

Application for Assistance Guidebook

NORTH
Dakota | Health & Human Services
Be Legendary.

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General Information

What programs can I apply for?

You may apply for any or all of these programs with this application:

- Temporary Assistance for Needy Families (TANF)
- Child Care Assistance Program (CCAP)
- Supplemental Nutrition Assistance Program (SNAP)
- Medicaid including Medicaid Expansion and Optional Children's Group formerly known as Healthy Steps,
- Medicare Savings Programs,
- Refugee Medical Assistance, and
- Aid to the Blind – Remedial Program
- Basic Care Assistance Program (BCAP)

The 'Application for Assistance' can also be found online at <https://www.nd.gov/eforms/Doc/sfn00405.pdf> or you may contact your local Human Service Zone office to apply or to request an application by mail.

If you need help applying for assistance, you may have a friend, relative or someone else help you apply. Your local Human Service Zone office can also help you apply for assistance. CCAP. For SNAP applications, Great Plains Food Bank can also offer assistance.

What do you do with my information?

The information you provide is held in confidence and is used solely for the purpose of program administration.

What information do I need to provide?

To speed up the processing of your application, include the following "Proof of" items with your application or bring them to your interview. Your eligibility worker may be able to help you obtain these things if needed.

Proof of Alien or Citizenship Status (original documents required if applying for Medicaid):

- Permanent Resident Card (Form I-551)
- Employment Authorization Document (Form I-766)
- American Indian/Alaskan Native Tribal Document
- Arrival-Departure Record (Form I-94)
- Passport
- Birth Certificate (if born in the United State

You will be asked to provide information about the Social Security number (SSN) and citizenship or immigration status for all persons for whom you want to receive assistance. This information may be subjected to verification by the United States Citizenship and Immigration Service (USCIS), and the information received from USCIS may affect the household's eligibility and level of benefits. For Medicaid, verification will be required if not available electronically.

- For CCAP, Medicaid, and SNAP: if an individual in the household does not want to give information about their citizenship or immigration status, they will not be eligible for benefits. Individuals who do not provide citizenship or immigration status information must still provide their financial information to determine eligibility for other household members. Other household members may still get benefits if they are otherwise eligible.
- For TANF: if an individual who is required to be included in the TANF household does not want to give information about their SSN, citizenship or immigration status, the entire household will be ineligible to receive benefits.

Proof of the value of current assets such as:

- Annuities
- Business Accounts
- Certificates of Deposit
- Checking/Savings Accounts
- IRA/401K/KEOGH plans
- Cash Value of Life Insurance
- Real Property (Land, Rental Property, etc.)
- Savings Bonds
- Stocks/Bonds/Mutual Funds
- Trusts

If only applying for CCAP or Medicaid for families with children and non-disabled adults between the ages of 19 and 65, you do not need to report or bring records of your assets.

Proof of most current expenses such as:

- Child/Dependent Care
- Court Ordered Payments (Child Support, Spousal Support, Health Insurance, Other Support)
- Medical or Health Insurance Premiums (If applying for SNAP only, you do not need to provide information for household members under age 60 unless they are disabled.)
- Utility/Shelter Expenses (If applying for SNAP)

- ▶ Heating and Cooling Costs
- ▶ Home Owner's Insurance
- ▶ House Payment
- ▶ Housing Assistance
(Contract, Federal Income Tax Forms)

- ▶ Property Taxes
- ▶ Telephone Bills
- ▶ Other Utility Bills
- ▶ Rent (Receipt, Lease Agreement)

If only applying for Medicaid for children and family coverage or Medicaid Expansion, you do not need to provide expense information.

Proof of most current income (last month and this month) such as:

- Bonuses
- Child Support
- Commissions
- Lease Income
- Money from Friends, Relatives or Others
- Pay (Pay Stubs or Employer Statement)
- Pension/Retirement Benefits
- Rental Income
- Self-Employment Income – Most recent copy of Federal Income Tax Form
- Social Security Benefits
- Spousal Support
- SSI-Supplemental Security Income
- Unemployment Benefits
- Veterans'/Military Benefits

Proof of other information such as:

- Identity (Birth Certificate, Driver's License or non-driver photo identification card, Work or School ID, American Indian/Alaskan Native Tribal Document, Passport)
- Age (Birth Certificate, Driver's License or non-driver photo identification card)
- Relationship (Birth Certificate)
- Residence (Rent Receipts, Utility Bills, Lease, Property Tax Statement)
- Social Security number (card or proof of application for SSN)
- Verification of Pregnancy
- Global boarding letter/refugee travel document I-765

Do I have to provide my Social Security number and how is it used?

You will be asked to provide a Social Security number (SSN) for all individuals who want assistance, except for the Child Care Assistance Program. For help getting a SSN, call 1-800-772-1213 or visit www.socialsecurity.gov. If you are applying only for emergency Medicaid, you do not need to give us information about your SSN.

SSNs are used to check income and other information to see who's eligible for help. The Social Security number is also used to check the identity of the household members, to prevent duplicate participation, to monitor compliance with program regulations, for claim collection, for official examinations by Federal or State agencies. The Social Security number is also used to check information in our records against other Federal, State or local government computer matching systems participating in the Income and Eligibility Verification System, including the Internal Revenue Service, Social Security Administration, and the Department of Labor, which may affect eligibility and the level of benefits.

Disclosure of SSNs for the Child Care Assistance Program is voluntary and is requested for purpose of accurate identification. Failure to disclose SSNs will not affect participation in the Child Care Assistance Program.

Use of SSNs provided for SNAP and TANF benefits may be disclosed to law enforcement for purposes of apprehending fleeing felons.

For SNAP, the collection of information on the application, including the SSN of each household member, is authorized under the Food and Nutrition Act of 2008, as amended, 7 U.S.C. 2011-2036. Information requested may also be used and verified through collateral contacts when discrepancies are found.

We will not share your SSN with the United States Citizenship and Immigration Services (USCIS).

What are my program rights?

You have the right to:

- Review Medicaid, SNAP, TANF, CCAP, LIHEAP policy. The manuals are located at <http://www.nd.gov/dhs/policymanuals/home/>
- Withdraw your application at any time, prior to receiving benefits.
- Appeal and request a hearing before the Department of Health and Human Services if you disagree with any decision to deny, reduce or terminate your benefits. Contact your Human Service Zone office for instructions on how to request a hearing.
 - ▶ Medicaid requests may be made in writing, over the telephone, internet, mail, in-person or through other commonly available electronic means within 30 days from the mail date on the notice of action.
 - ▶ Supplemental Nutrition Assistance Program (SNAP) appeals must be requested either verbally or in writing within 90 days of the notice date. Your case may be presented by a household member or a representative, such as legal counsel, a relative, a friend or other spokesperson.
 - ▶ Temporary Assistance for Needy Families (TANF), Child Care Assistance Program (CCAP), or Basic Care Assistance Program requests must be made in writing within 30 days from the date of the notice of adverse action.
 - ▶ Low Income Home Energy Assistance Program (LIHEAP) requests must be made in writing within 30 days from the date of the notice of adverse action. You also have the right to appeal if you do not receive a written notice of action taken on your LIHEAP application within 45 days from the date your application is received.

For specific information on how to request an appeal or fair hearing, contact:

The Customer Support Center

Phone: 1.866.614.6005 or 701-328-1000; 711 (TTY)

Fax: 701.328.1006

Mail: Customer Support Center P.O. Box 5562 Bismarck ND 58506

Email: applyforhelp@nd.gov

Is there additional important information for immigrants?

If you or members of your household are eligible immigrants, refugees or person granted asylum and use Child Care Assistance, Medicaid or Basic Care, it will not affect the immigration status and ability to get a green card for members of your household. However, if you use long-term institutional care, such as a nursing home, it may impact your immigration status.

Talk to an agency that helps immigrants with legal questions before you apply for long-term institutional care.

Acceptance of TANF benefits may impact your immigration status, especially if the benefits are your household's only income. Talk to an agency that helps immigrants with legal questions before you apply.

If you would like more information, please contact your local Human Service Zone office.



Notice of Privacy Practices – Effective 02-01-2025

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAYBE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The North Dakota Department of Health and Human Services (HHS) is a “hybrid entity” under the Health Insurance Portability Act of 1996 (HIPAA). This means that not all of HHS is subject to HIPAA. Only the health plans and programs providing health care listed in “Exhibit A Hybrid Entity Covered Components” on [HHS’ HIPAA Privacy webpage](https://hhs.nd.gov/hipaa) (hhs.nd.gov/hipaa) are required to comply with HIPAA.

This Notice of Privacy Practices (Notice) describes the legal duties and privacy practices of the HIPAA covered components with respect to Protected Health Information (PHI), how PHI may be used and disclosed, and your rights regarding PHI. PHI is information about you, including demographic information that may identify you and that relates to your past, present, or future physical or mental health or condition; the provision of healthcare; or the past, present, or future payment for the provision of healthcare to you.

This Notice does not pertain to HHS’ Behavioral Health Clinics or the North Dakota State Hospital. A separate Notice regarding these facilities can be obtained on [HHS’ HIPAA Privacy webpage](https://hhs.nd.gov/hipaa) (hhs.nd.gov/hipaa) or at each facility.

USES AND DISCLOSURES OF PHI WITH AUTHORIZATION

Generally, your PHI may be used and disclosed when you give your authorization to do so in writing on a form that specifically meets the requirements of the laws and regulations that apply.

USES AND DISCLOSURES OF PHI WITHOUT AUTHORIZATION

The following describes the different ways we are permitted or required to use or disclose your PHI without your written authorization.

Treatment. PHI may be used and disclosed to provide treatment, care coordination, and treatment-related services to you. For example, we may disclose your PHI in order to refer you to another health care provider who needs the information to provide treatment to you.

Payment. PHI may be used and disclosed to bill and collect payment for treatment and treatment-related services that you receive. For example, PHI may be disclosed to your health plan to determine if the health plan will pay for your treatment.

Health Care Operations. PHI may be used and disclosed for the purpose of health care operations that include internal administration, planning, and various activities that improve the quality and effectiveness of treatment and services. For example, PHI may be used to evaluate the quality and competence of clinical providers.

Appointment Reminders, Treatment Alternatives, and Health Related Benefits and Services. PHI may be used and disclosed to contact you to remind you of an appointment and to tell you about treatment alternatives or health-related benefits and services that may be of interest to you.

To Business Associates. PHI may be disclosed to business associates that perform services on our behalf through contracts or agreements. These contracts and agreements contain requirements that safeguard PHI.

Permitted or Required by Law. PHI may be used and disclosed if permitted or required by state or federal laws or regulations.

Public Health Activities. PHI may be disclosed to local, state, or federal public health agencies authorized by law to receive the PHI for the purpose of preventing or controlling disease, injury, or disability; to keep vital statistic records such as data about births and deaths; and to report reactions to medications or problems with products to the Federal Food and Drug Administration.

Health Oversight Activities. PHI may be used and disclosed to other divisions of HHS and with other agencies for oversight activities as required by law. Examples of oversight activities include audits, inspections, investigations, and licensing activities.

Judicial and Administrative Proceedings. PHI may be disclosed if we are a party to litigation or potential litigation, to comply with a court order or court-ordered warrant, a subpoena or summons issued by a judicial officer, or a grand jury subpoena; in response to an administrative request, administrative subpoena or summons, civil or authorized investigative demand, or similar process authorized under law.

Law Enforcement or Other Agencies. PHI may be disclosed to government agencies authorized under law to receive reports of abuse, neglect, or domestic violence. PHI may be disclosed to law enforcement: (1) In response to a court order, subpoena, warrant, summons, or similar process; (2) To identify or locate a suspect, fugitive, material witness, or missing person; (3) About a victim of a crime even if, under certain limited circumstances, the victim's agreement cannot be obtained; (4) About a death believed to be the result of criminal conduct; (5) Regarding a crime committed on our premises or against our personnel; (6) To identify or apprehend an individual who has admitted participation in a violent crime causing serious physical harm; and (7) To identify or apprehend an individual who escaped from lawful custody.

To Coroners, Medical Examiners, and Funeral Directors. PHI may be disclosed to a coroner, medical examiner, or funeral director to carry out their duties authorized by law.

Organ Donations. If you are an organ donor, we may disclose your PHI to an organization that procures, banks, or transports organs for the purpose of an organ, eye, or tissue donation and transplantation.

Research. PHI may be disclosed under limited circumstances where the PHI will be protected by the researchers.

To Avert a Serious Threat to Health or Public Safety. PHI may be disclosed if it is necessary to prevent or lessen a serious and imminent threat to the health or safety of an individual or the public.

National Security and Protection of the President. PHI may be disclosed to an authorized federal official or other authorized person for the purpose of national security, providing protection to the President, or to conduct special investigations as authorized by law.

Military and Veterans. If you are a member of the armed forces, PHI may be disclosed as required by military command authorities. If you are a member of a foreign military, PHI may be disclosed to the appropriate foreign military authority. If you are a Veteran, PHI may be disclosed to the Department of Veteran Affairs to determine eligibility of benefits.

Correctional Facilities. If you are an inmate of a correctional facility or in the custody of a law enforcement official, PHI may be disclosed to the correctional institution or law enforcement official if the disclosure is necessary to provide you with health care, protect your health and safety or the health and safety of others, or for the safety and security of the correctional facility or law enforcement official.

To Other Government Agencies Providing Benefits or Services. PHI may be disclosed to government agencies or programs that provide similar benefits or services if the disclosure is necessary to coordinate the delivery of benefits or services, or improve our ability to administer or manage our programs.

