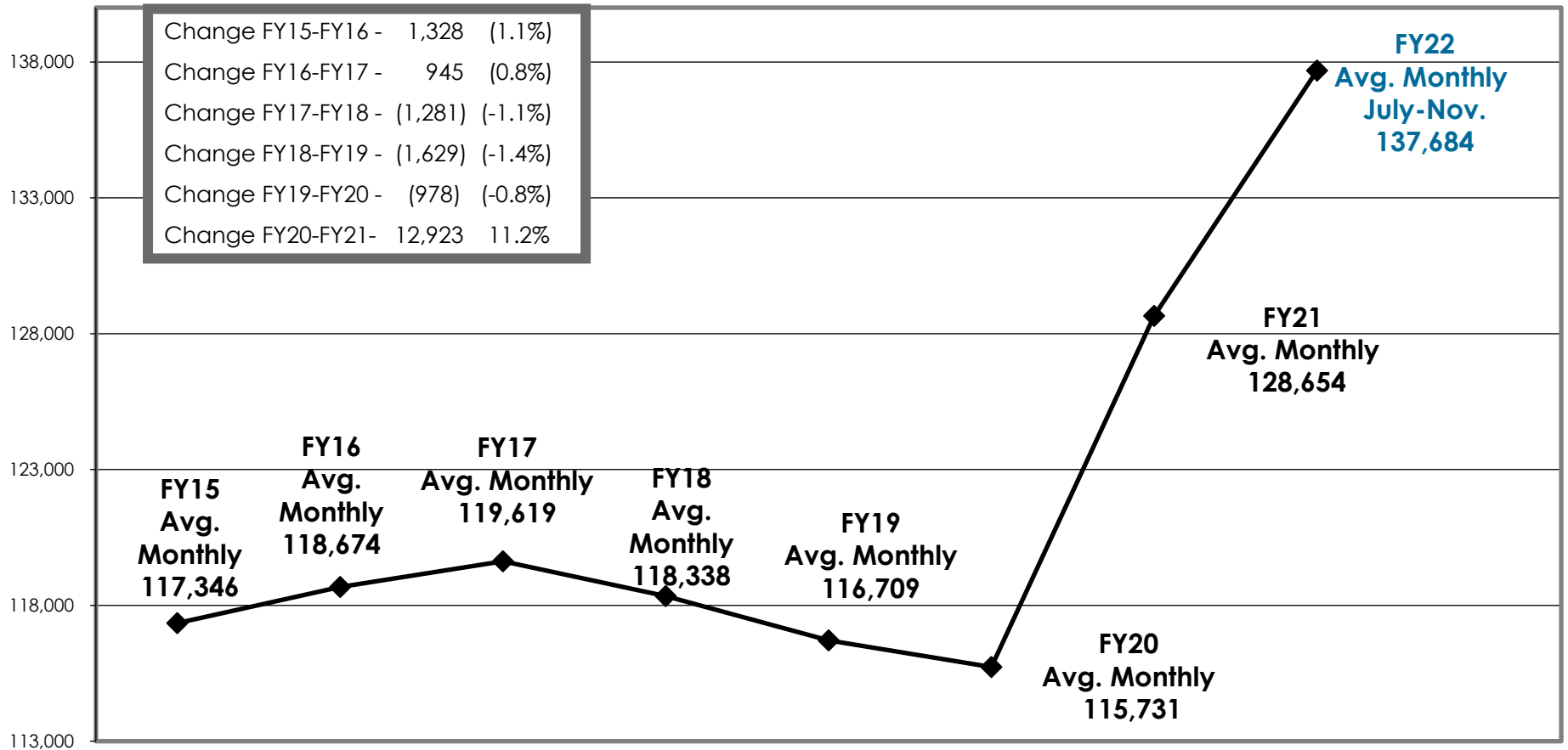
Inpatient includes carryover funding in FY2021. GME and CHIP are not included in the amounts above.

# Division of Medical Services

- Prior to March 2020, the start of the pandemic, Medicaid eligibles were on a downward trajectory
- The key driver of the increase in eligibles since March 2020 is a federally required Maintenance of Effort (MOE) requirement authorized through the Families First Coronavirus Response Act of 2020
  - States are unable to terminate medical coverage for recipients that became eligible March 2020 through the end of the public health emergency (PHE) as a condition of a temporary additional 6.2% FMAP. The current PHE is in effect until January 16, 2022 and the 6.2% in effect through the end of the first quarter of 2022.
- The result is an average increase in eligibles of around 1,200 per month coupled with offsetting general fund savings as a result of the 6.2% temporary enhanced FMAP. With these unprecedented increases in the number of eligibles We are asking for a revised current year (\$FY22) budget amount.
- States are required to conduct a full eligibility review of all cases to determine eligibility on an ongoing basis after the end of the public health emergency. This impacts the timing as to when individuals that no longer meet eligibility can be transitioned off the program and we expect it to take several months to transition individuals off the program that no longer meet eligibility.

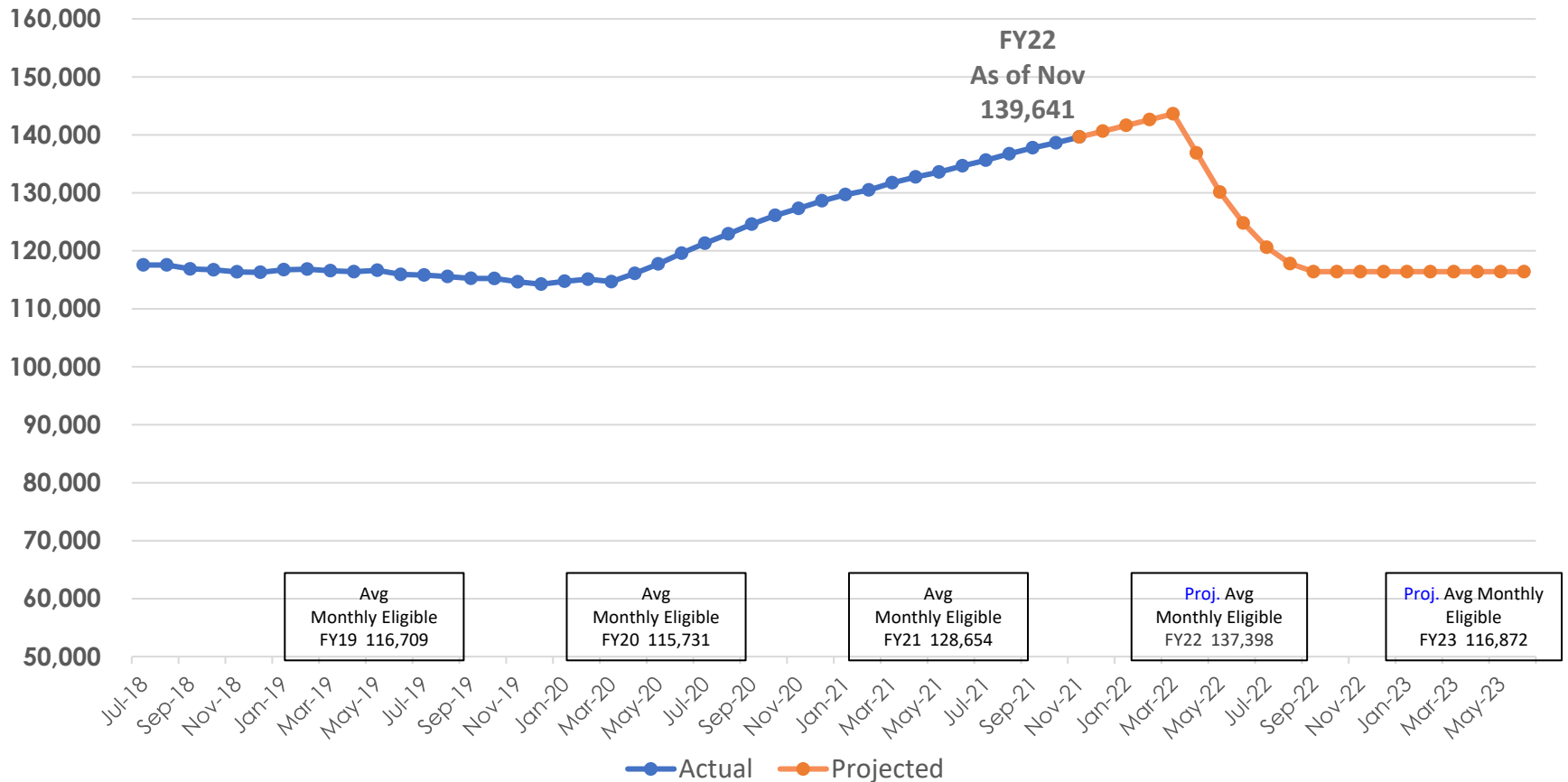
# Division of Medical Services

## Title XIX & Title XXI - Annual Avg. Monthly Eligibles



# Division of Medical Services

## Title XIX & Title XXI - Avg. Monthly Eligibles



Assumption that the public health emergency ends in January 2022 & DSS would close cases over 6 months

# Division of Medical Services

<b>FY22 GENERAL BILL AMENDMENTS (One-Time)</b>	<b>GENERAL</b>	<b>FEDERAL</b>	<b>OTHER</b>	<b>TOTAL</b>
<b>Change in Title XIX &amp; CHIP (Medicaid) Eligible, Utilization, &amp; Cost:</b>	<b>\$25,371,738</b>	<b>\$41,201,240</b>	<b>\$0</b>	<b>\$66,572,978</b>

- **FY22 Appropriated Budget: average monthly eligibles - 114,580**
  - 98,716 average monthly Title XIX (Medicaid) Eligibles
  - 15,864 average monthly Title XXI (CHIP) Eligibles
- **FY22 Revised: average monthly eligibles - 137,398 (Increase of 22,818)**
  - 119,450 average monthly Title XIX (Medicaid) Eligibles
  - 17,948 average monthly Title XXI (CHIP) Eligibles
- Assumption that the public health emergency ends in January 2022 & DSS would close cases over 6 months

	<b>FY22 to Rev. FY22 Totals</b>
Physician	\$ 17,869,016
Inpatient	\$ 26,730,599
Out-Patient	\$ 15,533,836
Prescription Drugs	\$ 6,439,527
<b>Totals</b>	<b>\$ 66,572,978</b>

% inc. of total budget 9.7%

	<b>GENERAL</b>	<b>FEDERAL</b>	<b>OTHER</b>	<b>TOTAL</b>
<b>Temporary 6.2% Enhanced FMAP : 3 quarters of general fund savings</b>	<b>(\$23,660,874)</b>	<b>\$23,660,874</b>	<b>\$0</b>	<b>\$0</b>
<b>Medicare Part D Clawback Savings: Related to 6.2% FMAP</b>	<b>(\$2,511,000)</b>	<b>\$ 0</b>	<b>\$0</b>	<b>(\$2,511,000)</b>

# Division of Medical Services

FY22 GENERAL BILL AMENDMENTS (One-Time)	GENERAL	FEDERAL	OTHER	TOTAL
<b>One-time funding to enhance certain Home and Community-Based Services (HCBS) (Private Duty Nursing Services):</b> SFY22 temporary 10% enhanced federal medical assistance percentage (FMAP).	\$0	\$6,209,438	\$0	\$6,209,438

- One-time funding to reinvest in Home and Community-Based Services (HCBS) to enhance, expand, or strengthen these services
- Medical Services - Private Duty Nursing Services
- Under this one-time funding opportunity, providers can use the funding to implement a variety of activities to enhance, expand, or strengthen Medicaid HCBS. Examples of eligible activities/expenses include:
  - Direct care workforce one-time compensation adjustments
  - Other retention incentives
  - Direct care worker recruitment and training
  - Telehealth, assistive technology, and other equipment (may include COVID-related activities and expenses)
- HCBS providers can spend no more than 55% of their total allotted ARP funding on direct care workforce one-time compensation adjustments.
- The remaining 45% can be spent on other retention incentives, direct care recruitment and training, and telehealth equipment and assistive technology.

# Division of Medical Services

## FY22 GENERAL BILL AMENDMENTS (One-Time)

	GENERAL	FEDERAL	OTHER	TOTAL
<b>Title XIX (Medicaid) &amp; Title XXI (CHIP) Eligibles, Utilization, &amp; Cost</b>	\$25,371,738	\$41,201,240	\$0	\$66,572,978
<b>One-time funding to enhance certain Home and Community-Based Services (HCBS) (Private Duty Nursing Services)</b> SFY22 temporary 10% enhanced FMAP	\$0	\$6,209,438	\$0	\$6,209,438
<b>FY22 6.2% Enhanced FMAP</b> 3 quarters of general fund savings due to enhanced 6.2% FMAP.	(\$23,660,874)	\$23,660,874	\$0	\$0
<b>Medicare Part D Clawback Savings</b> Related to the enhanced 6.2% FMAP	(\$2,511,000)	\$0	\$0	(\$2,511,000)
<b>Total</b>	<b>(\$800,136)</b>	<b>\$71,071,552</b>	<b>\$0</b>	<b>\$70,271,416</b>

# Division of Medical Services

## FY23 Title XIX (Medicaid) & Title XXI (CHIP) Average Monthly Eligibles

- 2.0% change in eligibles to the SFY23 base budget
- Assumption that the public health emergency ends in January 2022

Medicaid Eligible Totals	Appro. Budget FY22	Appro. Budget FY23	Elig. Change	% Change
Title XIX Eligibles	98,716	101,008	2,292	
Title XXI Eligibles	15,864	15,864	-	
Total Eligibles	114,580	116,872	2,292	2.0%

MAJOR BUDGET INCREASES AND DECREASES	GENERAL	FEDERAL	OTHER	TOTAL
Change in Title XIX (Medicaid) & CHIP Eligible, Utilization, & Cost:	\$10,569,909	\$14,143,463	\$0	\$24,713,372



# Division of Medical Services

Change in Title XIX (Medicaid) & Title XXI (CHIP)  
Eligibles, Utilization, & Cost

	<b>FY22 to FY23</b>
	<b>Totals</b>
Physician	\$ 5,111,319
Inpatient	\$ 10,455,316
Out-Patient	\$ 5,573,138
Prescription Drugs	\$ 2,153,680
All others	\$ 1,419,919
<b>Totals</b>	<b>\$ 24,713,372</b>

**% inc. of total budget**      3.6%

# Division of Medical Services

## FY23 Annual Average Cost Per Eligible

<b>Medical Services:</b>	
	<b>Budget FY2023</b>
<b>Annual Average Cost per Title XIX Eligible:</b>	
Physician Services	\$1,011
Inpatient Hosp., GME, Dispro	\$1,585
Outpatient Hosp	\$891
Prescription Drugs	\$425
All Others (Medicare Premiums, Dental, Chiropractic, etc.)	\$2,704
<b>Total</b>	<b>\$6,616</b>
<b>Annual Average Cost Per CHIP Eligible:</b>	<b>\$2,326</b>
*Does not include MS Admin., & Non-Direct Services	

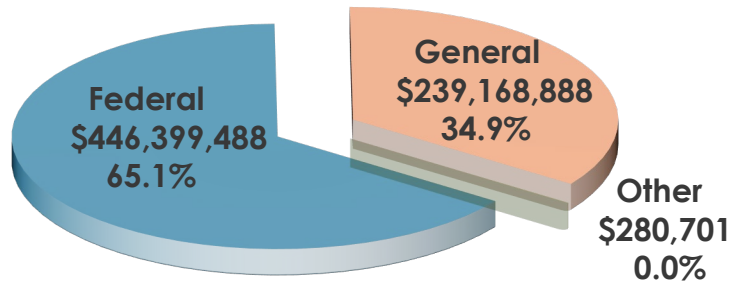
# Division of Medical Services

	\$6,616.18	Title XIX avg. cost	
X	101,008	Title XIX eligibles	
<hr/>			
	<b>\$668,287,027</b>	Total Title XIX Budget	
	\$2,325.79	Title XXI (CHIP) avg. cost	
X	15,864	Title XXI (CHIP) eligibles	
<hr/>			
	<b>\$36,896,285</b>	Total Medical Services CHIP Budget	
	<b>\$43,823,658</b>	Medical Services Admin. and Non-Direct Services	
	<b>\$749,006,970</b>	<b>Total FY2023 Medical Services Budget</b>	

# Division of Medical Services

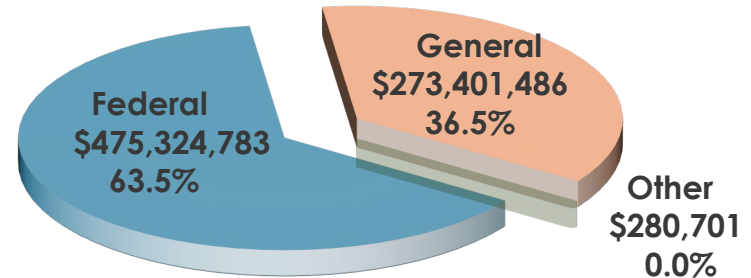
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$685,849,077 and 56.0 FTE**

**FY23 Recommended Budget**



**Total: \$749,006,970 and 56.0 FTE**

### MAJOR BUDGET INCREASES AND DECREASES

	GENERAL	FEDERAL	OTHER	TOTAL
<b>FMAP - Federal Medical Assistance Percentage:</b>	\$6,777,460	(\$6,777,460)	\$0	\$0
<b>Mandatory Inflation:</b> Federally Qualified Health Centers, Rural Health Clinics, Medicare Crossovers, Part A, Part B & Part D	\$6,457,967	\$7,071,743	\$0	\$13,529,710
<b>Discretionary Inflation:</b>	\$10,427,262	\$14,487,549	\$0	\$24,914,811
<b>Change in Title XIX (Medicaid) &amp; Title XXI (CHIP) Elig., Util., &amp; Cost:</b>	\$10,569,909	\$14,143,463	\$0	\$24,713,372
<b>Totals:</b>	<b>\$34,232,598</b>	<b>\$28,925,295</b>	<b>\$0</b>	<b>\$63,157,893</b>

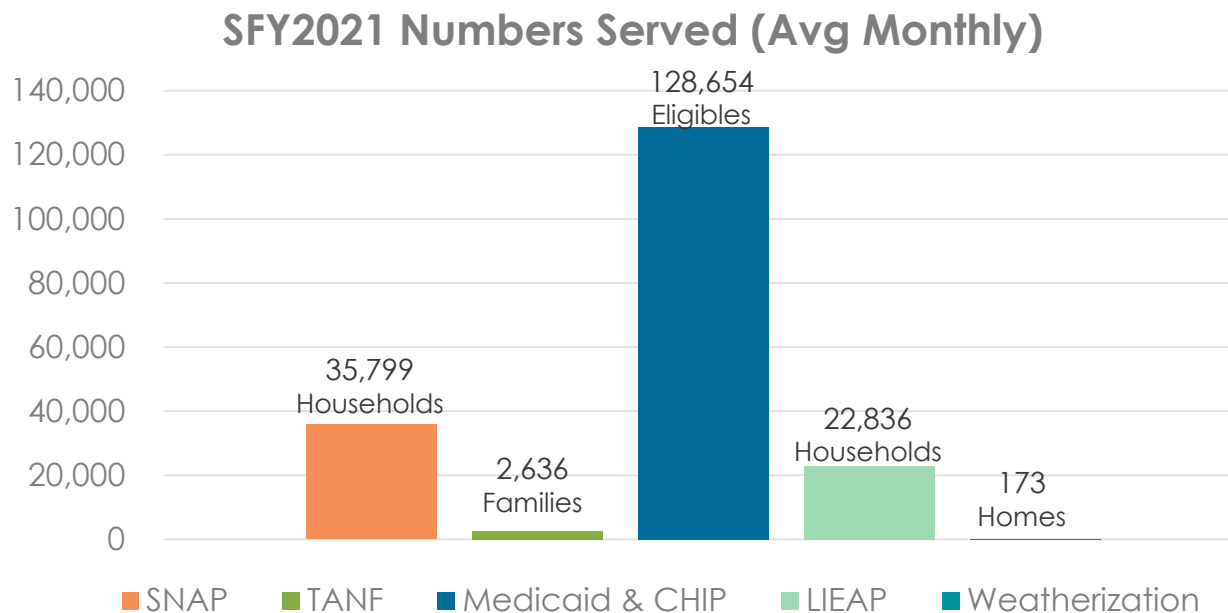
# Children and Family Services

- Division of Economic Assistance
- Division of Child Support
- Division of Child Protection Services
- Child Care Services