Worker's Compensation. PHI may be disclosed to worker's compensation programs that provide benefits to work-related injuries or illness.

USES AND DISCLOSURES OF PHI REQUIRING AUTHORIZATION

The following uses and disclosures of PHI require written authorization: (1) Marketing purposes; (2) Sale of PHI; and (3) Psychotherapy notes in limited circumstances. We do not maintain a public client directory.

OTHER USES AND DISCLOSURES OF PHI

Except for the uses and disclosures described in this Notice and as authorized, required, or permitted by law or regulation, we will only use and disclose PHI with your written authorization.

You have the right to cancel or revoke an authorization you signed for the use or disclosure of your PHI, except to the extent we have already acted based on your authorization. Your request must be in writing using HHS' "Revocation of Authorization to Disclose Information" form (SFN 91). The form can be obtained from the health plan you are enrolled in or the program you receive health care services from.

In Certain Situations, You Can Tell Us Your Choices About What PHI We Disclose. With your verbal permission or if we reasonably expect that you do not disagree, you are incapacitated or not available, or professional judgement determines it is in your best interest, we may disclose PHI in the following circumstances:

- Individuals Involved in Care or Payment for Care. PHI may be disclosed to a family member, other relative, friend, or other person whom you have identified to be involved in your health care or payment for your health care.
- Notification Purposes. PHI may be disclosed to identify, locate, and notify family members, guardians, or anyone else responsible for your care, of your location, general condition, or death.
- Disaster Relief Purposes. PHI may be disclosed to organizations such as the American Red Cross, authorized by law to assist in disaster relief efforts, for the purpose of coordinating the notification of family members or other persons involved in your care, of your location, general condition, or death. Your permission is not required in this situation if doing so would interfere with our ability to respond to the emergency.

If you have a preference for how your PHI is disclosed in the situations described above, contact the health plan you are enrolled in or the program you are receiving health care services from.

YOUR RIGHTS REGARDING PHI

See or Obtain a Copy of PHI. You have the right to see and obtain a copy of your PHI and request we send a copy of your PHI directly to a third party. You have the right to request a copy in electronic form or format. If the form and format are not easily created, we will work with you to provide it in a reasonable form or format. We will provide a summary of your PHI if you agree. Your request must be in writing. We may charge a fee associated with your request. We are not required to allow you to see or copy psychotherapy notes or PHI we prepare for use in legal actions or proceedings.

Amend PHI. If you believe your PHI is incorrect or incomplete, you may request that it be changed as long as we maintain the PHI. Your request must be in writing and include the reason why a change should be made. We may deny your request if the PHI was not created by us, is excluded from the PHI you are permitted to see or copy, or we believe the PHI to be accurate and complete. We will notify you of our decision in writing.

Request a Restriction. You have the right to request that we limit how your PHI is used and disclosed for treatment, payment, or health care operations. Your request must be in writing. We are not required to agree to your request unless you are requesting to restrict the use and disclosure of your PHI to a health plan (non-Medicaid) for payment or health care operations, and the PHI you wish to restrict pertains solely to a health care item or service for which you have paid out-of-pocket, in full, the non-sliding fee. If we approve your request, we will comply with your request unless the PHI is needed to provide you with emergency treatment or the disclosure is required by law. We will notify you of our decision in writing.

Request an Accounting of Disclosures. You have the right to request a list of disclosures we made of your PHI. The list will not include disclosures made for treatment, payment, health care operations, or that you

authorized in writing. Your request must state a time period for the disclosures, which may not be longer than six (6) years prior as long as we maintain the PHI. We will provide one list free of charge per year.

Request Confidential Communications. You may request we communicate with you about health matters in a certain way or at a certain location. For example, you can ask that we contact you at your workplace or by email. Your request must be in writing and specify how or where you wish to be contacted. We will accommodate reasonable requests.

Request a Paper Copy of This Notice. You have the right to request a paper copy of this Notice at any time. Please contact the program you are receiving treatment or treatment-related services from or the health plan you are enrolled in to request a paper copy. You may also view and download a copy of the Notice from [HHS' HIPAA Privacy webpage](https://hhs.nd.gov/hipaa) (hhs.nd.gov/hipaa).

Fundraising. You have right to opt out of fundraising contacts. However, we do not engage in fundraising activities.

To Exercise Your Rights. You may exercise your rights only in writing in the form and manner approved by HHS, unless we waive the written requirement. Contact the health plan you are enrolled in or the program you are receiving health care services from to request the applicable form to exercise your rights or request additional information. Forms should be returned to the health plan you are enrolled in or program you are receiving health care services from.

OUR RESPONSIBILITIES

We are required by law to maintain the privacy of your PHI. We will let you know promptly if a breach occurs that may have compromised the privacy of your unsecured PHI. We are required to abide by the terms of this Notice, currently in effect. We reserve the right to change the terms of this Notice at any time. We also reserve the right to make the revised Notice effective for all the PHI that we maintain. If we make changes to this Notice, the new notice will be posted in our facilities, a copy will be available at all programs, and on HHS' HIPAA Privacy webpage (hhs.nd.gov/hipaa).

FOR MORE INFORMATION

If you have questions or would like additional information regarding this Notice, please contact:

HIPAA Privacy Officer
North Dakota Department of Health and Human Services
State Capitol
600 East Boulevard Avenue, Dept. 325
Bismarck, ND 58505-0250
Toll-free (800) 472-2622
TTY toll-free (800) 366-6888

TO FILE A COMPLAINT

If you believe that your HIPAA privacy rights have been violated, you may file a complaint with the health plan you are enrolled in, the program you are receiving health care services from, or with the HIPAA Privacy Officer. All complaints must be made in writing using HHS' "Request for Informal Privacy Conference" form (SFN 934). The form can be obtained from the health plan you are enrolled in, program you are receiving health care services from, or the HIPAA Privacy Officer.

HIPAA Privacy Officer
North Dakota Department of Health and Human Services
State Capitol
600 East Boulevard Avenue, Dept. 325

Bismarck, ND 58505-0250
Toll-free: (800) 472-2622
TTY toll-free: (800) 366-6888

You may also file a complaint with the U.S. Department of Health and Human Services:

Centralized Case Management Operations
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F HHH Bldg. Washington, D.C. 20201
Toll-free: (800) 368-1019
TDD toll-free: (800) 537-7697
OCRComplaint@hhs.gov

THERE WILL BE NO RETALIATION AGAINST YOU FOR FILING A COMPLAINT

Additional Notice Regarding Confidentiality of Substance Use Disorder Patient Records. The confidentiality of substance use disorder patient records maintained by Substance Use Disorder Programs is protected by Federal law and regulations. Generally, a Substance Use Disorder Program may not inform any person outside the Substance Use Disorder Program that a patient attends the program, or disclose any information identifying a patient as having or having had a substance use disorder unless:

1. The patient consents in writing;
2. The disclosure is allowed by a proper court order;
3. The disclosure is made to medical personnel in a medical emergency;
4. The disclosure is made to qualified personnel for research, audit, or program evaluation;
5. The patient commits or threatens to commit a crime on the premises of the program or against program personnel;
6. The disclosure is made to the appropriate state or local authorities to initially report suspected child abuse or neglect; or
7. Federal law or regulations allow the disclosure of such information.

Minor Patients. Federal law and regulations, along with North Dakota State Law, restrict the disclosure of information regarding a minor, 14 years of age or older with sufficient capacity, unless the minor has consented in writing to the disclosure. This includes any disclosure of patient identifying information to the parent or guardian of a minor, 14 years of age or older, for the purpose of obtaining financial reimbursement.

Federal law and regulations, along with North Dakota State law, restrict the disclosure of information regarding a minor, 13 years of age or younger with sufficient capacity, unless both the minor and his or her parent, guardian, or other person authorized under State law to act in the minor's behalf, have consented in writing to the disclosure.

Violations. Violation of Federal law and regulations by a Substance Use Disorder Program is a crime. In accordance with Federal regulations, suspected violations may be reported to one of the United States Attorney's Office for District of North Dakota at:

Quentin N. Burdick United States Courthouse
U.S. Attorney's Office
655 First Avenue North, Suite 250
Fargo, ND 58102-4932
Phone: 1-888-716-7395
Fax: (701) 297-7405
TTY Phone: (701) 297-7444

William L. Guy Federal Building
U.S. Attorney's Office
220 East Rosser Ave, Room 372
Bismarck, ND 58502-0699
Phone 1-888-828-8050
Fax: (701) 530-2421
TTY Phone: (701) 530-2441

Or to the Substance Abuse and Mental Health Services Administration (SAMHSA) at:

Substance Abuse and Mental Health Services Administration
5600 Fishers Lane
Rockville, MD 20857
Phone: 877-726-4727
800-487-4889 (TDD)

See 42 U.S.C 290dd-2(g) for federal law; 42 CFR Part 2 for federal regulations governing the Confidentiality of Substance Use Disorder Patient Records; and North Dakota Century Code Sections 50-06-15 and 14-10-17.



Do Not Share Your Personal Information

You may be aware that there are many scams where you are asked for personal information. This information may include your **Social Security number, date of birth, bank account numbers, credit card numbers**, and other personal information. **Never disclose this information unless you know exactly who is asking for the information.**

Human Service Zone and State staff often call applicants and recipients of assistance programs for information. If you are not positive that it is a Human Service Zone or staff member asking for the information, do not respond to the caller. Instead, hang up and call the Customer Support Center at 70-328-1000, toll free 866-614-6005 or TTY 711 to make sure you are speaking to someone with a need to know your information.

If you receive phone calls asking for information and you do not know who is asking for the information, you can call the Consumer Protection Division of the N.D. Attorney General's Office at 701-328- 3404, toll free 800-472-2600 or TTY 711 to report the call.



Temporary Assistance For Needy Families (TANF)

What is TANF?

TANF makes a payment on behalf of needy children residing in North Dakota.

Who may be eligible?

If you are a relative taking care of a child, you and the child may be eligible if the child is:

- Under age 18 or will graduate from high school by age 19; and
- Without parental support because of a parent's death, physical or mental disability, age or continued absence from home.

You may also be eligible if you are pregnant.

If you are a fleeing felon or in violation of your parole or probation, you may not get benefits.

What are the income and asset limits?

Monthly income from wages, child support, Social Security, pensions, veterans' benefits, or other sources must be less than the TANF income limits. Please contact your local Human Service Zone office for the current limits.

The assets limits are \$3,000 for one individual, \$6,000 for a household of two individuals, and an additional \$25 per person for households of three or more.

Some assets are not counted such as:

- The home you live in
- One car
- Your household goods and furniture
- Your personal belongings and clothing

When will I receive my benefits?

If you are eligible, you will get your benefits no later than 30 days from the date your local Human Service Zone office receives your signed application.

After your application is approved, your benefits will be available on the 1st working day of each month.



How do I receive my benefits?

You will receive an Electronic Payment Card (EPC) in the mail. The EPC is a prepaid debit card. Benefits are deposited into your EPC account, much like a bank account. (See the ND TANF EPC Cardholder Handbook for more information. You may view this handbook online at <https://www.hhs.nd.gov/applyforhelp/tanf> or obtain a copy from your local Human Service Zone office.)

Where can I use my TANF Electronic Payment Card (EPC)

You can use your TANF Electronic Payment Card (EPC) to make purchases at millions of places that Mastercard debit cards are accepted such as:

- Grocery Stores
- Gas Stations
- Restaurants
- Online Stores or Sites
- Department and discount stores
- To pay bills for doctors, dentists, utility companies, etc

Note: Federal Law prohibits the use of the TANF EPC at:

- Liquor Stores
- Casinos, gambling casinos or gaming establishments
- Any retail establishment which provides adult-orientated entertainment in which performers disrobe or perform in an unclothed state for entertainment.

How long can I receive TANF benefits?

You may receive TANF up to 60 months. There are some exceptions for families to go beyond 60 months. You may contact your local Human Service Zone office about these exceptions.

What is Diversion Assistance?

Diversion Assistance provides short-term emergency benefits and services to families during a 'specific crisis or episode of need'. These benefits and services are designed to deal with a specific crisis situation or episode of need, are not intended to meet recurrent or ongoing needs, and will not extend beyond four months in a 12-month period. This will allow individuals to clear up problems that might push them further into poverty. TANF rules that do not apply to Diversion Assistance will be explained during your interview with your eligibility worker.

What is Transition Assistance?

Transition Assistance promotes job retention by providing an extended period of cash assistance to qualified TANF households. TANF households with earnings from employment exceeding the allowable standard of need for their household size may remain eligible for Transition Assistance for up to six months. Transition Assistance provides a safety net of financial support during this six-month period to assist households in attaining self-sufficiency; thereby eliminating the need for future government benefits.

What are the program rules?

Before you can receive benefits you must:

- Complete and submit an application to your local Human Service Zone office.

- Complete an Interview
- Complete SFN 74 - Child Support Information form, which your local Human Service Zone will provide.
- Be in compliance with the Child Support program requirements.
- Comply with JOBS/Tribal NEW requirements.
- Be a resident of North Dakota.

Once you are eligible you must:

- Cooperate with the Child Support Program (See the Child Support section for more information.). If you are interested in receiving TANF and your cooperation with Child Support might not be in the best interest of your child (example: domestic violence situation), you may claim “good cause.” If you claim “good cause,” you will need to provide additional information so “good cause” can be established. Refusal to cooperate, without good cause, will result in less benefits and could result in case closure.
- Cooperate with the JOBS/Tribal NEW Program. (See the JOBS Section for more information.)

Are there Additional Financial Incentives available to my Household?

Individuals under age 21 who are eligible for Medicaid and TANF and screened through the preventive health program known as Health Tracks, are eligible for a \$25.00 incentive per individual. The incentive is available after the completion of the initial screening and each annual Health Tracks screening. Completion of the screening, for this purpose, does not include the follow-up appointments or referrals to other physicians that are generated from a screening.

Do I get my child support while I receive TANF?

All child support that becomes due while your family is receiving TANF is assigned to the State of North Dakota. North Dakota will keep assigned child support up to the amount of TANF benefits your family received.

If you receive a child support payment from any source other than the North Dakota Child Support Division (such as directly from the absent parent or from another state’s child support agency), you must immediately give the payment to the Child Support Division. Failure to do so is fraud and prosecution through the state’s attorney’s office will be pursued.

Do I get my child support when I stop receiving TANF?

After you stop receiving TANF, the State of North Dakota will not keep any child support payments, unless the payment received is for a month in which you received TANF. Child support received for a month in which you did not receive TANF will be sent to you.

What if I have more questions about my child support?

See the Child Support section for more information. You may also contact Child Support or your local Human Service Zone office.

What information do I need to report if I am eligible?

Once you are eligible, the following changes must be reported within 5 days of the time you learn of the change. Report changes in:

- Gross monthly unearned income. Examples of unearned income:
 - ▶ Child Support
 - ▶ Social Security Benefits
 - ▶ Spousal Support
 - ▶ Unemployment Compensation
 - ▶ Veteran's/Military Benefits
 - ▶ Workers Compensation

- Gross monthly earned income. Examples of earned income:
 - ▶ Wages
 - ▶ Salary
 - ▶ Earnings from Self-Employment

You will also need to report:

- Changes in the source of income (a new job, a job loss, receipt or loss of unearned income).
- Changes in persons moving in and/or out of your home. This includes friends, family, relatives etc.
- If you are moving to a new address.
- Changes in your household assets (vehicles, home, etc.)

What happens if I give false information on purpose?

If you:

- Give false information on purpose or misuse your TANF Electronic Payment Card (EPC) it may result in us taking legal action against you, either criminal or civil. It might also mean we reduce your benefits, take money back from you or you might not get benefits for 1 year for the first time, 2 years for the second time and forever for the third time.
- Give false information about who you are or where you live, you may not get TANF for 10 years.

Family Violence Screening

What you need to know

This option is available to parents who are seeking Temporary Assistance for Needy Families (TANF) benefits. It provides alternative ways for individuals to fulfill their TANF work requirements.

What is The Family Violence Option?

Specialized services for victims of domestic violence who are receiving TANF in North Dakota.

The Family Violence Option in North Dakota mandates screening for domestic violence. It provides referrals for specialized services, and may provide temporary exemptions from program requirements to enable victims of domestic violence to have the time, services and support they need to address domestic violence as a barrier to self-sufficiency.

A TANF recipient in North Dakota is considered a victim of domestic violence if they have experienced domestic violence as defined in North Dakota Century Code 14-07.1.

Domestic violence includes: physical harm, bodily injury, sexual activity compelled by physical force, assault, or the infliction of fear of any of the above.

Voluntary Information

A TANF recipient may choose to discuss abuse with a TANF eligibility worker at any time, and the Family Violence Option will be explained. This information will remain confidential. The client will be referred to a local domestic violence program where an advocate will discuss available services and options.

Choosing not to discuss domestic violence with a TANF eligibility worker will NOT result in the denial of any of the basic benefits provided by TANF.

Duties of TANF Recipients:

Parents must participate in activities leading to self-sufficiency. But if working or looking for work results in danger of physical, emotional or sexual abuse, an appropriate work alternate plan is possible.

TANF recipients must assist the Child Support Program to obtain a child support order. However, if the child was conceived because of rape or incest or the child may be in danger of physical, emotional or sexual abuse, a TANF recipient may not have to meet this requirement.

A TANF recipient who is underage 18 (minor) and who is pregnant or raising a child must live with a parent or in an approved living arrangement. *But if the recipient is under 18, they do not have to be in any living arrangement in which they or their child would be in danger of physical or sexual violence.*

Relationships in which domestic violence can happen

Physical, emotional and sexual abuse can occur between family members, household members, or people in a dating relationship.

Duties of State Agency: NDCC 50-09

The State Agency shall:

- Inform all TANF applicants and recipients of the options available under the domestic violence option.
- Screen all applications to determine who are past or present victims of domestic violence or at risk of further domestic violence
- Refer these individuals to a local domestic violence sexual assault organization for safety planning and supportive services
- Determine if 'good cause' exists to waive work requirements or time limits on receipt of benefits.

Following is a list of available sources providing services for individuals and families.

North Dakota Council on Abused Women's Services/Coalition Against Sexual Assault in North Dakota:

Office: (701) 255-6240
Crisis Line: 1-888-255-6240

LISBON:

Abused Resource Network
Office: (701) 683-5061
Crisis Line: (701) 683-5061

BEULAH:

Women's Action and Resource Center
Office: (701) 873-2274
Crisis Line: (701) 873-2274

MINOT:

Domestic Violence Crisis Center, Inc.
Office: (701) 852-2258
Crisis Line: (701) 857-2500

BISMARCK:

Abused Adult Resource Center
Office: (701) 222-8370
Crisis Line: 1-866-341-7009

NEW TOWN:

TAT Victim Services
Office: (701) 627-4171
Crisis Line: (701) 627-3617

BOTTINEAU:

Family Crisis Center
Office: (701) 228-2028
Crisis Line: 1-800-398-1098

STANLEY:

Domestic Violence Program of NW ND
Office: (701) 628-3233
Crisis Line: 1-800-273-8232

DEVILS LAKE:

SAFE Alternatives for Abused Families
Office: (701) 662-7378
Crisis Line: (701) 409-0665

TURTLE MOUNTAIN RESERVATION:

Hearts of Hope
Office: (701) 477-0002
Crisis Line: (701) 477-0002

DICKINSON:

Domestic Violence and Rape Crisis Center
Office: (701) 225-4506
Crisis Line: 1-888-225-4506

VALLEY CITY:

Abused Persons Outreach Center
Office: (701) 845-0078
Crisis Line: (701) 845-0072

ELLENDALE:

Kedish House
Office: (701) 349-4729
Crisis Line: 1-877-349-4729

FARGO:

Rape and Abuse Crisis Center
Office: (701) 293-7273
Crisis Line: 1-800-344-7273

FORT TOTTEN:

Spirit Lake Victim Assistance
Office: (701) 766-1816
Crisis Line: (701) 766-1816

GRAFTON:

Domestic Violence and Abuse Center,
Inc.
Office: (701) 331-0466
Crisis Line: 1-866-435-7490

GRAND FORKS:

Community Violence Intervention Center
Office: (701) 746-0405
Crisis Line: 1-866-746-8900

JAMESTOWN:

Safe Shelter
Office: (701)251-2300
Crisis Line: 1-888-353-7233

WHPETON:

Three Rivers Crisis Center
Office: (701) 642-2115
Crisis Line: 1-800-627-3659

WASHBURN:

McLean Family Resource Center
Office: (701) 462-8643
Crisis Line: (701) 462-8643

WILLISTON:

Family Crisis Shelter
Office: (701) 572-0757
Crisis Line: 1-800-231-7724

Job Opportunities and Basic Skills (JOBS) Program/Tribal Native Employment Works (Tribal NEW) Program

What is JOBS/Tribal NEW Program?

The JOBS/Tribal NEW Program is the employment and training part of the TANF Program. The goal of the JOBS/Tribal NEW Program is to help individuals who receive TANF to become self-sufficient by participating in work or other approved work activities.

If you are enrolled in or eligible for enrollment in a federally recognized tribe and are attending college, vocational education, or GED classes, you may be eligible to work with one of the Tribal NEW programs in the State to meet your TANF work requirements. Contact your local Human Service Zone office to find out if you are eligible to be in the Tribal NEW Program.

Do I have to work or do work activities to receive TANF?

If you are caretaker or child who receives a TANF benefit, you may need to work or do work activities unless:

- You are over 65 years of age;
- You are in receipt of Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) benefits;
- You are caring for a child who is under two months of age; or
- You are a child receiving TANF, over age 16 and in school.

What will I have to do?

You must cooperate by:

- Contacting the JOBS/Tribal NEW worker and scheduling an appointment within 7 business days from the date you are referred.
- Keeping your appointment as scheduled.
- Arranging for child care and transportation to allow you to attend appointments and work activities.
- Meeting with the JOBS/Tribal NEW worker to review the requirements of the JOBS/Tribal NEW Program and completing a plan that outlines work requirements.
- Attending appointments.
- Working when scheduled.
- Participating in approved work activities.
- Accepting job offers and not quitting a job or reducing hours.

What happens if I do not cooperate?

If you do not contact a JOBS/Tribal NEW worker within 7 business days from the date of your referral to schedule an appointment for orientation and complete your orientation as scheduled, your TANF application will be denied and you will need to reapply for TANF.

After your TANF application has been approved, if you do not cooperate with requirements of the JOBS/Tribal NEW Program, your TANF or SNAP benefits may be reduced. If you continue to not cooperate, your TANF case may be closed.

If you think you have a good reason to not participate in the JOBS/Tribal NEW Program, please contact your local Human Service Zone office.

Is there financial help available for work activities?

Financial help may be available for you to get a job or do work activities, including money for:

- Fuel
- Car repairs
- Taxi, bus fares or paying others for rides
- Interview expenses, such as clothing or haircut
- Relocation assistance
- Child Care (See the Child Care Assistance Program section for more information.)

What happens if I cannot get to work?

If you have problems arranging child care or transportation, you must show how you tried to resolve them. You must follow through and cooperate with suggestions from your JOBS/Tribal NEW worker or TANF worker.

What if I am not ready to work?

Work requirements may be delayed if you are not able to work or do other work activities.

Consideration may be requested when:

- You are unable to participate due to serious illness or disability
- You must care for a household member who is seriously ill or disabled
- You are unable to find child care even though you made several attempts to do so

TANF Kinship Care

What is TANF Kinship Care?

North Dakota's TANF Kinship Care Program provides an alternative to out of home foster care by placing children in the homes of relatives. TANF Kinship caregivers take on the responsibility of caring for their relative's children and may experience unexpected costs. TANF Kinship Care is available to help offset such costs.

TANF Kinship Care placements are usually temporary until the child is reunited with parents or moves into a more permanent living situation.

How Do I Qualify?

In order to be considered for the TANF Kinship Care Program, children and relative caregivers must meet the following criteria:

Qualified Children

- Be in a foster care under the care, custody and control of the Human Service Zone, Division of Juvenile Services, or a tribal agency within North Dakota
- Be under age 18 (unless the child is enrolled in high school full time and is expected to graduate before age 19)
- Cannot receive Supplemental Security Income

Qualified Relative Caregivers

- Must be a grandparent, aunt, uncle, sibling (over age 16) or a cousin (age 18 or older) of the child
- Must complete a TANF Kinship Care Agreement and participate in required background checks
- Complete an application for TANF benefits and complete an interview. Households will have to pass an income test that is based on the child only
- Cooperate with the Child Support Division to pursue support from the legally responsible parents

What are the Benefits of Participating in the Program?

TANF Kinship Care benefits help relatives address the unexpected financial expenses that arise when caring for a child.

Participating in the program may provide the following supports:

- Assistance with childcare costs
- Clothing allowance
- May assist with legal fees associated with obtaining guardianship status.
- School and community activity fees (uniforms, activity fees, school pictures, transportation, etc.)
- Transportation costs
- Other Emergency Needs

Please note that reimbursement for the above-mentioned costs require approval from the TANF Kinship Care program prior to purchasing.

Foster children enrolled as a recipient of TANF Kinship Care may also qualify for health care coverage under Medicaid.

How Do I Apply?

For more information on the TANF Kinship Care Program please contact the Customer Support Center:

Phone: 1.866.614.6005

Email: applyforhelp@nd.gov.

As a relative caregiver, you must work with the child's foster care case manager to begin the process of applying for TANF Kinship Care.

You will be referred to a local eligibility worker who will guide you through the application process for TANF Kinship Care benefits and will continue to work with you once determined eligible.



Child Care Assistance Program(CCAP)

What is the Child Care Assistance Program (CCAP)?

The Child Care Assistance program (CCAP) helps low income families pay for child care while they work and/or attend any education or training activity.

For more information including income limits and how to apply, visit <https://www.nd.gov/dhs/services/financialhelp/childcare.html>

Who may be eligible?

If you are working or attending an education or training activity and incur child care costs due to participation in that activity, you may be eligible for help with those costs. If you are experiencing homelessness, CCAP may still be able to help with your child care costs while you are looking for an employment, education or training activity.

Once determined eligible, each child will be assigned a 'Level of Care' which is based on the time you are participating in your activity and the time the child actually needs care. There are two levels of care which include full time and part time.

How do I find a child care provider?

Child Care Licensing

Child care licensing regulations are designed to protect and promote child safety and well-being in child care settings. Licensing is one form of consumer protection. Licensed child care offers parents the knowledge that providers are regulated through standards and monitoring.

For more information on licensing regulations and how to become a provider, visit <https://hhs.nd.gov/cfs/early-childhood-services/providers/become-a-provider>.