LRC Budget Brief Detail Pages 9-14 & 22-29

# Division of Economic Assistance

Division of Economic Assistance staff determine eligibility for short-term safety net programs for low-income families, pregnant women, children, elderly citizens and people with disabilities



- Eligibility determinations for programs includes SNAP, TANF, Medicaid, CHIP, and LIEAP
- Education assistance for youth in out-of-home placements
- Services to low-income individuals through Community Action Programs

# Division of Economic Assistance

Economic Assistance promotes wellbeing and provides supports to achieve self-sufficiency for individuals and families



## Supplemental Nutrition Assistance Program (SNAP)

- Helps low-income South Dakotans buy the food they need to stay healthy while they work to regain financial independence



## Temporary Assistance for Needy Families (TANF)

- Provides temporary assistance and economic self-sufficiency for children and families

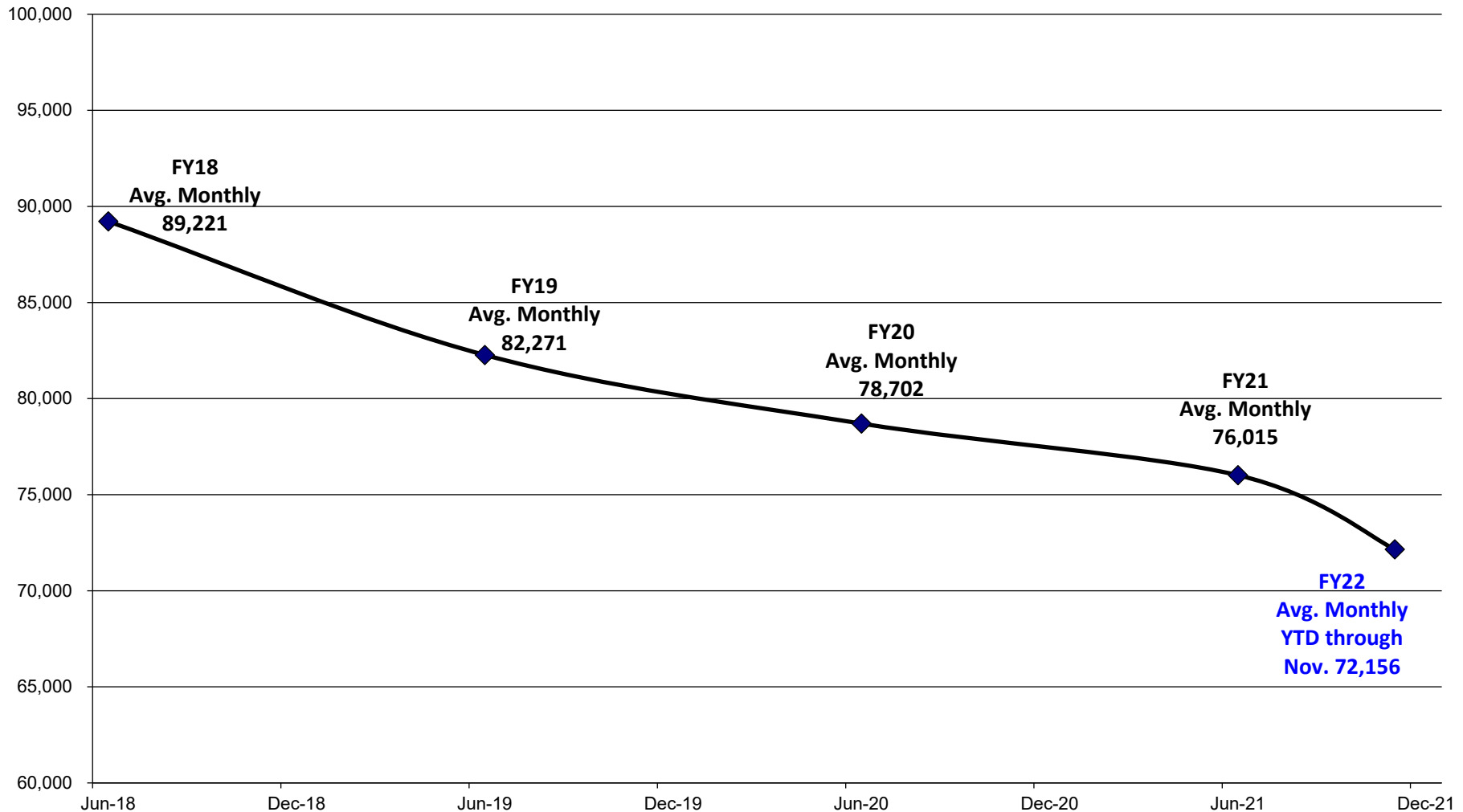


## Low Income Energy Assistance Program (LIEAP) & Weatherization

- Helps low-income South Dakotans pay for home heating costs and make their homes more energy efficient and assist with emergency utility/heat reconnect

# Division of Economic Assistance

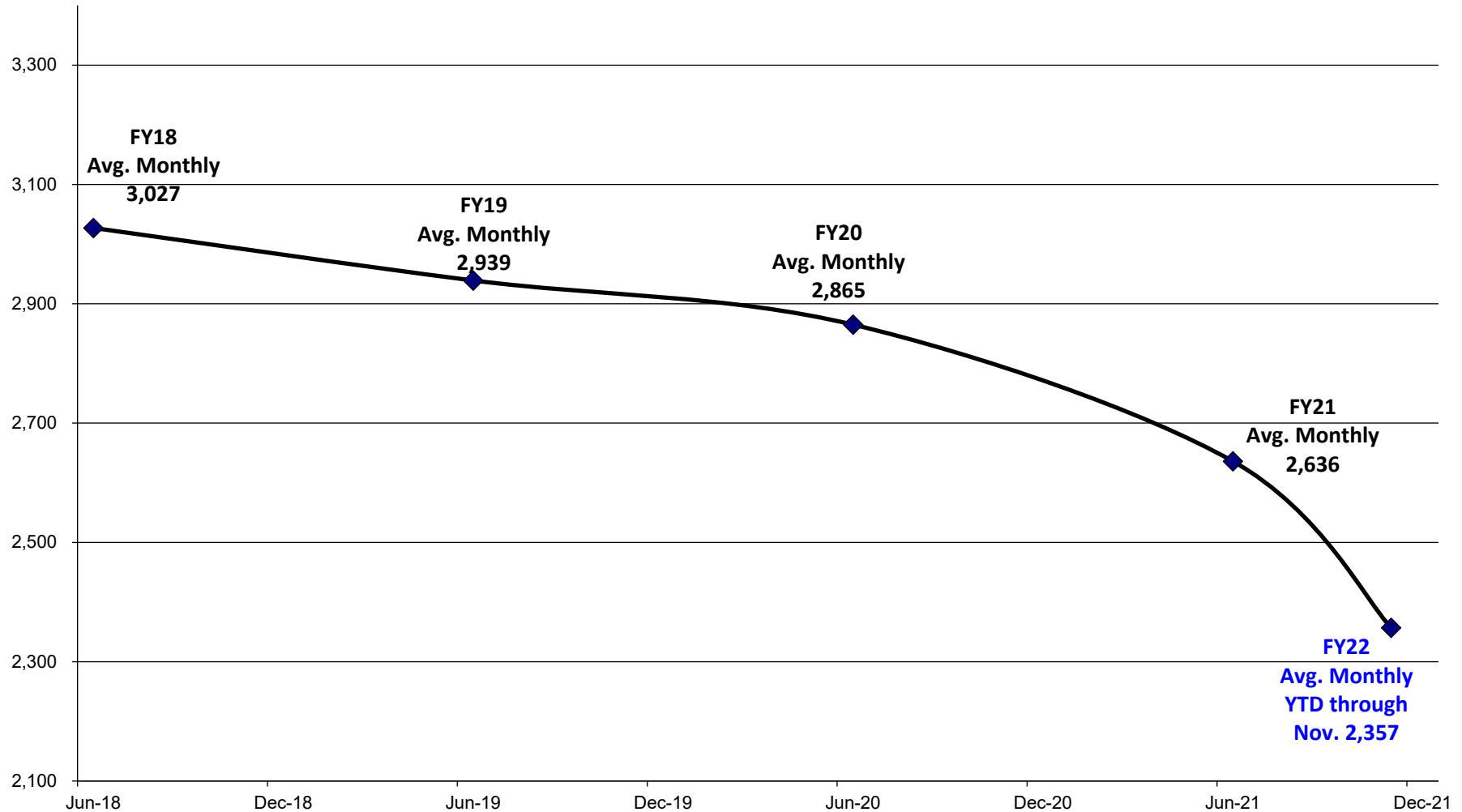
## Supplemental Nutrition Assistance Program – Avg. Persons





# Division of Economic Assistance

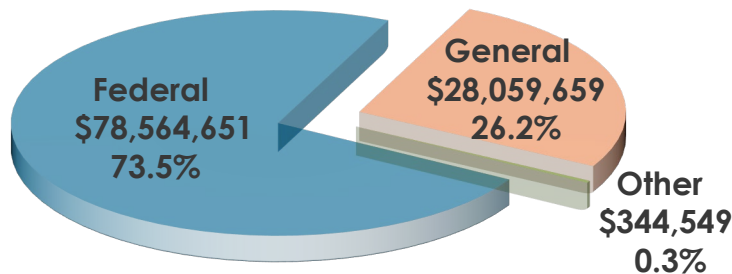
## Temporary Assistance for Needy Families (TANF) - Avg. Caseloads