Child Care Resource and Referral (CCR&R) Agencies

The Department contracts with Child Care Aware to offer the following services:

Services to Families

- Help families find childcare. The online search option provides families with information on providers who are currently accepting children, the quality rating of the provider, inspection and monitoring reports and more
- Search for providers online at <https://ndchildcare.org/parents/>
- Offer referrals to licensed and registered child care programs
- Call 800-997-8515 or email Referral@ndchildcare.org.
- Offer resources to families including tips for choosing care <https://ndchildcare.org/parents/>

Services to Providers

- Offers help in starting a licensed child care program, professional development and training to child care providers in the areas of child development, health and safety, infant and toddler care, and business practices.

Bright and Early

Bright & Early ND is North Dakota's Quality Rating & Improvement System (QRIS).

Bright & Early ND is an initiative led by the Department to ensure that North Dakota's children receive the quality child care and early education they need for success in school and life. They recognize talented child care and early education programs for going above and beyond, and we deliver professional rewards for a job well done.

For more information on identifying quality rated providers, visit <https://www.hhs.nd.gov/cfs/early-childhood-services/brightnd>

Developmental Screenings

The first five years of a child's life are filled with exciting milestones. A developmental screening is a quick and simple check of how your child is growing and developing.

For information on when and who to contact to set up a screening, visit Child Care Aware of North Dakota <https://ndchildcare.org>.

Immunizations

Child care facilities require that all children in their care are up to date on their immunizations, unless they meet exemption requirements. For information on Child Care Facility Immunization Requirements in North Dakota, immunization resources, immunization schedules and financial assistance in obtaining immunizations, visit: <https://www.hhs.nd.gov/health/diseases-conditions-and-immunization/immunizations>

How are payments issued?

CCAP may not cover the entire cost your child care bill. In most instances a household is assigned a co-payment amount, which is based on the household's total countable income and the size of the household. This co-payment amount is then applied to the amount that the state can pay. The state can pay up to a maximum rate which is determined by the type of child care provider, the age of the child and the child's level of care. You will be responsible to pay any costs not covered by CCAP.

Payments for child care services must be submitted online by your child care provider through the Provider Self-Service Portal.

Payment requests must be submitted within two months from the month the care was provided.

What information do I need to report if I am eligible?

- If your household's income exceeds the program's maximum income limit;
- If you are no longer participating in your allowable activity;
- If you are no longer residing in the state.

What happens if I give false information on purpose?

If you give false information on purpose it could result in us taking legal action against you. It may also mean we reduce your benefit or take money back from you. Additionally, you may not get benefits for 1 year for the first time, 2 years for the second time and forever for the third time.

Need help with additional resources?

If you are experiencing homelessness, need help finding a job, or are in need of additional resources, please refer to the Community Resources section of this handbook. Your local Human Service Zone office may also be able to refer to you additional resources.

How Does CCAP Define Homeless?

CCAP uses the McKinney-Vento Act definition of homeless. According to this act, the term homeless means an individual who lacks a fixed, regular, and adequate nighttime residence; and includes individuals who;

- Share the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks or camping grounds due to the lack of alternative accommodations; are living in emergency or transitional shelters; are abandoned in hospitals or awaiting foster care placement;
- Have a primary nighttime residence that is a public or private place not designed for or ordinarily used as regular sleeping accommodations for human beings;
- Live in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and
- Are migratory and live in any of the circumstances as described above.

How to File a Complaint

If you suspect a parent or provider is misusing funds from the Child Care Assistance Program, contact 1-800-755-2716 or ccap@nd.gov.

For other child care concerns, contact your local Early Childhood Services Specialist at <https://www.hhs.nd.gov/cfs/early-childhood-services>.



What is the Crossroads Program?

The Crossroads Program supports parents while they continue their education

Who may be eligible?

- North Dakota resident
- Pursuing an educational activity
- Under the age of 21
- Male or female - married or unmarried
- Must be living in the same home and be the primary caregiver of the child
- Crossroads does not consider assets or income when determining eligibility

What does the program provide?

- Waived co-payment under the Child Care Assistance Program
 - If assistance is needed with child care you must also fill out a Child Care Assistance Program (CCAP) application and must meet CCAP's eligibility criteria.
- Assist with transportation costs
- Monthly education incentives
- Each parent will work one-on-one with a Crossroads case manager who will offer ongoing guidance and support
- Create a plan that includes educational activities and goals
- Graduation incentive upon completion of high school, GED and bachelor's degree or post secondary education

How do I apply?

Complete a Crossroads Program application and submit it to one of these locations:

- Crossroads Program
Department of Health and Human
Services 600 E Boulevard Ave Dept.
325
Bismarck ND 58505-0250
- Your local Human Service Zone office
- Crossroads Case Manager



Supplemental Nutrition Assistance Program (SNAP)

What is SNAP?

SNAP, formerly known as the Food Stamp Program, helps people buy food for good health.

Who may be eligible?

You may be eligible if you are working for low wages, have low income or no income. You may not be denied SNAP benefits solely because you were denied from other programs.

What are the income and asset limits?

Monthly income from wages, child support, Social Security, Supplemental Security Income (SSI), Temporary Assistance for Needy Families (TANF), pensions, veterans' benefits or other sources must be less than the SNAP income limits. Income limits change each year. Please contact your local Human Service Zone office to determine the income limit for your household.

SNAP will consider the assets of certain households. We do not count the assets of people who receive TANF or SSI benefits or TANF Information and Referral Services

Some assets are not counted such as:

- The home you live in
- Some vehicles
- Your household goods and furniture
- Your personal belongings and clothing
- Property that produces earned income (such as farm or business.)

Can I get SNAP just for myself if I live with my family or with others?

People who live together and buy food and prepare meals together must receive benefits as one household.

What if I need help applying?

If you need applying for assistance, you may have a friend, relative or someone else help you apply. Your Human Service Zone office or Great Plains Good Bank can also help you apply for assistance.

You may also designate a person in writing or on the application to fill out the application, answer questions for you, give information at your interview, and buy your food with an Electronic Benefit Transfer (EBT) card. We will be able to share information with this person.

When will I receive my benefits?

If you are eligible, you will get your benefits no later than 30 days from the date your local Human Service Zone office receives your signed application. If you are eligible, your assistance will start from the date you apply. For residents of an institution who apply prior to release, the date of application is the date of release.

You may get SNAP within 7 days of your application date if :

- Your household's monthly income before taxes is \$150 or less provided your liquid resources do not exceed \$100; or
- You are a migrant or seasonal farm worker who is destitute provided your liquid resources do not exceed \$100; or
- Your household's monthly rent/mortgage and utilities are more than your household's income before taxes.

After your application is approved, your benefits will be available on the 1st of each month.

What is EBT?

Electronic Benefits Transfer (EBT) is the way you receive and use your SNAP benefits in North Dakota. You can use your EBT card in any store that accepts SNAP benefits in North Dakota and through the United States.

When do I get my card?

Your card will arrive within 7-10 business days. If your card does not arrive in this time frame, contact ebtEdge customer support.

How do I get my SNAP Benefits with EBT?

The benefits are deposited into your EBT account, much like a bank account. Your benefits are available by using you EBT card and Personal Identification Number (PIN).

When do I get my SNAP benefits?

If you are a new client, you will receive a notice from your human service zone office telling you when the SNAP benefits will be available in your EBT account.

If you are an ongoing client, you will receive your benefits in your EBT account on the 1st day of the month, even if the 1st falls on a weekend or a holiday.

What can I buy with my benefits?

Benefits may be used to buy food for your household with the exception of hot foods prepared for immediate consumption. Seeds and plants used to grow food for your household can also be purchased with benefits.

Non-food items such as pet food, soap, alcoholic beverages, tobacco products, paper products, vitamins and medicine cannot be purchased with benefits.

Persons over 60 years of age may use benefits to purchase "Meals on Wheels" and meals at senior meal sites. In some areas, restaurants can be authorized to accept benefits from qualified homeless, elderly, or disabled people in exchange for low-cost meals.

Benefits cannot be exchanged for cash or used to purchase food on credit.

How can I protect my EBT card?

If you have misplaced your card or are concerned about fraud you can cancel or freeze your card by:

- Logging into the cardholder portal
- Using the mobile application

- Calling the EBT Helpline at 1.800.630.4655
- Block out of state transactions by:
 - Logging into the cardholder portal
 - Using the mobile application
- Keep your PIN safe:
 - Change your PIN when requesting new card
 - Use a PIN that cannot be guessed easily
- Check your balance regularly.

How long can I receive benefits?

There is no limit to the length of time you can receive benefits. Time limits and requirements for other programs such as TANF do not apply to the receipt of SNAP. If you are no longer receiving TANF benefits, or if your case is closed for the time limits, because you started working or for some other reason, you may still qualify for SNAP.

What are the rules of SNAP?

You MUST NOT:

- Provide incorrect information in order to obtain benefits
- Trade or sell your benefits.
- Use someone else's benefits for yourself.
- Buy, sell, steal or otherwise effect an exchange of SNAP benefits for cash or consideration other than eligible food, either directly, indirectly, in complicity or collusion with others, or acting alone.
- Exchange firearms, ammunition, explosives, or controlled substances for SNAP benefits
- Purchase a product with SNAP benefits that has a container requiring a return deposit with the intent of obtaining cash by discarding the product, and intentionally returning the container for the deposit amount.
- Purchase a product with SNAP benefits with the intent of obtaining cash or consideration other than eligible food by reselling the product, and subsequently intentionally reselling the product purchased with SNAP benefits in exchange for cash or consideration other than eligible food.
- Intentionally purchase products originally purchased with SNAP benefits in exchange for cash or consideration other than eligible food.

What happens if I do not follow the rules of SNAP?

If you do not follow the rules, you:

- May not get benefits for 1 year for the first time, 2 years for the second time, and forever for the third time;
- May be fined up to \$250,000 or jailed up to 20 years, or both; and
- May not get benefits for an additional 18 months if court ordered If a court finds you guilty of:
- Buying, selling or trading more than \$500 in benefits, you will lose benefits forever
- Trading benefits for firearms, ammunition, or explosives, you will lose benefits forever.
- Trading benefits for controlled substances, you will lose benefits for two years the first time and forever the second time.
- You or any member of your household been convicted of Federal or State aggravated

sexual abuse, murder, sexual exploitation and abuse of children, or sexual assault.

If you are a fleeing felon, parole or probation violator, you may not get benefits.

If you give false information about who you are or where you live, you may not get SNAP for 10 years.

Giving wrong information on purpose may result in us taking legal action against you, either criminal or civil. It might also mean we reduce your benefits or take money back from you.

What do I do if I have a program complaint?

You may file program complaints on delays in processing or general service, verbally or in writing. You may also request a meeting with your local Human Service Zone office if you are questioning a denial of expedited service or any other concerns. This does not replace or will not delay a request for fair hearing.

Where do I file a complaint?

You may file a complaint with your Human Service Zone office or the following:

State SNAP Office
Department of Health and Human Services
600 E. Boulevard Ave.
Dept. 325
Bismarck, ND 58505-0250
Toll-Free: 800-755-2716 (ND Only)
Phone:701-328-2328
TTY: 711
Fax:701-328-1060 (Fax)



Medicaid

Medicaid is provided through the Department of Health and Human Services. Coverage includes:

- Medicaid including Medicaid Expansion and Optional Children's Group formerly known as Healthy Steps
- Medicare Savings Programs
- Refugee Medical Assistance

Additional information regarding these programs is included in the pages that follow.

Medicaid Program

What is Medicaid?

Medicaid is a program that provides health care coverage for eligible individuals.

Who may be eligible?

Medicaid provides coverage to individuals who meet financial requirements and are:

- Pregnant
- Blind, disabled or age 65 or older.
- A family with children under age 21
- A child under age 21 who is in foster care or who receives assistance through subsidized adoption
- A former foster care child up to age 26, under certain circumstances
- A child with disabilities (birth to 19)
- A worker with disabilities
- An individual screened through the Department Women's Way program, and in need of treatment for breast or cervical cancer.
- An adult age 21 to 65.
- A Low-income Medicare beneficiary (Medicare Savings Program)

What are the income and asset limits?

Monthly income from wages, child support, Social Security, pensions, veterans' retirement, or other sources must be less than the current Medicaid income levels. Income levels change each year.

Please contact your local Human Service Zone office for the current level. If your income is slightly higher than the income level, you are encouraged to apply.

There is no asset limit for children, families, pregnant women, Adult Medicaid expansion population or for individuals who apply under the Breast or Cervical Cancer Early Detection Program.

The asset limits for individuals who are blind, disabled, or age 65 or older are \$3,000 for one individual, \$6,000 for a household of two individuals, and an additional \$25 per person for households of three or more. If your spouse resides in a nursing home or you receive home and community-based services, you may qualify even if you have more assets.

Some assets are not counted. Examples include:

- The home you live in
- One car (if the primary use is to serve the needs of members of the Medicaid household)
- Certain funeral/burial plans
- Indian trust or restricted lands
- Personal belongings, clothing, household goods and furniture
- Property that produces earned income (such as farm or business)

What happens if I give away income or assets?

Giving assets (including property) or income away or selling assets for less than its value may affect eligibility for long-term care services such as nursing home services, home and community based services or swing bed care in a hospital. Contact your local Human Service Zone office for more information.

What if I have an annuity?

- As a condition of receiving Medicaid long-term care benefits, all applicants or recipients and their spouses, must disclose any interest they have in any annuity or similar financial instrument.
- The Department of Health and Human Services must be named as the remainder beneficiary of specific annuities purchased or changed after February 8, 2006.
- Community spouses and minor or disabled children may be named as remainder beneficiaries ahead of the Department.
- An annuity purchased or changed within five years of applying for long-term care services must 1) name the North Dakota Department of Health and Human Services as the remainder beneficiary, 2) be irrevocable and non-assignable, 3) provide substantially equal payments, and 4) return the full principal and interest within the annuitant's life expectancy.

When does eligibility for Medicaid begin?

A decision on your application will be made within 45 days from the date your local Human Service Zone office or the Medical Service Division of the Department receives your paper or online application with electronic signature. Medicaid may pay for health care services provided to you for up to 3 months before the month your paper or online application with electronic signature was received, if you received services from an enrolled ND Medicaid provider and you meet eligibility requirements in each of these months. If you have applied for Social Security disability, it may take up to 90 days for Social Security to make an eligibility determination. A decision about Medicaid eligibility would be made after the Social Security determination.

How will I know if I am eligible for Medicaid?

If you are eligible for Medicaid, you will receive a notice informing you of your eligibility. This notice will also include Medicaid Identification (ID) Numbers for each member of your household who is eligible. Approximately 4 to 6 weeks after you receive this notice, you will receive Medicaid ID cards, which will include your Medicaid ID Number.

What do I do with my Medicaid ID Card?

Show your Medicaid ID Card every time you receive health care services or have a prescription filled. Because emergencies can happen at any time, you should carry your Medicaid ID Card with you at all times.



What if I receive a bill that I thought Medicaid would pay?

First, you should contact the provider that billed you so they can explain exactly which services are included on the bill. You may have forgotten to inform them of your Medicaid ID number, the service may not be covered by ND Medicaid, or you may be responsible for part of the bill because of your client share. If the charges are for services not covered by ND Medicaid, you will be responsible for the bill. If you still have questions about your bill, contact Provider Relations at 1-877-328-7098.

Do I give any rights to the State of North Dakota when I receive Medicaid?

As a condition of eligibility, you must cooperate with the Department and the Human Service Zone office in identifying and providing information to assist Medicaid in pursuing third parties who may be liable to pay for care or services, unless there is good cause not to cooperate. The Department and Human Service Zone staff are required to make reasonable efforts to obtain the necessary information needed to pursue third parties. You must also report any payments you receive for health care services within 10 days of receiving the payment.

Will Child Support be involved?

If you receive Medicaid for children under age 18, you have the choice whether to get help from the Child Support Program in establishing paternity and establishing and enforcing child support and medical support. (See the Child Support section for more information.) You do not have to cooperate with Child Support, but you are encouraged to do so.

What are the rules of the Medicaid Program?

You must:

- Provide all information needed to determine your eligibility, including information on third parties who may be responsible to pay for services
- Provide true information
- Cooperate with Child Support in establishing paternity and in establishing and enforcing medical support for children whose parent(s) do not reside in the home. (This rule does not apply if you are pregnant or the only eligible family members in the case are children.)

What happens if I do not follow the rules of the Medicaid Program?

- If you provide false information, your benefits may be denied or terminated and you may be reported for fraud.
- State and federal law allows for a fine, imprisonment, or both, for any person who withholds or provides false information to obtain assistance to which he or she is not entitled.

- A relative caring for a child, who does not cooperate in establishing a child's paternity or in establishing and enforcing medical support, may lose Medicaid benefits. (This rule does not apply if you are pregnant or the only eligible family members in the case are children.)

What information do I need to report after I am eligible?

You need to report changes within 10 days. Changes that must be reported include:

- A household member becomes pregnant
- A baby being born
- Someone leaving the house
- Someone moving into the house
- A new job
- A change in income or assets
- A new address
- A change in health care coverage
- A child quits or begins school

Medicaid Services and Limits

This table has information about health care services covered by North Dakota Medicaid. Covered services may change. Different rules may apply for members in the Coordinated Services Program.

Rules for receiving out of state services still apply. See the section “What if my health care providers tells me I need to go out of state for medical care?” following this chart for more information.

Referral: A referral is when your health care provider writes an order or recommendation for you to receive another kind of health care service. Your health care provider may require referrals that ND Medicaid does not.

Service authorization: This means getting approval from ND Medicaid before you receive certain medical services or treatments. Your health care provider must do this for you.

Service limits: Services may be limited by age, number of visits, dollar amounts, or other reasons.

Service	Provider Referral Needed	Service Authorization Needed	Service Limits
Emergency Services			
Ambulance Services		X For out-of-state non-emergency services only	
Emergency Services			
Primary Care Services			
Physicians (doctors), physician’s assistants, Nurse Practitioners			
Health Tracks			X Ages 0-20
Local Public Health Units			
Vaccines			X Some age limits apply
Reproductive Services			
Midwife Services from a Certified Nurse			

Service	Provider Referral Needed	Service Authorization Needed	Service Limits
Family Planning			
Specialty Care Services			
Chiropractor Services		X Yes, after limit is reached	X 20 manipulations and 2 x-rays per year
Podiatry			
Ambulatory Surgery Centers		X Some services need approval	
School-based Services			
Individual Education Program (IEP) and Non-IEP Services		X Some services need approval	X Ages 0-20
Home and Community-Based Services			
Personal Care Services (In a member's home)		X	X
Home Health Care Services	X	X Yes, after limit is reached	X 50 visits per year
Home and Community-Based Services (HCBS) Waiver		X Must be screened and need a certain level of care	X
Private Duty Nursing Providers (Non-Institutional Settings)		X	X
Hospice		X	X
Diagnostic Tests			
Lab Work, Radiology, and Other Tests	X	X Some services need approval	X
Therapy			
Medical Nutritional Therapy	X	X Yes, after limit is reached	X 4 hours per year

Service	Provider Referral Needed	Service Authorization Needed	Service Limits
Medication Therapy Management		X	X Some limits apply
Occupational Therapy	X	X Yes, after limit is reached	X 30 visits per year for ages 21 & over
Physical Therapy	X	X Yes, after limit is reached	X 30 visits per year for ages 21 & over
Speech Therapy	X	X Yes, after limit is reached	X 30 visits per year for ages 21 & over
Dental, Vision, and Hearing			
Optometric Services (Vision)		X Some services need approval	X
Dental Services		X Some services need approval	X Some services are limited and some age restrictions apply
Orthodontia Services (Braces or Tooth Straightening)	X May be referred from Health Tracks or dentist	X	X Ages 0-20
Hearing			
Behavioral Health Services			
1915(i) Services		X	X Limits for certain services
Autism Spectrum Disorder Applied Behavioral Analysis (ABA) Services		X Reviewed at 180 days and approved annually	X Ages 0-20
Behavioral Health Rehabilitative Services	X		X Some services have limits

Service	Provider Referral Needed	Service Authorization Needed	Service Limits
In-patient (Hospital) Psychiatric Services		X If under age 21	X Some services are limited to ages 21-64
Partial-Hospitalization Program			X Some services have limits
Psychiatric Residential Treatment Facilities (PRTF)		X	X Ages 0-20
Substance Use Disorder Treatment Services			X Some services have limits
Targeted Case Management			X
Health Centers and Clinics			
Federally Qualified Health Centers (FQHC)			
Rural Health Clinics			
Hospital (Inpatient)			X Rehab limited to 30 days per stay for adults
Hospital Swing Bed Services		X Must meet level of care	
Nursing Facility Services		X Must meet level of care	X
Intermediate Care Facilities (ICF) for Individuals with Development Disabilities		X Must meet level of care	
Prescription Drugs, and Medical Equipment and Supplies			
Durable Medical Equipment (DME), hearing aids, medical equipment and supplies, and prosthetics	X	X Some services need approval	X Some limits and age restrictions apply
Pharmacy	X	X Some services need approval	X Some limits apply

Service	Provider Referral Needed	Service Authorization Needed	Service Limits
Transportation			
Non-Emergency Medical Transportation		X Some services need approval	

What if my health care provider tells me I need to go out of State for Medical Care?

- You must get approval from Medicaid each time before you receive medical services outside of North Dakota.
- Medicaid can only pay for out of state services when you have received approval.
- If it is a medical emergency, your health care provider may need to send you out of North Dakota immediately. In these rare situations, your health care provider will need to submit an SFN 769 Service Authorization for Out of State Services and supporting medical documentation within 48 hours.
- If you are receiving medical services in South Dakota, Minnesota or Montana that are within 50 miles of North Dakota, you do not need an out of state approval (other prior authorization for specific services may be necessary).
- ND Medicaid cannot pay for services received outside the United States.

To get approval, your health care provider will need to send Medicaid the following things:

- The out of state services request form.
- A request from a North Dakota specialist.
- Medical records about your health that support the need for out of state services.
- Assurance that the health care services are not available in North Dakota.

Getting approval will take 2-3 weeks unless it is medically urgent. Make sure the request gets to Medicaid at least 3 weeks before your appointment.

- If your health care provider has any questions about this, they can contact the Medicaid office.

If you need help with the trip out of state, call your human services zone eligibility worker.

- The worker may be able to help arrange your travel, meals and lodging.
- Your worker must wait until they receive a copy of the out of state approval from Medicaid before they authorize services and can help you arrange travel, meals and lodging.
- Medicaid only reimburses enrolled providers and cannot reimburse you for travel, meals and lodging expenses.
- If you have any questions, contact the Medicaid utilization review staff at 701-328-2159 or (Fax) 701-328-0376.

Health Tracks

What is Health Tracks?

Health Tracks and Well Child Check Services are preventative health programs. Both are free to those under age 21 who are eligible for Medicaid and do NOT have a recipient liability (your out-of-pocket costs).

How will I know if my child is eligible for a Health Tracks Screening?

Children eligible for a Health Tracks screening will receive a notice letting them know they are eligible and due for a Health Tracks screening and Well Child Check.

What happens during a Health Tracks screening?

During a Health Tracks screening, a child may receive:

- Vaccines
- Dental Screening
- Developmental Screening
- Hearing Screening
- Lead Screening
- Mental health screening
- Head-to-toe physical examination
- Vision Screening

What happens after a Health Tracks Screening?

Referrals may be made for further diagnosis and treatment services:

- Vaccines, if not given
- Counseling
- Dental Care
- Developmental Services
- Hearing Care
- Vision Care
- Lab Testing
- Prescriptions
- Orthodontic treatment (braces for teeth)

How can I receive these services?

Contact your local public health unit or primary care provider/clinic to schedule an appointment.

Emergency Room & Ambulance Services

Emergency Room Services

When should I seek services from a hospital emergency room?

When you have an emergency medical condition, go to the nearest hospital or call 911.

An emergency medical condition is a condition that could result in serious harm or would place your health in danger.

If you are pregnant this includes your health and the health of your unborn child.

What is urgent care?

Urgent care is appropriate for an illness or injury that is not life threatening; however, requires medical attention immediately. Urgent care clinics (or walk-in clinics) provide easy access to healthcare for an urgent care condition when your regular primary care provider is unable to offer a timely appointment or if the illness/injury occurs outside of regular office hours. Examples of urgent care include:

- Accidents and falls
- Cuts that do not involve much blood but might need stitches
- Diagnostic services, including X-rays and laboratory tests
- Eye irritation and redness
- Fever or flu
- Minor broken bones and fractures in fingers or toes
- Moderate back problems
- Severe sore throat or cough
- Skin rashes and infections
- Sprains and strains
- Urinary tract infections
- Vomiting, diarrhea, or dehydration
- Dental pain

Ambulance Services

When is it appropriate to use an ambulance?

Ambulance services are meant to provide transportation and care when a person has an emergency medical condition.

When are ambulance services covered by Medicaid?

Medicaid covers ambulance services provided for an emergency medical condition. For non-emergency medical conditions, other methods of transportation must be used. If you use an ambulance for a non-emergency medical condition, you will be responsible for the ambulance charges.

Medicare Savings Programs

What are the Medicare Savings Programs?

The Medicare Savings Programs assist with Medicare costs for individuals with limited income and assets.

What Medicare costs can the Medicare Savings Programs pay?

This program can pay your:

- Monthly Medicare Part B Premium and the annual deductible
- Medicare co-insurance costs (20% of Medicare-approved charges for services)
- Medicare deductible for hospital services
- Monthly Medicare Part A Premiums (hospital insurance) if you do not receive Part A free of charge

Eligibility for one of the Medicare Savings Programs automatically deems individuals to be eligible for the extra help with Medicare Part D Drug Plans.

Who may be eligible?

Individuals who are eligible for Medicare Part A (including Premium-Part A) may be eligible.

What are the income and asset limits?

Monthly income from wages, Social Security, pensions, veteran's benefits or other sources must be less than the current income eligibility level. Only a portion of your wage is counted. Income levels change each year. Contact your local Human Service Zone office for the current levels.

Your savings and other assets (do not include one vehicle, your home, clothing or household goods) must have a value of less than Medicare Part D Low Income Subsidy asset levels in the year you apply. For current values, contact your local Human Service Zone office.

Optional Children's Group

This category is formerly known as Healthy Steps and is a new Medicaid coverage group Effective January 1, 2020. Please refer to Medicaid Services and Limits section of the Guidebook.

Who May Be Eligible?

- Children:
 - Under age 19 (including the month the child turns 19); and
 - Who do not have health insurance.

Medicaid Estate Recovery

What is Medicaid estate recovery?