# Division of Economic Assistance

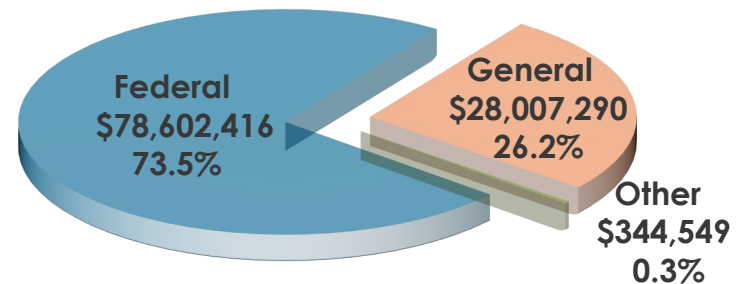
## FY2022 Budget Compared to FY2023

FY22 Operating Budget



Total: \$106,968,859 and 320.5 FTE

FY23 Recommended Budget



Total: \$106,954,255 and 320.5 FTE

### MAJOR BUDGET INCREASES AND DECREASES

	GENERAL	FEDERAL	OTHER	TOTAL
<b>FMAP - Federal Medical Assistance Percentage:</b>	\$9,785	(\$9,785)	\$0	\$0
<b>Discretionary Inflation:</b>	\$1,634,135	\$47,550	\$0	\$1,681,685
<b>One-Time Transfer:</b> Transfer general fund match for services for youth in state custody receiving services at community support providers and community intermediate care facilities to the Department of Human Services. Budget neutral with an offsetting increase in the DHS budget	(\$1,696,289)	\$0	\$0	(\$1,696,289)
<b>Totals:</b>	(\$52,369)	\$37,765	\$0	(\$14,604)

# Division of Child Support

The goal is to ensure parents take financial responsibility for their children

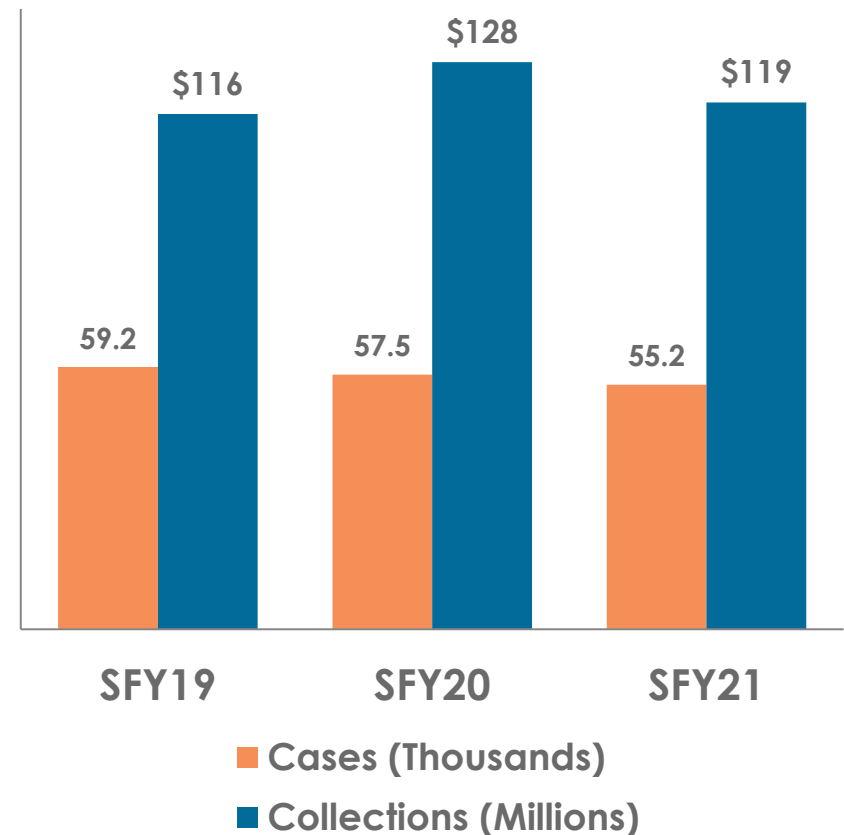
## Who we serve

- Over **55,000** families who need help to collect child support
- Adults with legal guardianship or custody of minor children

## Services provided

- Locate non-custodial parents
- Establish paternity and enforce child support orders
- Enforce health insurance coverage
- Assist with modification requests
- Collect and distribute child support payments

## Cases vs Collections



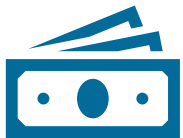
# Division of Child Support

The Division of Child Support (DCS) helps parents establish a financial partnership to support their children when they do not live together



The South Dakota Legislature established guidelines which courts must use to determine child support obligations.

The Commission on Child Support met in 2021 to review child support guidelines and child support related statutes. Legislation is being brought forward based on the Commission's recommendations.

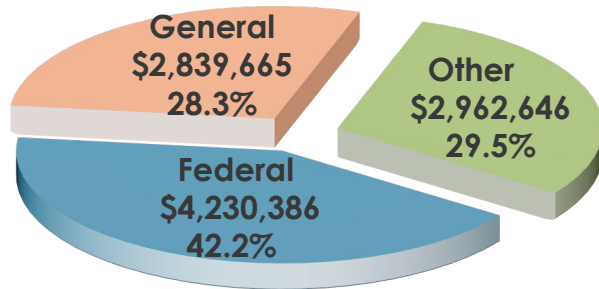


Custodial parents can have their child support payments deposited directly into their bank accounts or to an electronic debit card - most child support payments are the result of a wage withholding order issued to the non-custodial parent's employer.

# Division of Child Support

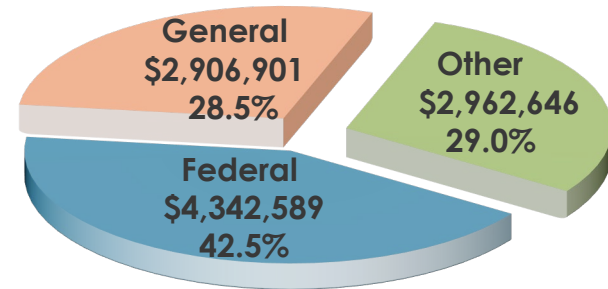
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$10,032,697 and 84.0 FTE**

**FY23 Recommended Budget**



**Total: \$10,212,136 and 84.0 FTE**

### MAJOR BUDGET INCREASES AND DECREASES

	GENERAL	FEDERAL	OTHER	TOTAL
Discretionary Inflation:	\$67,236	\$112,203	\$0	\$179,439
Totals:	\$67,236	\$112,203	\$0	\$179,439

# Division of Child Protection Services

## **Who we serve**

- Families referred due to threats of child safety relating to neglect, physical abuse, sexual abuse and emotional abuse

## **Services Provided:**

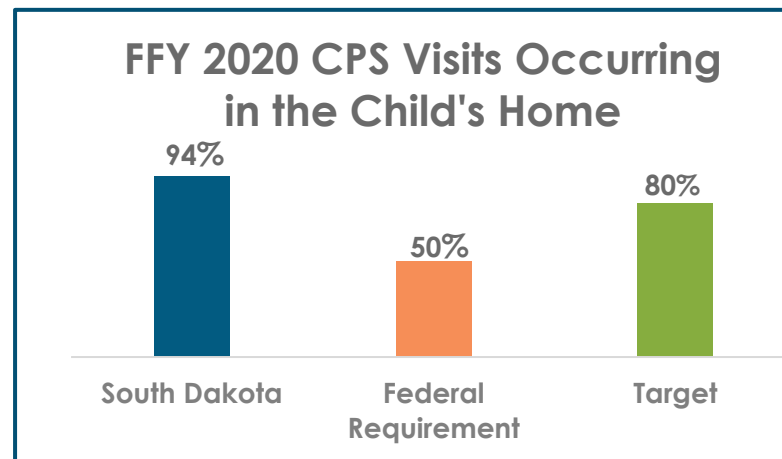
- Protective services
  - Intake of reports of child abuse and neglect
  - Family assessments
- Placement services: kinship, foster care, group care and residential treatment placement for children
- Independent living services for teens
- Parenting education
- Guardianship & Adoption
- Direct and referral services to maintain or reunite families

**Staffing:** CPS FY2021 Turnover 20.8%

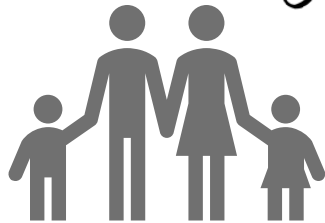
# Division of Child Protection Services

## Permanency and Safety for Children

- The Division of Child Protection Services' goal is to reunify families whenever possible
  - Results: Of children reunited, **71%** were reunited within 12 months of removal during SFY2021
    - When that is not possible, we work to establish guardianship or adoption to divert from foster care placement
- During FFY2021, **94%** of caseworker visits happened where the child resides – exceeding the federal requirement by **44%**



# Division of Child Protection Services



- One of our strongest partnerships is with the families in South Dakota who open their homes and hearts to children in need
- Governor Noem continues to raise awareness and educate people about the need for more foster families
- DSS collaborates with partners to provide children the stability they need
- A total of **163** families became newly licensed foster families in FY2021 compared to **238** in FY2020
- DSS ended FY2021 with **826** licensed foster families
- More foster parents are needed