State and Federal law requires HHS to make claims against the estate of a deceased Medicaid member:

1. Who was age 55 or older when the individual received Medicaid services; or
2. Who was permanently institutionalized regardless of age and received a Notice of Permanent Institutionalization; or
3. Upon the death of the surviving spouse of the Medicaid member.

State law controls the distribution of a decedent's estate. It limits the kind of claims that can be paid before any Medicaid claim. Funeral expenses are limited.

Individuals who want to dis-enroll from Medicaid coverage because of estate recovery may contact the Customer Support Center at (701) 328-1000; Toll-Free (866) 614-6005; TTY 711.

Effective January 1, 2010, payments made for Medicare cost sharing after January 1, 2010, are exempt from Medicaid estate recovery.

Effective August 1, 2015, except for the portion of the payment made to a private carrier for nursing facility services, home and community-based services, and hospital and prescription drug services received while in a nursing home or while receiving home and community-based services, payments made to a private insurance carrier are exempt from Medicaid estate recovery.

Effective January 1, 2020, pharmacy services provided through Medicaid Expansion are subject to Medicaid estate recovery.

What if there is a surviving spouse or children?

No claim for Medicaid benefits must be paid during the lifetime of a Medicaid decedent's surviving spouse or while a recipient has a surviving child who is under age 21 or blind or disabled.

What if the decedent leaves a will?

A decedent's estate must first pay the decedent's debts. A will does not change that. Unless an estate has sufficient liquid assets to pay all claims, estate property is sold to pay the claims. Family members can purchase estate property at fair market value.

Can funeral expenses be paid from an estate?

Effective August 1, 2019 individuals applying for Medicaid coverage will need to set up an irrevocable funeral contract if they chose to set aside an amount for funeral expenses.

If there are no funds designated for funeral expenses, the estate can spend no more than \$3,000 for funeral expenses.

Family and friends may use their own money to help pay for funeral expenses. Additional amounts may not be paid from assets in the decedent's estate before Medicaid claims are paid in full.

What other claims can be paid before the Medicaid claim is paid?

The decedent's estate can pay recipient liability applicable to the month of death, funeral

expenses, expenses of the sickness or condition that caused the decedent's death, the necessary and reasonable costs of administration, certain other assistance claims, and claims on behalf of the state hospital. The Medicaid claims must be paid in full before other creditors or claims can be paid.

What if an account is payable to someone else at the decedent's death?

Unless all estate claims are paid in full, money a decedent left in a joint account, an "in trust for" (ITF) account, or any other payable on death (POD) account must be made available to pay claims and costs of probate. If the money was properly designated for funeral expenses, the money can be used for that purpose.

How is a Medicaid claim made?

If a decedent has less than \$100,000 and does not own a home, HHS will usually collect the amount that must be paid for Medicaid claims using an Affidavit for Collection of Personal Property. Sometimes family members will be asked to help sell personal property such as a vehicle, or if there is some reason a probate is necessary, HHS will contact the family to discuss the need for a probate. HHS will usually initiate probate only if there is no family member willing or able to do so.

What should I do if I need help reviewing this information?

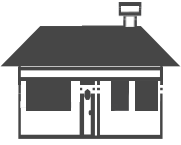
This manual provides only general information about estates and Medicaid claims. If you have questions about probate or wills, or if you are the personal representative for an estate, please ask your private attorney. If you need assistance in reviewing the information in this manual, please contact your local Human Service Zone office.

Protections for American Indians and Alaskan Natives (AI/AN's)

Section 5006 of the American Recovery and Reinvestment Act exempts certain Indian income, resources, and property from being subject to Medicaid estate recovery for AI/AN's. The Medicaid program is not permitted to recover any expenses from any of the following types of an AI/AN's income, resources, or property:

- Property-including real property and improvements (such as land and buildings) that is (1) held in trust, subject to federal restrictions, or under the supervision of the Secretary of the Interior; or (2) property located on a reservation. For example, a home, an oil and gas royalties from the land, are both exempt from Medicaid estate recovery
- Ownership interests in rents, leases, royalties, or usage rights related to natural resources (including extraction of natural resources or harvesting of timber, other plants and plant products, animals, fish, and shellfish) resulting from the exercise of federally protected rights
- Ownership interests in or usage rights to items that have unique religious, spiritual, traditional, or cultural significance, or rights that support subsistence or a traditional lifestyle according to applicable Tribal law or custom

Property that is not described above is subject to Medicaid estate recovery. In order to be exempt, the property must derive from protected property (i.e. can be traced back to protected property). For example, a family must be able to document that the money in decedent's bank account came from one of the previously listed types of protected property to be exempt.



Basic Care Assistance Program

What is the Basic Care Assistance Program?

The Basic Care Assistance Program helps qualifying individuals who reside in licensed basic care facilities pay for their room and board.

What are the program requirements?

To be eligible an individual must:

- Be 65 years of age or older or 18 years of age or older and disabled or blind
- Be a resident of North Dakota
- Be eligible for Medicaid
- Have income less than the cost of room and board
- Receive a home and community-based services assessment that identifies a need for basic care services

Who receives Basic Care Assistance payments?

The payments are made directly to the licensed basic care facility. The licensed basic care facility must be an enrolled ND Medicaid provider.

What happens if I give away income or assets?

An individual is ineligible for Basic Care Assistance if the individual or the spouse gives away assets or income for less than fair market value within 36 months of the date of the application.

What are the rules of the Basic Care Assistance program?

Information must be provided to determine eligibility including Social Security number, proof of citizenship, proof of age, proof of identity, proof of relationship, proof of blindness or disability, and income and assets. All changes in circumstances must be reported.

For more information contact the Customer Support Center.



Child Support

What is Child Support?

The Child Support program helps children get support from the parent not living in the home (absent parent).

Child Support cannot help with visitation or custody.

How can I get Child Support services?

- If your family receives Temporary Assistance for Needy Families (TANF) and one parent is not living with the child, your family will automatically be referred to Child Support for services.
- If your family receives Medicaid and one parent is not living with the child, or the child's paternity needs to be legally established, you can get Child Support services by providing any requested information about the absent parent or asking for a referral to Child Support. A referral may be required if the child is in foster care.
- You can apply for services directly from Child Support if you want services but do not meet the referral criteria explained in the prior two bullets.

Will I need to cooperate with Child Support?

- If your family receives TANF, you must cooperate with Child Support in establishing paternity and in establishing and enforcing child support.
- If you and your children receive Medicaid you have the choice whether to cooperate with Child Support in establishing paternity and in establishing and enforcing child support and medical support. You do not have to cooperate with Child Support, but you are encouraged to do so.
- If you are interested in receiving TANF and your cooperation with Child Support might not be in the best interest of your child (example: domestic violence situation), you may claim 'good cause.' If you claim 'good cause', you will need to provide additional information so 'good cause' can be established.

What do I have to do to cooperate?

You will be asked to cooperate in different ways. You will need to work with Child Support to the best of your ability in whatever they ask you to do. For example, Child Support may require you to complete forms about your family and the absent parent. If paternity needs to be established, you may need to meet with Child Support to provide necessary information and have genetic tests.

What if I do not know where the absent parent is living or working?

Child Support may be able to help. Child Support has access to many records, including unemployment, motor vehicle, driver's license, credit bureau, and state and federal tax records. There are laws that require employers to report newly hired employees to Child Support. Child Support also works with the federal Office of Child Support Services to find the absent parent.

What if I am not sure who the father of my child is?

A genetic test will be performed and is very accurate. Genetic test is sometimes called DNA test. There is no fee for genetic testing.

Is it important to legally establish paternity?

Yes. Legally establishing paternity provides a child certain legal rights. Legal rights can include establishment of a child support order, access to family medical history, insurance coverage, disability or survivor's benefits, and inheritance rights.

Do I have to go court to legally establish paternity?

There are ways to establish paternity without going to court. If the mother and the father agree he is the father, both parents can sign [SFN 8195 - North Dakota Acknowledgment of Paternity](#) form to establish paternity. You should talk with Child Support about your specific situation.

What will the absent parent be ordered to pay?

The amount of the child support the absent parent will be ordered to pay depends on the financial situation of the absent parent. Child Support will gather information the court needs and will recommend to the court how much the absent parent should pay. The court makes the final decision about how much the absent parent will be ordered to pay. There are guidelines that Child Support and the courts must follow. The court may also order health insurance for the children.

What if the absent parent refuses to pay child support?

Child Support can help collect child support that has been ordered. The most common way to collect is to require the absent parent's employer to withhold the support from the absent parent's paycheck. Another common way to collect past-due child support is to take the absent parent's federal or state tax refund.

What if the absent parent refuses to get health insurance for my child?

Child Support can help get health insurance that has been ordered. The most common way to get a child enrolled in health insurance is to require the absent parent's employer to enroll the child in health insurance that is available through employment.

How can I get more information about Child Support?

Phone: 701-328-5440 or **Toll-Free:** 1-800-231-4255

TTY: 711

Visit: www.childsupportnd.gov

Email: childsupport@nd.gov

Mail: Child Support

PO Box 7190

Bismarck, ND 58507-7190

State Disbursement Unit (payments only) PO

Box 7280

Bismarck ND 58507-7280



Quality Control

What is Quality Control?

Quality Control reviews Economic Assistance programs. Cases are randomly selected each month for review. These reviews are done to make sure that:

- Individuals who receive benefits are eligible for them
- Individuals who are eligible are not denied benefits
- Individuals receive the correct amount of benefits

How will this affect me?

If you are a SNAP recipient and your case is chosen, you will be informed by mail. Your file will be reviewed, and an interview will be required. SNAP is the only program with these requirements. The reviewer will ask you to bring information to verify your eligibility. This may include:

- Bank statements
- Income verifications
- Medical expenses
- Rent receipts
- Social Security cards

The reviewer will also ask for your written consent to contact others for information needed to complete the review.

What happens if I do not cooperate?

You may lose your benefits if you do not cooperate with Quality Control.



What is the policy of HHS?

Discrimination means treating someone differently because of a particular characteristic such as race, color, sex, age, disability, or religion.

The policies of HHS require that:

- You are given the chance to apply for assistance or services, or both.
- The same eligibility standards apply to you as apply to others in similar situations.

N.D. HHS NONDISCRIMINATION STATEMENT

In accordance with federal and state law, HHS is prohibited from discriminating on the basis of race, color, sex, age, disability, national origin, religion, or status with respect to marriage or public assistance. In accordance with the U.S. Department of Agriculture (USDA), HHS is also prohibited from discriminating against political beliefs or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by the USDA. These laws must be followed by anyone who contracts with or receives funds to provide services for HHS, including the state's eight regional Behavioral Health Clinics, the State Hospital, the Life Skills and Transition Center, and Human Service Zone offices. <https://www.hhs.nd.gov/nondiscrimination-policy>

FNS USDA Nondiscrimination Statement

In accordance with federal civil rights law and USDA civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the state or local Agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY). Additionally, program information may be made available in languages other than English.

USDA is an equal opportunity provider, employer, and lender.

<https://www.fns.usda.gov/civil-rights/nds>

WIC USDA Nondiscrimination Statement

In accordance with federal civil rights law and USDA civil rights regulations and policies, the USDA, its agencies, offices, employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the state or local agency that administers the program or contact USDA through the Telecommunications Relay Service at 711 (voice and TTY). Additionally, program information may be made available in languages other than English.

USDA is an equal opportunity provider, employer, and lender.

<https://fns.usda.gov/civil-rights/nds>

U.S. HHS NONDISCRIMINATION STATEMENT

The U.S. Department of Health and Human Services (HHS) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, religion, or sex. HHS does not exclude people or treat them differently because of race, color, national origin, age, disability, religion, or sex.

HHS:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact HHS at 1-877-696-6775.

<https://www.hhs.gov/civil-rights/for-individuals/nondiscrimination/index.html>

What do I do if I believe someone has discriminated against me?

You may file a written complaint if you believe you have been discriminated against because of race, color, sex, age, disability, national origin, religion, or status with respect to marriage or public assistance, in accordance with Title VI of the Civil Rights Act, Section 504 of the Rehabilitation Act, the Age Discrimination Act, the Americans with Disabilities Act, and the North Dakota Human Rights Act, or if you believe you have been discriminated against because of your political beliefs, in violation of USDA policy.

To file a program discrimination complaint, complete a Civil Rights Complaint Form or write a letter and provide the following information:

- Name
- Address
- Program Name
- Details of complaint including date it occurred

ND HHS Civil Rights Complaint Form (SFN 143) is available online at:

<https://www.hhs.nd.gov/nondiscrimination-policy>

To request a copy of the complaint form, call (701) 328-2311 or (800) 472-2622; TTY 711.

FNS USDA Civil Rights Complaint Form (AD-3027) is available online at:

<https://www.usda.gov/about-usda/general-information/staff-offices/office-assistant-secretary-civil->

[rights/how-file-program-discrimination-complaint](#)

To request a copy of the complaint form, call (866) 632-9992; TDD (202) 260-1026

WIC USDA Civil Rights Complaint Form (AD-3027) is available online at:

<https://www.usda.gov/about-usda/general-information/staff-offices/office-assistant-secretary-civil-rights/how-file-program-discrimination-complaint>

To request a copy of the complaint form, call (866) 632-9992; TDD (202) 260-1026

US HHS Civil Rights Complaint Form (HHS-700) is available online at:

<https://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html>

To request a copy of the complaint form, call (800) 368-1019; TDD (800) 537-7697

Where do I file a complaint?

If you need accommodation or have questions related to discrimination, you may contact any of the following offices.

Forms or written letters may be submitted by mail, fax, email or online portal if available.

ND HHS

Legal Division
Department of Health and Human Services
600 E Boulevard Ave, Dept 325
Bismarck ND 58505-0250
Fax: (701) 328-2173
Email: dhslau@nd.gov

FNS USDA*+

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Mail Stop 9410
Washington, D.C. 20250-9410
Fax: (202) 690-7442
Email: program.intake@usda.gov
Online portal: <https://www.usda.gov/about-usda/general-information/staff-offices/office-assistant-secretary-civil-rights/how-file-program-discrimination-complaint>

WIC USDA*+

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Ave, SW
Mail Stop 9410
Washington, D.C. 20250-9410
Fax: (202) 690-7442
Email: program.intake@usda.gov
Online portal: <https://www.usda.gov/about-usda/general-information/staff-offices/office-assistant-secretary-civil-rights/how-file-program-discrimination-complaint>

US HHS*

Central Case Management Operations
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
Fax: (202) 619-3818
Email: OCRMail@hhs.gov
Online portal: <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>

*State and local agencies are required to comply with the North Dakota Human Rights Laws that prohibit discrimination based on “status with respect to marriage or public assistance.” Federal agencies are not required to investigate complaints based on the North Dakota Human Rights Laws.

+ Under USDA policy, discrimination is also prohibited on the basis of political beliefs.

When should I file a complaint?

The complaint must be filed within 180 days of the incident. Include in your complaint the nature of the discrimination, where and when it took place, who discriminated against you, and all other important facts. Remember to date the form and sign your name.

What happens when I file a complaint with the HHS Civil Rights Office?

The HHS Civil Rights Office will determine if the nature of the complaint is within its jurisdiction. If the complaint is within the jurisdiction of the agency, an investigation will be conducted, and you will know the outcome of the complaint within 60 business days of when it was filed. If the complaint is not within the jurisdiction of the agency, you will receive a letter. If you file your complaint with another agency, they will notify you according to their policies.



CIVIL RIGHTS COMPLAINT
 DEPARTMENT OF HEALTH AND HUMAN SERVICES
 LEGAL DIVISION
 SFN 143 (6-2025)

Clear Fields

Individual or Organization Against Whom the Complaint is Made

Basis of the Discrimination (check all that apply)

Race
 Age
 Disability
 Religion
 National Origin
 Political Beliefs+
 Color
 Sex
 Status with Respect to Marriage or Public Assistance

Reason for Complaint - Describe in detail when, where, and how the alleged discrimination occurred.

Signature (If electronically submitted, a typed name is considered a signature)		Date	
Name		Telephone Number	
Address	City	State	ZIP Code

Send to: Legal Division
 Department of Health and Human Services
 600 E Boulevard Ave Dept 325
 Bismarck, ND 58505-0250
 (701) 328-2311 TTY 711 FAX: (701) 328-2173

Submit by Email



What is LIHEAP?

The purpose of the Low Income Home Energy Assistance Program (LIHEAP) is to provide home energy assistance to eligible low income households. HHS and the Human Service Zone offices administer the LIHEAP program. Services that are available through LIHEAP are explained within this guidebook.

Who may be eligible?

You may be eligible if you meet the income limitations of the program and are responsible for paying your home heating costs. The total adjusted income of all persons living in the household must be counted. There are deductions for allowable expenses such as child care, child support, medical expenses and 27% income deductions on earned income. Contact your local Human Service Zone office for any questions relating to eligibility requirements or allowable deductions as these may change with each heating season.

Who should apply?

- Households who buy their home heating fuel (fuel oil, propane, natural gas, electricity, wood, coal, and kerosene) from a fuel vendor or utility company,
- Households whose rent payments include the cost of heating, if you do not receive a rent subsidy,
- Households who need assistance with non-repairable furnaces,
- Household whose fuel costs are high due to the age or condition of home,
- Households who have difficulty paying fuel bills due to other rising costs and are in danger of losing their heating source.

How do I apply?

Apply for LIHEAP at your local Human Service Zone office. Application are accepted at Human Service Zone offices from October 1 – May 31 of each heating season, or until program funds are used up. You must re-apply each heating season. You can also obtain an application form your local Community Action Agency and various agencies in your area.

For more information including income limits and how to apply, visit <https://www.hhs.nd.gov/applyforhelp/liheap>

If you need help applying for assistance, your local Human Service Zone office staff, a friend or a relative can assist you in completing the application.

NOTE: The Human Service Zone office cannot approve your application unless it is signed and you have given them proof of your income and heating costs. Verifications must be received within 30 days. Any deductions for medical expenses, child care or child support must also be verified within 30 days to be allowed.

What happens after I apply?

You will be notified of a decision on you application within 45 days from the date your local Human Service Zone receives your signed application.

What services are available, and how are the services paid?

1. **Heating:** LIHEAP can pay for a portion of home heating costs incurred in any month (between October and May) for which you are determined eligible. You cannot use LIHEAP benefits to “stockpile” extra fuel by filling storage tanks that are not connected to your furnace. The amount of the benefits depends on your income, the type and size of your home, and the type of fuel used to heat your home.

There are three different methods of payments.

- **Payments directly to a fuel vendor** - If you buy your fuel from a fuel vendor or utility company, your bill will be sent by the vendor directly to the state LIHEAP office, and the payment will be returned directly to your fuel vendor or utility company.
 - **Reimbursements to household** - If eligible, you can be reimbursed if you have already paid the fuel vendor for heating costs incurred during any eligible month.
 - **Renter payments** - If your heating costs are included in your rent and you do not receive a rent subsidy, a payment will be made directly to you each month that you are eligible.
2. **Weatherization:** The weatherization program helps low income people make their homes and apartments energy efficient. Weatherization seals a home to keep warm air in and cold air out during the winter. Weatherization services are performed by skilled crews from one of the seven Community Action Agencies after conducting an energy audit of the home to determine what types of weatherization services are needed. The weatherization program is funded by LIHEAP. If you are eligible for LIHEAP, there is no charge for the weatherization program.
 3. **Furnace and Chimney Cleaning:** Benefits can be paid to clean the furnace of a LIHEAP eligible household. If you are a renter, check with your local Human Service Zone office regarding this service. An additional payment may be allowed for chimney cleaning when necessary for safety. Contact your local Human Service Zone office for maximum amounts allowed for these services. **Prior authorization by the Human Service Zone office is required.**
 4. **Emergency Assistance:** LIHEAP funds are available when there is a home energy emergency that may threaten the life of your family. Emergency Assistance applications are accepted year-round. Contact your local Human Service Zone office. **Households in need of Emergency Assistance are encouraged to submit requests before a shut off or other emergency has occurred.**

Appropriate community and personal resources and personal liquid assets are to be considered before Emergency Assistance is approved.

Emergency services may include the following:

- ▶ **Fuel:** Payments to assist with your co-payment when you have unusual expenses or income changes.
- ▶
- ▶ **Furnace Replacements:** Payments for the cost of a furnace for an eligible individual

homeowner or eligible renter with verifiable responsibility for the maintenance of their furnace. You must look for other sources to pay for the furnace replacement before requesting assistance from LIHEAP. Human Service Zone offices refer eligible households that need a furnace replaced to an area Community Action Agency.

Replacement is considered only when furnaces are: A) unsafe, B) not operable, C) or cannot be repaired. Clients may be required to share in the cost of the new furnace. **THIS SERVICE MUST BE PRE-AUTHORIZED.**

- ▶ **Consumer Goods:** Payments to purchase or rent supplemental heating or cooling devices, or to provide temporary shelter outside their home when an emergency occurs.
- ▶ **Minor energy related home repairs:** Minor repairs to a home or heating plant can be provided only if the weatherization services cannot be provided. **Contact your eligibility worker prior to making minor repairs. THIS SERVICE MUST BE PRE-AUTHORIZED.**
- ▶ **Electric Utilities:** Primary responsibility for emergency payment for electric utilities (lights only) will be assumed by Energy Share through the Community Action Agency in your region **except** when the household's main source of heat is electricity. Emergency payment for electric utilities in homes heated by electricity will be assumed by LIHEAP. LIHEAP cannot issue electric utility payments under any circumstances for persons who do not meet the program requirements. **Contact your eligibility worker for details regarding assistance with electric utilities.**
- ▶ **Cooling Devices:** A temporary cooling program may be implemented in the event of unusual cooling needs due to weather abnormalities, if there are funds available after the regular heating season. Cooling devices are available for eligible recipients who are most vulnerable to heat related illnesses.
- ▶ **Energy Cost Reduction Devices:** If you heat with electricity, consider installing a separate meter for heat, a backup heating system or a "Demand Controlling Device" so you can qualify for much lower electric heating rates. Funds are sometimes available to help with some installation costs. Ask for more information at your Human Service Zone office or your electric utility company.



Women, Infants and Children (WIC) Program

What is the WIC Program?

The North Dakota Women, Infants and Children (WIC) program offers healthy food for proper growth and development and helps families choose healthier ways of eating. WIC is available in all counties in North Dakota.

WIC gives nutritious foods; nutrition information, counseling and support; breastfeeding information and support; health screenings; and referrals to other services.

Who may be eligible to receive WIC?

The WIC program is for households that include a pregnant woman a woman who is breastfeeding, or a woman who recently had a baby. WIC is also available to households with an infant or child younger than 5 years of age. If you are a parent, grandparent, or a caretaker or guardian of a child younger than 5, you can apply for WIC.

What are the Income Limits?

To qualify for WIC, household income must be below the income level, which is based on gross income, unless you someone in the household is self-employed. Income levels may change each year. Visit the WIC website or contact the local WIC office for the current income eligibility levels.

Note: If you receive Medicaid, TANF, or SNAP (food stamps) you are eligible for WIC even if your income is above the WIC guidelines.

How do I apply for WIC?

To apply, contact your local WIC office. You can visit <https://www.hhs.nd.gov/food-programs/WIC> or call the state WIC Program toll free at 1-800-472- 2286 to receive contact information for your local WIC office.

For more information, contact your local WIC office or visit <https://www.hhs.nd.gov/food-programs/WIC>.



Family Planning Program

Note: this chapter is related to the Family Planning Program operated by the ND Department of Health and Human Services. It is not related to Medicaid-funded family planning services. Family planning services are covered by ND Medicaid. For more information, please refer to the Medicaid section of this Guidebook.

What is Family Planning?

Family planning helps you decide the number of children you want and when you want to have them. It is a decision for you and your partner to make together.

Who can use services at a Family Planning clinic?

Family planning services are available regardless of age, gender, race, nationality, color, religion, marital status, sex, disability or ability to pay.

What is the cost of services at a Family Planning clinic?

Individuals are charged for services according to their household income and family size. Private pay collections, insurance, Medicaid, Medicare and donations are accepted.

What services are available at a Family Planning clinic?

Physical exams for men and women.

Abstinence.

Birth control methods and referral for sterilization procedures.

Breast, cervical and testicular cancer screening.

Diagnosis and treatment of sexually transmitted infections.

Preconception and life plan counseling.

Pregnancy testing.

Counseling and education.

Community education and outreach.

Referrals to preventive health and social services such as primary care, nutrition services, immunizations, WIC and others.

Fertility awareness-based methods.

Basic infertility services.

Services for adolescents

A list of North Dakota Family Planning Clinics can be found at <https://www.hhs.nd.gov/cfs/family-planning/clinic-directory>

All Services are Strictly Confidential!

For more information, contact the agency nearest you, visit <https://www.hhs.nd.gov/cfs/family-planning> or call (800) 472-2286 (toll free).



Community Resources

Your local Human Service Zone office provides information and referral services. Following are examples of programs and services available to help your family. Let your local Human Service Zone office know if you are interested in any of the programs or services. Asking for information does not require you to be referred or to participate. Not all programs or services are available every- where in the state.

Programs to help elderly stay in their home

- Homemaker/ Home Health Aid Services
- Meals on Wheel/ Senior Meals
- Aged and Disability Resource LINK
(www.carechoice.nd.gov)
- Senior Companion Programs

Programs to find child care or help pay child care

- Child Care Assistance Program
- Child Care Resource and Referral Service
- Tribal Child Care Assistance Program

Children/Youth Programs

- Human Service Zone and Tribal Social Services
- Head Start/Early Head Start Program
- Free and Reduced-price School Lunch and Breakfast Programs
- Developmental Disabilities
- Salvation Army (After school and summer programs)

Agencies that offer individual, family, marital or credit counseling

- Catholic Family Services
- Indian Health Services
- Mental Health Association
Statewide information, referral and crisis intervention service.
- (disability benefits, survivors' benefits, retirement benefits)

Programs to help you get a job

- Experience Works
- Job Service

Programs to help families without income

- Bureau of Indian Affairs/Tribal General Assistance
- Social Security Administration

- Red Cross – Disaster Counseling
- Regional Behavioral Health Clinics
- Village Family Service Center
- Veteran’s Administration
- Tribal Treatment Programs
- Vocational Rehabilitation
- Tribal Native Employment Works
- Temporary Assistance
for Needy Families
(TANF)
- Unemployment Benefits
- Veterans Administration
- Workforce Safety and Insurance

Programs to help your family to get food or to buy food

- Community Action Program (CAP)
- Commodities - Tribal Food Distribution
- Family Nutrition Education Program
- Supplemental Nutrition Assistance Program (SNAP)
- Food Pantry
- Salvation Army
- Women Infants & Children (WIC)

Programs to assist homeless families or help with shelter costs

- Homeless Shelter or Safe House
- Housing Assistance Program (HAP)
- Energy Assistance Program (LIHEAP)
- North Dakota Fair Housing Council - discrimination or grievance concerns

Health Coverage and Insurance Programs for Children and Adults

- Special Health Services (formerly Children's Special Health Services)
- Health Tracks – Preventative Health Screening
- March of Dimes
- Medicaid
- Planned Parenthood - Women's health and birth control information
- Public District Health Services
- SHIC - State Health Insurance Counselors 1-888-575-6611
- Veteran's Administration

Other

- Child Support
- Earned Income Tax Credit – Special tax break
- Legal Services
- Protection and Advocacy -Support individual's rights
- Telephone Assistance Program - Lifeline/Linkup - Pays for part of phone hook-up and monthly bills
- Translator or Interpreter Services- Assistance for those who have difficulty understanding English



Human Service Zone offices

For information on applying for benefits, eligibility, or an existing case, contact your local Human Service Zone office. Area code (701) for all locations. Contact information along with a map of North Dakota by County and Human Service Zone can be found at <https://www.hhs.nd.gov/human-serivce/zones>.