# Division of Child Protection Services

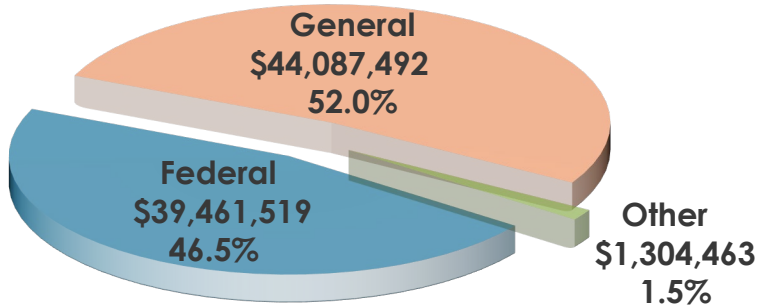
## Protecting Children through Adoption & Guardianship

- When children cannot be safely reunited with their parents, guardianship and adoption are permanency options for children
  - FY2021
    - **262** children were placed with adoptive families
    - **227** adoptions were finalized
    - **135** children were placed in guardianship
- There has been a **55%** increase in the number of children placed for adoption annually over the past 10 years from 169 in FY2011 to 262 in FY2021

# Division of Child Protection Services

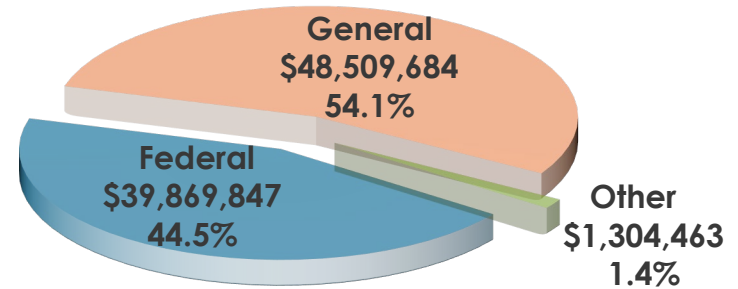
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$84,853,474 and 255.3 FTE**

**FY23 Recommended Budget**



**Total: \$89,683,994 and 255.3 FTE**

### MAJOR BUDGET INCREASES AND DECREASES

	GENERAL	FEDERAL	OTHER	TOTAL
<b>FMAP - Federal Medical Assistance Percentage:</b>	\$458,919	(\$458,919)	\$0	\$0
<b>Discretionary Inflation:</b>	\$1,943,082	\$779,034	\$0	\$2,722,116
<b>Subsidized Adoptions &amp; Subsidized Guardianships:</b> Expansion to meet anticipated growth (86 additional adoptions) and (37 additional guardianships).	\$1,566,287	\$542,117	\$0	\$2,108,404
<b>Federal Policy Change:</b> General funds with an off-setting federal fund reduction of IV-E funding based on eligibility for Group Care Services.	\$453,904	(\$453,904)	\$0	\$0
<b>Totals:</b>	\$4,422,192	\$408,328	\$0	\$4,830,520

### FY2022 General Bill Amendments:

	GENERAL	FEDERAL	OTHER	TOTAL
<b>FY22 Enhanced FMAP:</b> 3 quarters of general fund savings due to enhanced 6.2% FMAP	(\$764,193)	\$764,193	\$0	\$0

# Child Care Services

Child Care Services provides child care subsidies to low-income families so they can work and go to school.

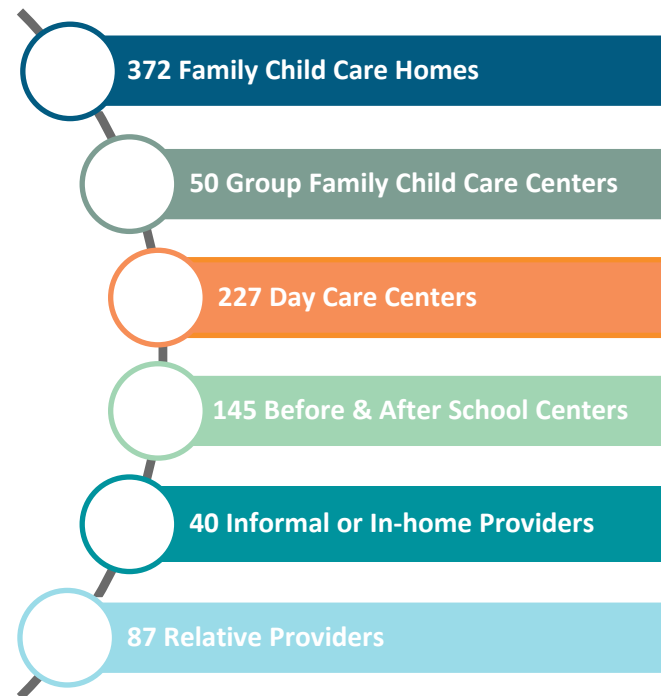
## Who we serve

- Low-income families with children
  - ☐ Average monthly families served **1,814**
- Child care providers
- Parents seeking information on child and safety seats

## Services provided

- Child Care Assistance Program
- Provider licensing and registration
- Provider professional development

## FY2021 Child Care Providers



# Child Care Services

The availability of quality child care is not only important for maintaining a strong workforce – it is vital for the growth and development of healthy children



## Eligibility for Assistance

- Work or school



## Selecting a Provider

- Regulated Provider
- In-Process Provider
- Relative
- In-Home Provider
- Informal Care



## Child Care Hours

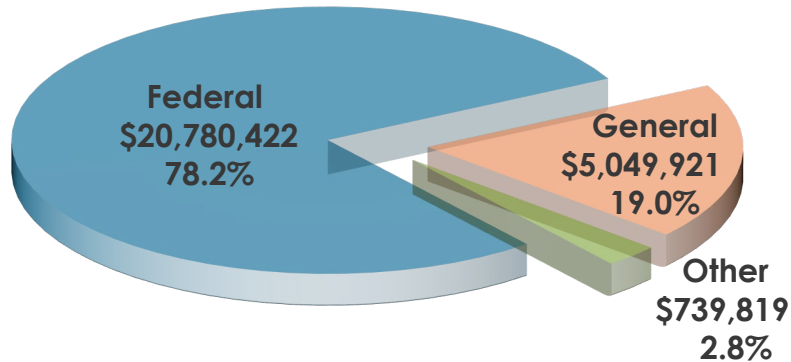
- Maximum of 210 hours per child per month



# Child Care Services

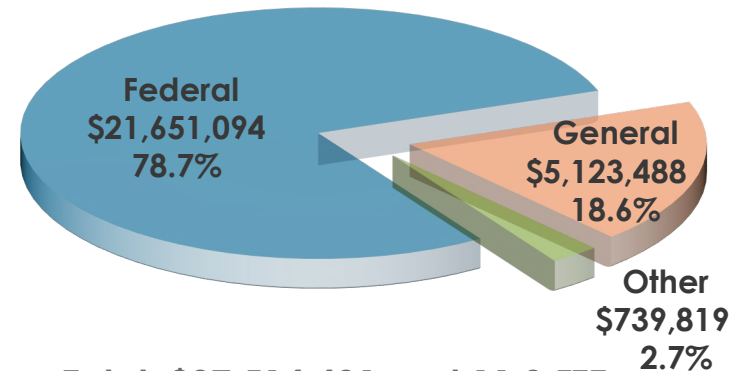
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$26,570,162 and 11.0 FTE**

**FY23 Recommended Budget**



**Total: \$27,514,401 and 11.0 FTE**

### MAJOR BUDGET INCREASES AND DECREASES

	GENERAL	FEDERAL	OTHER	TOTAL
<b>Child Care Block Grant Match: (Corresponds to the FMAP rate)</b>	\$73,567	(\$73,567)	\$0	\$0
<b>Discretionary Inflation:</b>	\$0	\$944,239	\$0	\$944,239
<b>Totals:</b>	\$73,567	\$870,672	\$0	\$944,239

# Behavioral Health

LRC Budget Brief Detail Pages 30-39

# Human Services Center (HSC)

The goal is to help individuals with behavioral health needs, who can't be served in less restrictive settings, stabilize and return to the community.

## Who we serve

- Individuals ages 12 to end of life who are unable to be served by other providers – a less restrictive environment is not an option for care
- Majority of admissions are involuntary - **87%**
  - In FY2021, there was an average daily census of **158** with **1,188** admissions

## Services provided

- Adult and adolescent inpatient psychiatric treatment
- Adult inpatient substance use disorder treatment
- Licensed nursing facility
- Court ordered competency restoration at HSC

## Staffing

- HSC FY2021 Turnover: **26.2%**
- HSC contracts services for RN's and Aides due to positions that cannot be filled

## Service delivery



Each patient is assigned a psychiatric provider who is responsible for coordination of treatment:

- Provides appropriate, individualized treatment services which meet the unique and changing needs of patients
- Enables individuals to achieve their highest potential level of functioning

Treatment teams are used to plan, implement, and evaluate treatment:



- Patient and his/her family and/or significant others
- Psychiatric provider
- Nurse
- Social Worker

Discharge planning and arrangements for aftercare



- Achieves enhanced program integration with other public and private agencies in order to provide successful transition of treatment services for individuals between inpatient and outpatient settings



## ***Operations Analysis Recommendations***

- Institute discrete units and staff assignments
  - Convert one of the three 23-bed Licensed Nursing Home Units to a Geropsychiatric Inpatient Unit
  - Dedicate a unit for competency restoration
- Increase community-based outpatient restoration and jail-based restoration services
- Align staff assignment and competency
- Utilize facility space to support therapeutic and programmatic environments
- Use performance improvement to identify and solve problems
- Enhance academic affiliations

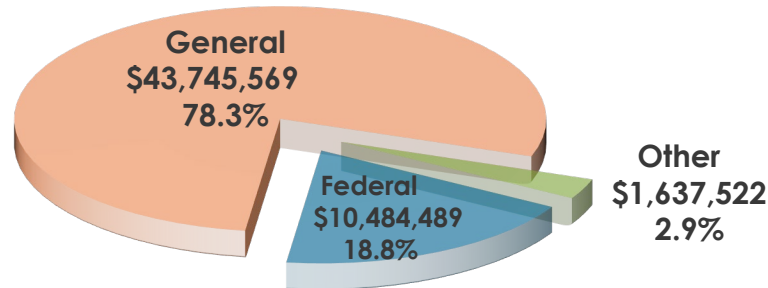
## ***Competency Restoration***

- FY21 – 29 individuals served
  - Additional 10 outpatient
- FY22 year to date – 17 individuals served
  - Additional 3 outpatient
  - Additional 9 jail-based

# Human Services Center

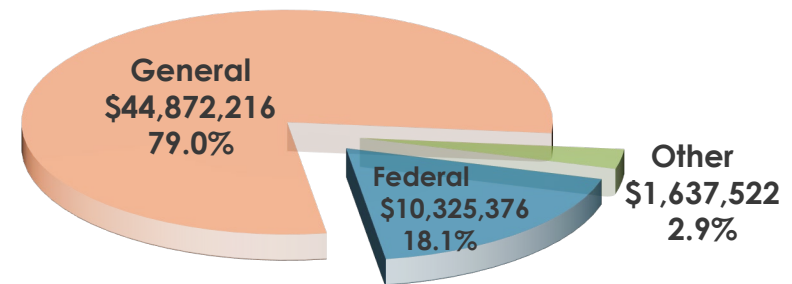
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$55,867,580 and 550.0 FTE**

**FY23 Recommended Budget**



**Total: \$56,835,114 and 550.0 FTE**

### MAJOR BUDGET INCREASES AND DECREASES

	GENERAL	FEDERAL	OTHER	TOTAL
FMAP - Federal Medical Assistance Percentage:	\$159,113	(\$159,113)	\$0	\$0
Mandatory Inflation:	\$475,452	\$0	\$0	\$475,452
Discretionary Inflation:	\$284,448	\$0	\$0	\$284,448
Food Service & Utility Costs: Based on projected costs.	\$207,634	\$0	\$0	\$207,634
<b>Totals:</b>	<b>\$1,126,647</b>	<b>(\$159,113)</b>	<b>\$0</b>	<b>\$967,534</b>

### FY2022 General Bill Amendments:

	GENERAL	FEDERAL	OTHER	TOTAL
<b>FY22 Enhanced FMAP:</b> 3 quarters of general fund savings due to enhanced 6.2% FMAP	(\$552,678)	\$552,678	\$0	\$0
<b>Utilities:</b> Increase based on utilization and projected utility rates from the Office of the State Engineer	\$59,226	\$0	\$0	\$59,226
<b>HSC Payroll:</b> Payroll expenses for substantially dedicated public health at HSC utilizing COVID-19	(\$9,569,688)	\$9,569,688	\$0	\$0

# Community and Correctional Behavioral Health

The goal is to support individuals and families with behavioral health needs to remain in their communities

## Who we serve

- In SFY2021, **16,862** children and adults with serious mental illnesses received publicly funded mental health services
- In SFY2021, **11,189** adolescents and adults received publicly funded substance use disorder services
- Youth and young adults in need of prevention services
- Inmates in state correctional facilities in need of behavioral health services
  - In SFY2021, about **2,000** offenders were assessed for behavioral health needs

## Services provided

- Through contracts with accredited agencies:
  - Outpatient Mental Health Services
  - Inpatient and Outpatient Substance Use Disorder Treatment Services
  - Prevention Services
- DBH staff provide assessment, mental health/substance use disorder treatment, psychiatric, and release planning services to offenders incarcerated in DOC prison facilities

# Community and Correctional Behavioral Health



## Community Behavioral Health

- Screenings and assessments
- Crisis intervention
- Outpatient mental health services
- Outpatient and residential substance use disorder services



## Prevention

- Technical assistance
- Services and training to promote wellness



## Correctional Behavioral Health

- Intake screenings
- Assessments and evaluation
- Crisis management and intervention
- Group and individual therapy
- Consultation with Department of Corrections staff
- Treatment plan development
- Counseling for adult offenders
- Staff training and education
- Discharge planning

# Community and Correctional Behavioral Health

## Awareness:

- Increase awareness of behavioral health issues
- Promote resources for prevention, treatment, and recovery

## Prevention:

- Evidence-based curriculums in communities and schools
- Community prevention and education activities
- Training to support substance use and suicide prevention

## Treatment:

- Evidence based treatment models
- Outpatient mental health
- Inpatient and outpatient substance use disorder treatment
- Support services that enhance treatment success such as sober living homes



# Community and Correctional Behavioral Health



Federal grant funds available through September 2023

- Anticipate another federal iteration of the grant to be made available to states

Our strategies related to youth include:

- Deliver evidence-based opioid awareness and education programming to middle and high school youth in partnership with community-based coalitions and the Prevention Resource Centers across SD.
- Support public awareness efforts that feature personal testimonials from individuals with lived experience that reflect the cultural and geographic diversity of South Dakota.



**Lucas: I knew something was wrong.**



**Melanie: Opioids — you cannot outsmart them.**

### MEDIA CAMPAIGN MATERIALS



Campaign materials include a website, social media, and PSAs, as well as print materials, such as brochures, business cards, and display materials.

### STRATEGIES

-  Broadcast PSAs and other forms of media, including video testimonials featuring South Dakotans with lived experience and feature stories regarding treatment approaches and access.
-  Deliver targeted messaging for American Indian youth and adults regarding the dangers of opioid misuse via the GoodHealthTV™ closed network.
-  Promote opioid awareness and education using targeted social media strategies.
-  Continue promotion of the statewide opioid education and prevention website and share relevant, up-to-date information.

If you or someone you know is struggling with addiction – don't wait. Reach out.

[www.AvoidOpioidSD.com](http://www.AvoidOpioidSD.com)  
Treatment Resource Hotline  
1-800-920-4343

To learn more about prevention activities within your community, please contact DSS, Division of Behavioral Health at 605-367-5236.

Funding for this material was made possible by Tobacco from SAMHSA. The views expressed in written materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

Updated 10/2021

# Behavioral Health Service Delivery Transformation

	GENERAL	FEDERAL	OTHER	TOTAL
<b>Behavioral Health Service Delivery Transformation (SFY23):</b> Funding to support development of regional behavioral health centers.	\$0	\$3,750,000	\$0	\$3,750,000

- \$3,750,000 funded over four years for a total of \$15,000,000
- The current system provides a variety of treatment and prevention services but does not include comprehensive crisis response model
- Without comprehensive regional mental health supports in place, individuals in mental health crisis are often involuntarily committed to inpatient psychiatric hospitals when they could be served in a less restrictive setting closer to their home and community
- Adding to previous investments in short-term crisis stabilization services through Appropriate Regional Facilities (ARF) in Yankton, Watertown, and Pennington County, this project seeks to further expand ARF as well as other behavioral health service capacity statewide
- The approach creates integrated regional behavioral health centers that could include crisis stabilization, residential substance use treatment services, and transitional housing. This project includes funding for construction of new facilities or expanding/renovating existing facilities across the state

# Behavioral Health Service Delivery Transformation

South Dakotans who are experiencing a behavioral health crisis are met with a law enforcement or EMT response. Without regional mental health supports in place, individuals in mental health crisis are often involuntarily committed to inpatient psychiatric hospitals when they could be served in a less restrictive setting.

- Admissions for 5-day emergency mental illness holds to the Human Services Center (HSC) average over 600 annually
- 35% of admissions to HSC are discharged in five days or less which is the population that would be best served regionally
- Diverts individuals who are experiencing a behavioral health crisis from emergency departments, jail settings with services near their home/community
- Aligns with national trends as well as recommendations by the Mental Health Task Force



# Behavioral Health Service Delivery Transformation

- Current service model includes 11 community mental health centers and over 40 accredited substance use disorder providers serving geographic catchment areas
- Focus is on treatment and prevention services but lacks having a comprehensive crisis response/diversion model in place
- Supporting individuals in crisis with an integrated model builds a continuum of care vs relying upon inpatient psychiatric care and/or inappropriate placement
- Hospitals will also support this effort to the extent that it reduces emergency room utilization
- Provides a coordinated approach to support sufficient capacity for all regions of South Dakota

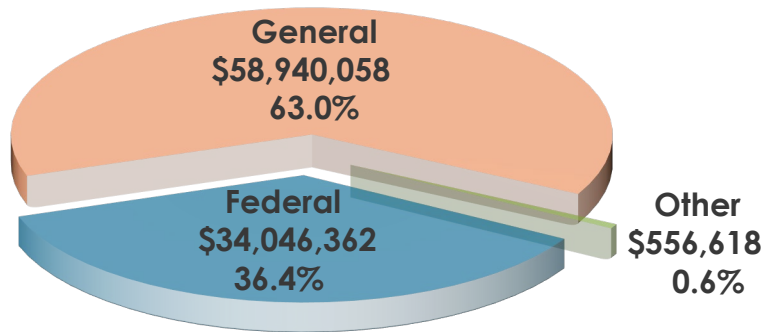
# Behavioral Health Service Delivery Transformation

- Funding to build/develop/expand regional centers across the state with infrastructure and ongoing funding to support services
- Federal funds (one-time ARPA) infrastructure development:
  - Central Region
  - Southeast Region
  - South Central Region
  - Northeast Region
  - Western Region
- Focus in FY23 will be to identify and support needs of projects underway with priority provided to regions where gaps exist (Central Region, South Central Region, Northeast Region)
- Soliciting proposals from stakeholders
- Evaluating ongoing general funds needed in FY24

# Community Behavioral Health

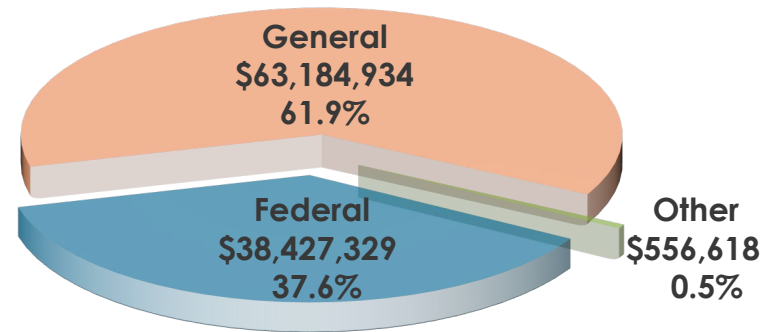
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$93,543,038 and 25.0 FTE**