Zone	Address	City, State Zip	Phone	Fax
<u>Agassiz</u>				
Steel County	201 Washington Ave	Finley, ND 58230	636-5220	636-5221
Traill County	212 W Caledonia Ave	Hillsboro, ND 58045	636-5220	636-5221
<u>Buffalo Bridges</u>				
Barnes County	230 4th St NW Rm 102	Valley City, ND, 58072	845-8521	845-8184
Stutsman County	116 1st St E	Jamestown, ND, 58402	952-6868	252-1561
<u>Burleigh</u>				
Burleigh County	415 E Rosser Ave Ste 113	Bismarck, ND, 58501	222-6622	222-6644
<u>Cass</u>				
Cass County	1010 2nd Ave S	Fargo, ND, 58108	241-5761	239-6820
<u>Central Prairie</u>				
Eddy County	22 9 th St S	New Rockford, ND, 58356	947-5314	947-2960
Foster County	1000 N Central Ave	Carrington, ND, 58421	652-2221	652-2207
Wells County	600 Railway St N #266	Fessenden, ND, 58438	547-3694	547-3348
<u>Dakota Central</u>				
McLean County	712 5th Ave	Washburn, ND, 58577	462-3581	462-3590
Mercer County	1030 Arthur St	Stanton, ND, 58571	462-3581	462-3590
Oliver County	115 Main St	Center, ND, 58530	462-3581	462-3590
Sheridan County	215 E 2nd St	McClusky, ND, 58463	462-3581	462-3590
<u>Eastern Plains</u>				
Griggs County	805 Odegard Ave SW	Cooperstown, ND, 58425	797-2127	797-2172
Nelson County	210 B Ave Wes, Ste 104	Lakota, ND 58344	247-2945	247-2943
<u>Grand Forks</u>				
Grand Forks	151 S 4th Ste 201	Grand Forks, ND, 58206	787-8540	772-1426

Mountain Lakes

Benson County	1314 Dakota Dr	Fort Totten ND 58335	473-5302	766-1843
Ramsey County	524 4 th Ave #19	Devils Lake, ND, 58301	662-7050	662-7095
Rolette County	212 2 nd Ave NE	Rolla, ND, 58367	477-3141	477-5979
Towner County	315 2 nd St	Cando, ND, 58324	968-4355	968-4359

Mountrail – McKenzie

McKenzie County	201 5 th St NW, Ste 790	Watford City, ND 58854	444-3661	444-6436
Mountrail County	18 2 nd Ave SE	Stanley, ND, 58784	628-2925	628-3175

North Star

Burke County	103 Main St SE	Bowbells, ND, 58721	377-2313	377-2302
Divide County	200 N Main St	Crosby, ND, 58730	965-6521	965-6529
Renville County	205 Main St E	Mohall, ND, 58761	756-6374	756-6618
Williams County	110 W Broadway, Ste 202	Williston, ND, 58801	774-6300	572-9794

Northern Prairie

Bottineau County	314 W 5th St, Ste 1	Bottineau, ND, 58318	228-3613	228-3600
McHenry County	407 S Main, Rm 106	Towner, ND, 58788	537-5944	537-5417
Pierce County	240 2nd St SE, Ste 2	Rugby, ND, 58368	776-5818	776-2516

Northern Valley

Cavalier County	324 7th Ave	Langdon, ND, 58249	256-2175	256-2179
Pembina County	300 Boundary Rd W #3	Cavalier, ND, 58220	265-8441	265-8058
Walsh County	516 Copper Ave	Grafton, ND, 58237	352-511	352-5060

Roughrider North

Billings County	67 1st St SE	Beach ND, 58621	872-4212	872-3141
Dunn County	205 Owens St	Manning, ND, 58642	573-5385	573-5070
Golden Valley County	67 1st St SE	Beach, ND, 58621	872-4121	872-3141
Hettinger County	309 Millionaire Ave	Mott, ND, 58646	824-3276	824-2820
Stark County	2680 Empire Rd. Suite A	Dickinson, ND, 58601	456-7675	456-7777

RSR

Ransom County	205 4th Ave W	Lisbon, ND, 58054	683-6133	683-4491
Richland County	413 3rd Ave N	Wahpeton, ND, 58075	642-7751	642-7826
Sargent County	355 Main St S, Ste 7	Forman, ND, 58032	724-6241	724-3323

South Country

Dickey County	205 15th St N	Ellendale, ND, 58436	349-3271	349-3277
Emmons County	100 NW 4th St	Linton, ND, 58552	254-4502	254-4503
Kidder County	120 E Broadway	Steele, ND, 58482	475-2551	475-2297
LaMoure County	202 4th Ave NE	LaMoure, ND, 58458	883-5301	883-4427
Logan County	301 Broadway	Napoleon, ND, 58561	754-2283	754-2282
McIntosh County	112 NE 1st ST	Ashley, ND, 58413	288-5170	288-2186

Southwest Dakota

Adams County	609 2nd Ave N, Ste 2	Hettinger, ND, 58639	567-2967	567-2498
Bowman County	104 1st St NW Ste 8	Bowman, ND, 58623	523-3285	523-5871
Slope County	104 1st St NW Ste 8	Bowman, ND, 58623	523-3285	523-5871

Three Rivers

Grant County	106 2nd Ave NE	Carson, ND, 58529	622-3706	622-3045
Morton County	210 2nd Ave NW	Mandan, ND, 58554	667-3395	667-3384
Sioux County	105 N Agency Ave	Fort Yates, ND, 58538	854-3821	854-2352

Ward

Ward County	225 3rd St SE	Minot, ND, 58702	852-3552	857-0756
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Regional Behavioral Health Clinics

HHS operates eight regional behavioral health clinics, three satellite clinics in Grafton, Rolla and Valley City and 14 outreach offices that provide community-based behavioral health services and 24-hour behavioral health crisis response.

The centers are a safety net that supports individuals and families with limited access to services or resources in their community. The centers prioritize services for individuals with persistent, severe and complex behavioral health disorders that others cannot or will not serve.

No one is refused services because of inability to pay. Fees are adjusted for income and household size. North Dakota Medicaid and private health insurance are accepted.

People experiencing a behavioral health crisis should call 988 for immediate help.

Our Services and Programs

Adult, Youth, and Family Crisis Services

- 24/7 crisis line (988)
- 24/7 in-person and/or tele-crisis response
- Specialized telehealth response
- Crisis psychotherapy
- Crisis stabilization facilities

Team-Based Rehabilitative and Recovery Services

- High-intensity, community-based services that help people improve their daily living, manage their symptoms and achieve recovery goals.
 - Case management
 - Therapy services
 - Substance use disorder services
 - Skills training, skills integration
 - Employment services
 - Peer support
 - Medication management
 - Individual and group therapies

Walk-in Assessments, Immediate Care and Referral Services

- Allows people to engage in services when they are ready
- No appointment needed
- Hours are Monday-Friday 8 a.m. to 5 p.m.

How to Access Service

Bismarck Region – West Central Human Service Center

1237 W. Divide Ave., Suite 5

Bismarck, ND 58501

Phone: (701) 328-8888

Toll-Free: (888) 328-2662

Fax: (701) 328-8900

711 (TTY)

Email: dhschwchsc@nd.gov

Crisis Line: Call 988 for immediate help 24/7

Devils Lake Region – Lake Region Human Service Center

200 Hwy. 2 W.

Devils Lake, ND 58301

Phone: (701) 665-2200

Toll-Free: (888) 607-8610

Fax: (701) 665-2300

711 (TTY)

Email: dhslrhsc@nd.gov

Crisis Line: Call 988 for immediate help 24/7

An outreach office is located in Rolla.

Dickinson Region – Badlands Human Service Center

1463 I-94 Business Loop E.

Dickinson, ND 58601

Phone: (701) 227-7500

Toll-Free: (888) 227-7525

Fax: (701) 227-7575

711 (TTY)

Email: dhsblhsc@nd.gov

Crisis Line: Call 988 for immediate help 24/7

Fargo Region – Southeast Human Service Center

2624 9th Ave. S.

Fargo, ND 58103

Phone: (701) 298-4500

Toll-Free: (888) 342-4900

Fax: (701) 298-4400

711 (TTY)

Email: dhssehsc@nd.gov

Crisis Line: Call 988 for immediate help 24/7

Grand Forks Region – Northeast Human Service Center

151 S. 4th St., Suite 401

Grand Forks, ND 58201

Phone: (701) 795-3000

Toll-Free: (888) 256-6742

Fax: (701) 795-3050
711 (TTY)
Email: dhsnehsc@nd.gov

Crisis Line: Call 988 for immediate help 24/7

An outreach office is located in Grafton.

Jamestown Region – South Central Human Service Center

520 3rd St. N.W.
Jamestown, ND 58401
Phone: (701) 253-6300
Toll-Free: (800) 260-1310
Fax: (701) 253-6400
711 (TTY)
Email: dhsschsc@nd.gov

Crisis Line: Call 988 for immediate help 24/7

An outreach office is located in Valley City.

Minot Region – North Central Human Service Center

1015 S. Broadway, Suite 18
Minot, ND 58701
Phone: (701) 857-8500
Toll-Free: (888) 470-6968
Fax: (701) 857-8555
711 (TTY)
Email: dhsnchsc@nd.gov

Crisis Line: Call 988 for immediate help 24/7

Williston Region – Northwest Human Service Center

316 2nd Ave. W.
Williston, ND 58801
Phone: (701) 774-4600
Toll Free: (800) 231-7724
Fax: (701) 774-4620
711 (TTY)
Email: dhsnwhsc@nd.gov

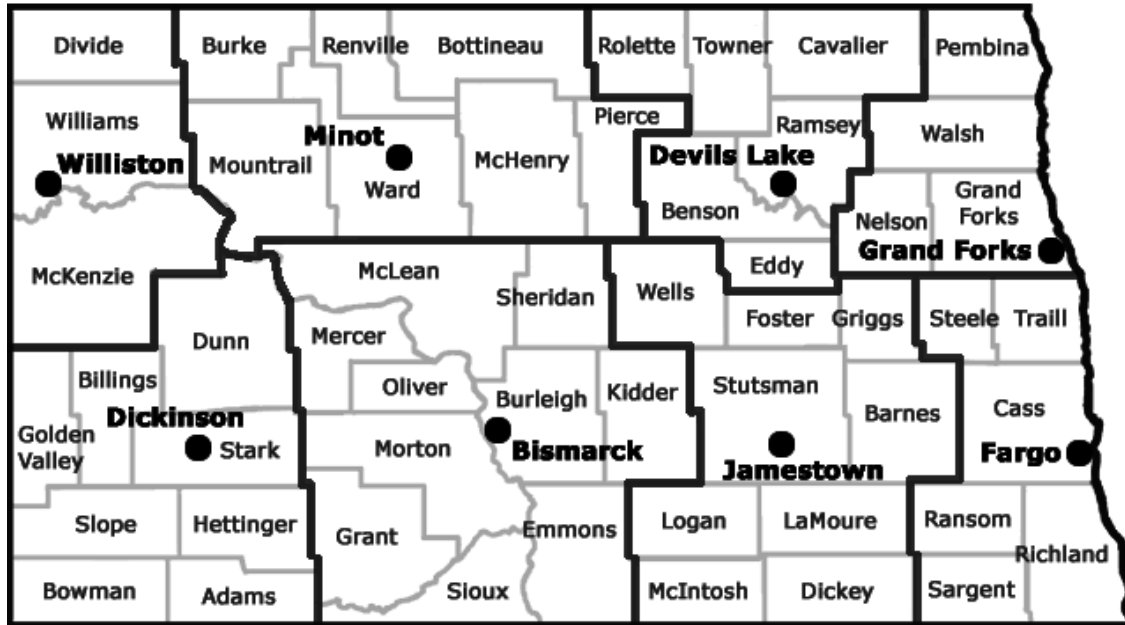
Crisis Line: Call 988 for immediate help 24/7

Region I
Northwest Human
Service Center

Region II
North Central Human
Service Center

Region III
Lake Region Human
Service Center

Region IV
Northeast Human
Service Center



Region VIII
Badlands Human
Service Center

Region VII
West Central Human
Service Center

Region VI
South Central Human
Service Center

Region V
Southeast Human
Service Center

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