**FY23 Recommended Budget**



**Total: \$102,168,881 and 25.0 FTE**

### MAJOR BUDGET INCREASES AND DECREASES

	GENERAL	FEDERAL	OTHER	TOTAL
<b>FMAP - Federal Medical Assistance Percentage:</b>	\$392,108	(\$392,108)	\$0	\$0
<b>Discretionary Inflation:</b>	\$3,852,768	\$1,023,075	\$0	\$4,875,843
<b>Behavioral Health Service Delivery Transformation:</b>	\$0	\$3,750,000	\$0	\$3,750,000
<b>Totals:</b>	\$4,244,876	\$4,380,967	\$0	\$8,625,843

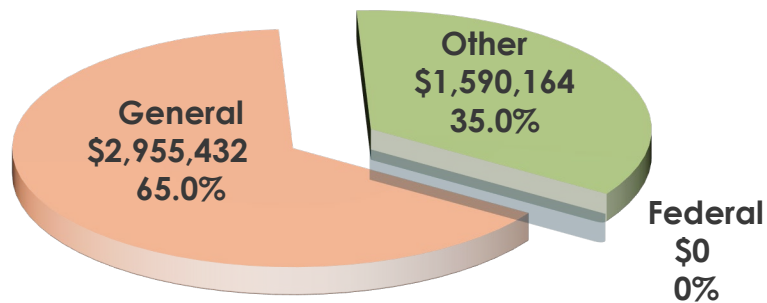
### FY2022 General Bill Amendments:

	GENERAL	FEDERAL	OTHER	TOTAL
<b>FY22 Enhanced FMAP:</b> 3 quarters of general fund savings due to enhanced 6.2% FMAP	(\$1,366,328)	\$1,366,328	\$0	\$0
<b>One-time funding to enhance certain Home and Community-Based Services (HCBS):</b> SFY22 temporary 10% enhanced federal medical assistance percentage (FMAP). (Medicaid Services provided by Mental Health & Substance Use Providers)	\$0	\$6,690,562	\$0	\$6,690,562

# Correctional Behavioral Health

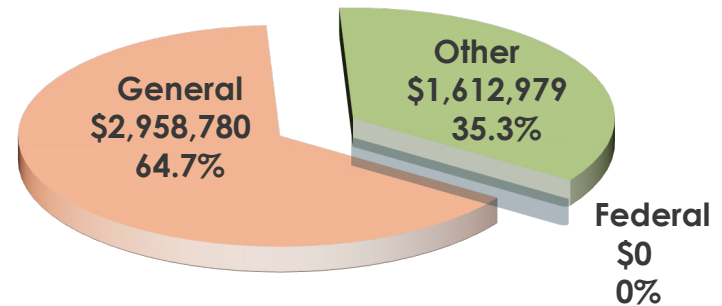
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$4,545,596 and 55.0 FTE**

**FY23 Recommended Budget**



**Total: \$4,571,759 and 55.0 FTE**

### MAJOR BUDGET INCREASES AND DECREASES

### GENERAL FEDERAL OTHER TOTAL

Discretionary Inflation:	\$3,348	\$0	\$22,815	\$26,163
Totals:	\$3,348	\$0	\$22,815	\$26,163

# Office of the Secretary

The Office of the Secretary includes the Secretary, Deputy Secretary, Legal Services, Finance and key operational and administrative support for the entire department



## Deputy Secretary/Chief of Operations

- **Operations** manages facility operations for DSS offices throughout the state and leads the agency equipment and technology needs
- **Office of Licensing and Accreditation** provides licensing, registration and accreditation of service providers including child care, behavioral health, foster homes, and residential treatment providers



## Legal Services

- Provides legal assistance to the Secretary and all divisions of the Department
  - Administers abuse and neglect appeals to the South Dakota Supreme Court, discrimination complaints, requests for public records, and compliance with the Health Insurance Portability and Accountability Act (HIPAA)
  - Administrative Hearings



## Finance Office

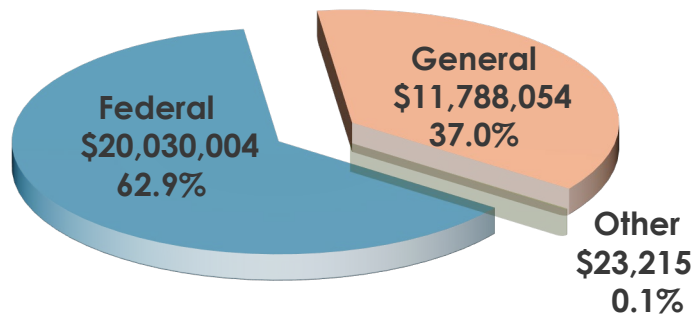
- Provides support services to oversee and manage the Department's budget and financial operations, administers the agency's benefit fraud investigation program and third-party liability recovery

# Office of the Secretary

LRC Budget Brief Detail Pages 4-8

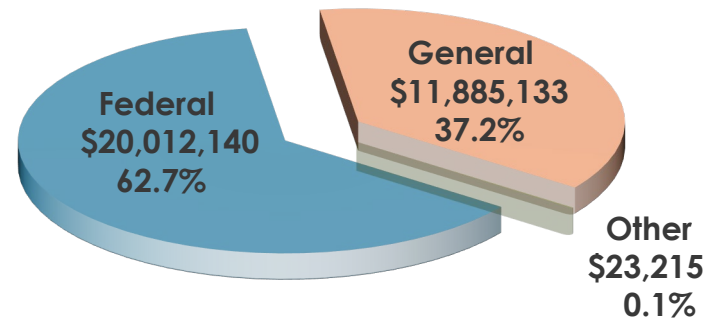
## FY2022 Budget Compared to FY2023

**FY22 Operating Budget**



**Total: \$31,841,273 and 205.2 FTE**

**FY23 Recommended Budget**



**Total: \$31,920,488 and 205.2 FTE**

### MAJOR BUDGET INCREASES AND DECREASES

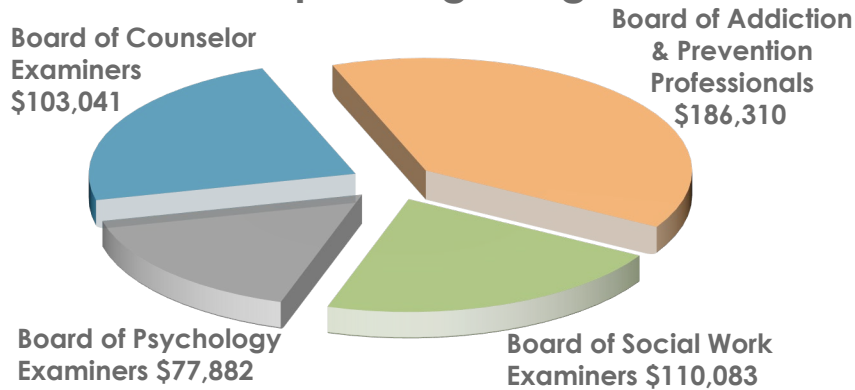
	GENERAL	FEDERAL	OTHER	TOTAL
<b>FMAP - Federal Medical Assistance Percentage:</b>	\$28,847	(\$28,847)	\$0	\$0
<b>Discretionary Inflation:</b>	\$68,232	\$10,983	\$0	\$79,215
<b>Totals:</b>	\$97,079	(\$17,864)	\$0	\$79,215

# Department of Social Services – Boards

LRC Budget Brief Detail Pages 40-55

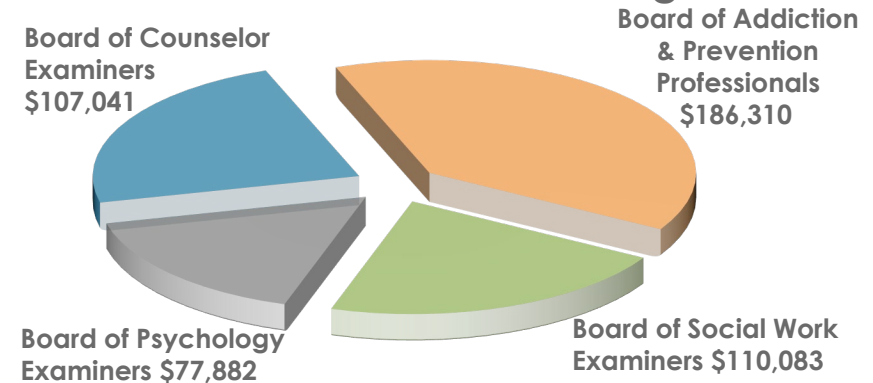
## FY2022 Budget Compared to FY2023

### FY22 Operating Budget



Total: \$477,316 and 1.3 FTE

### FY23 Recommended Budget



Total: \$481,316 and 0 FTE

### MAJOR BUDGET INCREASES AND DECREASES

### GENERAL FEDERAL OTHER TOTAL

<b>Board of Counselor Examiners:</b> Increase for the annual maintenance support and hours related to the online renewal system.	\$0	\$0	\$4,000	\$4,000
<b>Board of Psychology Examiners:</b>	\$0	\$0	\$0	\$0
<b>Board of Social Work Examiners:</b>	\$0	\$0	\$0	\$0
<b>Board of Addiction &amp; Prevention Professionals:</b> Align authority for the board by reducing Personal Services and moving authority to operating for the Management Consultant. (1.3) FTE	\$0	\$0	\$0	\$0
<b>Totals:</b>	<b>(1.3) FTE</b>	<b>\$0</b>	<b>\$0</b>	<b>\$4,000</b>

# General Bill Amendments – One Time

## FY2022 General Bill Amendments:

	GENERAL	FEDERAL	OTHER	TOTAL
<b>Change in Title XIX (Medicaid) and Title XXI (CHIP):</b> Increase based on revised estimates for FY22.	\$25,371,738	\$41,201,240	\$0	\$66,572,978
<b>HSC Utilities:</b> Increase based on utilization and projected utility rates from the Office of the State Engineer	\$59,226	\$0	\$0	\$59,226
<b>FY22 Enhanced FMAP:</b> 3 quarters of general fund savings due to enhanced 6.2% FMAP	(\$26,344,073)	\$26,344,073	\$0	\$0
<b>Medicare Part D Clawback Savings:</b> Related to enhanced 6.2% FMAP	(\$2,511,000)	\$0	\$0	(\$2,511,000)
<b>Federal Pandemic Grants:</b>	\$0	\$182,280,689	\$0	\$182,280,689
<b>Human Services Center Payroll:</b> Payroll expenses for substantially dedicated public health at HSC utilizing COVID-19	(\$9,569,688)	\$9,569,688	\$0	\$0
<b>One-time funding to enhance certain Home and Community Based Services (HCBS):</b> Temporary 10% enhanced FMAP. (Medicaid Services provided by Mental Health & Substance Use Providers, & Private Duty Nursing Providers)	\$0	\$12,900,000	\$0	\$12,900,000
<b>Total:</b>	<b>(\$12,993,797)</b>	<b>\$272,295,690</b>	<b>\$0</b>	<b>\$259,301,893</b>



# **DSS Federal Pandemic Grants**

## **(General Bill Amendments FY2022)**

# DSS Federal Pandemic Grants – FY2022

## Pandemic Grants: (General Bill Amendments)

FY2022  
FEDERAL TOTAL

<b>Economic Assistance:</b> Low Income Energy Assistance Program, Community Services Block Grant (CSBG), Supplemental Nutrition Assistance (SNAP) Administrative Funds, Temporary Assistance to Needy Families (TANF)	\$34,310,411
<b>Child Protection Services:</b>	\$1,880,558
<b>Child Care:</b>	\$126,941,638
<b>Human Services Center (HSC):</b>	\$2,699,945
<b>Community Behavioral Health:</b> Emergency Grant, Community Mental Health Block Grant, and Substance Abuse and Prevention & Treatment Block Grant	\$16,448,137
<b>Federal Pandemic Grants:</b>	<b>\$182,280,689</b>

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**LIEAP - \$27,194,682**

- One-time funding through American Rescue Plan Act (ARPA)
- Low Income Energy Assistance Program. Additional federal funding to assist low-income families with energy costs consistent with current program
- One-time
  - Benefit increases to address rising energy costs
  - Increased funding for additional furnace repair and replacement, emergency reconnect for utilities/water
  - Remaining funding provides a one-time summer cooling benefit to LIEAP eligible households that did not already receive LIEAP for electric heat
- ❖ Funding is one-time and benefit levels will be adjusted following heating season to align with available federal funds

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## Community Services Block Grant - \$3,243,819

- One-time federal funding through American Rescue Plan Act
- One-time Supplemental funding to help prevent, prepare for, or respond to the coronavirus. Funds were distributed to Community Action Agencies to provide a variety of services and supports such as help with rent, utilities, transportation, employment assistance, etc. (same services and supports as regular CSBG)
- Once one-time funding is expended, funding levels to Community Action Agencies adjusted to align with available federal funds
- ❖ Funding is one-time and supplemental funding to Community Action Agencies will be adjusted to align with available federal funds

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## SNAP Admin. - \$1,586,284

- Supplemental Nutrition Assistance (SNAP) Administrative Funds – One-time federal funds to support administrative costs to implement federal SNAP pandemic programs
- Funding used for one-time technology changes for implementation of:
  - ❑ Pandemic – Electronic Benefit Transfer (EBT) for children who would have been eligible for free and reduced school lunch
  - ❑ Emergency SNAP Maximum Monthly Benefit
- ❖ These are one-time initiatives that will not continue once the funding ends

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## TANF - \$2,285,616

- Temporary Assistance to Needy Families (TANF)- Funding distributed to provide a one-time benefit to qualifying TANF households who currently receive TANF
- Funding through the American Rescue Plan Act and Consolidated Appropriations Act to assist needy families impacted by COVID
- Payments were issued October 6<sup>th</sup>, 2021
  - One-time benefit amount was \$510 for each eligible child
  - Benefits were issued to 2,465 households with 4,490 children
- ❖ These are one-time benefit increases that will not continue once the funding ends

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## Child Protection Services - \$1,880,558

- One-time funding targeted to providing independent living supports for youth in foster care transitioning to adulthood, post secondary education support (books, tuition, etc.)
- Additional parenting education materials and training, funding for transportation costs, family visitation and technology to support virtual visits, and direct assistance to families to address pandemic related impacts
- Provided additional funding in child welfare for general Child Protection Services utilized to support families who may be experiencing higher needs during the pandemic
- Community-based efforts to develop, operate, expand, enhance, and coordinate initiatives, programs and activities to prevent child abuse and neglect
- ❖ These are one-time initiatives that will not continue once the funding ends

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## DSS Child Care Investments

Investment 1: Access

Investment 2: Advancing  
Quality

Investment 3:  
Affordability

Investment 4: Workforce

Investment 5: System  
Supports

Investment 6: Educate  
& Communicate



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## Child Care - \$126,941,638

- \$26 million in remaining one-time funding provided through the Coronavirus Response and Relief Supplemental Appropriations and American Rescue Plan Acts
- Continuation of activities included in FY21 appropriation:
  - Stabilization grants, child care credit directly to families to offset child care, elimination of cost share, funding to increase subsidy payments to relative providers
  - Business Tax Support, mental health supports, payment of CPR and other training/certification fees for employees of child care providers, and child development scholarships
- ❖ These are one-time initiatives that will not continue once the funding ends

# DSS Federal Pandemic Grants – FY2022

## Child Care (continued)

\$100 million in funding

- \$91 million will be paid to providers for grants
  - \$61 million in stabilization funding to temporarily cover operating and other expenses
    - Application portal opened December 13, 2021
    - First payment distribution slated for January 2022
    - Potential 2nd distribution depending on application volume slated for February 2022
  - \$30 million in other grants to provide start up funding for new daycares, and funding to enhance current daycares with new equipment, more efficient operations, etc.
    - Application portal slated to open in February 2022
- \$9 million will be used to address workforce challenges with a workforce study, funding for communities and businesses that want to start new daycares, and updating technology and infrastructure to make it easier for child care providers to report information and receive payments

# DSS Federal Pandemic Grants – FY2022

## Human Service Center (HSC) - \$2,699,945

- One-time provider relief funds used for equipment, facility projects, and supplies related to COVID-19 prevention and treatment
  - Screening kiosks checking for symptoms at each campus entry point, upgraded air filtration, and air duct cleaning, iPads for remote visitation, upgrading to keycard access to campus to allow internal contact tracing, emergency response carts.
- ❖ These are one-time projects that will not continue once the funding ends

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## Community Behavioral Health - \$16,448,137

- **Emergency Grant** to Address Mental and Substance Use Disorder during COVID-19 supports crisis intervention services, mental and substance use disorder treatment and other related recovery supports for children and adults impacted by COVID-19
  - Activities include the purchase of PPE, telehealth equipment, recovery supports and the Behavioral Health Voucher Program
- ❖ These are one-time initiatives that will not continue after funding ends

# DSS Federal Pandemic Grants – FY2022

## Community Behavioral Health (continued)

- **Community Mental Health Block Grant** Supplemental Funding to assist in the State's Response to the COVID-19 Pandemic
  - Activities support services and access to existing services to assist with filling a void for individuals with mental health related issues
    - ❑ Expand crisis care services and telehealth services
    - ❑ Support Suicide Prevention Trainings and host a statewide suicide prevention conference to promote resources, highlight bright spots, and share programming efforts
    - ❑ Expand Systems of Care to support the needs of children, youth, and families
    - ❑ Implement evidence-based peer support specialist services
    - ❑ Create a targeted campaign to raise awareness around general behavioral health service and supports
    - ❑ Implement the Wellness Recovery Action Plan evidence-based model across Community Mental Health Centers
    - ❑ One-time mini grants to contracted providers to support staff training, technical assistance, or other community-identified mental health needs
    - ❑ Support behavioral health workforce development efforts
    - ❑ Modernize the indigent med application process for providers by developing a secure web-based platform.
    - ❑ Support training and technical assistance for Community Mental Health Centers
- ❖ Will evaluate effectiveness of these initiatives to determine any ongoing funding needs

# DSS Federal Pandemic Grants – FY2022

## Community Behavioral Health (continued)

### ➤ Substance Abuse Prevention and Treatment Block Grant

Supplemental Funding to assist in the State's Response to the COVID-19 Pandemic

- Activities support services that will assist with filling a void for individuals with substance misuse related issues as well as raising awareness around resources available
  - ❑ Implementing structured case management for individuals receiving substance use disorder services
  - ❑ Creating a targeted behavioral health campaign to raise awareness around general behavioral health services and supports
  - ❑ Enhance medical detoxification services
  - ❑ Expanding crisis care services, supported housing services and telehealth services Implement evidence-based peer support specialist services
  - ❑ Support workforce development efforts
  - ❑ Support contracted substance use disorder treatment and prevention provider's local behavioral health awareness efforts
  - ❑ Continue to support training and technical assistance for contracted treatment & prevention providers
- ❖ Will evaluate effectiveness of these initiatives to determine any ongoing funding needs

# Special Appropriation Bill

## ***ARPA Funding – Water and Sewer Projects at State Facilities***

- BOA special appropriation that includes \$800,000 in federal funding for sewer replacement at the Human Services Center as part of the Governor's plan for funding environmental infrastructure projects at state facilities
- The entire sewer outside of the Mickelson Center for the Neurosciences campus needs replacement
  - Replace double septic with a water separator, prior to discharging into sewer
- Office of the State Engineer will oversee project
- There will be a bill hearing to discuss these projects



# Thank You

## Contact Information

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