

April 28, 2021

United States Department of Education Office of Special Education Programs Potomac Center Plaza Mail Stop 2600, Room 5031-A 550 12th Street, S.W. Washington, D.C. 20202

RE: FFY 2021 Part C ND State Application

Enclosed please find the complete FFY 2021 application for North Dakota.

In the FFY 2020 application, North Dakota allocated funds for travel for non-lead agency staff. While these funds were not utilized in FFY 2020, North Dakota has included these funds in the FFY 2021 application to continue to provide opportunity for families, providers, and other stakeholders to participate in conferences and trainings.

Please feel free to contact me with any questions or clarification.

Sincerely,

Jacqueline Adusumilli, M.Ed.

Part C Coordinator

OMB NO. 1820-0550 Expires: 12/31/2023

ANNUAL STATE APPLICATION UNDER PART C OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT AS AMENDED IN 2004 FOR FEDERAL FISCAL YEAR (FFY) 2021

CFDA No. 84.181A

ED FORM No. 1 B20—26P

UNITED STATES DEPARTMENT OF EDUCATION OFFICE OF SPECIAL EDUCATION PROGRAMS

Washington, DC 20202-2600

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 10 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain benefits (20 U.S.C. 1433; 20 U.S.C. 1435). Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Education, 400 Maryland Ave., S.W., Washington, D.C. 20210-4537 or email ICDocketMgr@ed.gov and reference the OMB Control Number 1820-0550. Note: Please do not return the completed Annual State Application form to this address.

Section I

A. Submission Statements for Part C of IDEA

S	elect 1 or 2	2 below. Check 3 if appropriate.
1.	X	The State's policies, procedures, methods, descriptions, certifications, and assurances meet all application requirements of Part C of the Act as found in the Individuals with Disabilities Education Act (IDEA), codified at 20 U.S.C. 1431 through 1443 and the Part C regulations in 34 CFR Part 303. The State is able to provide and/or meet all policies, procedures, methods, descriptions, and assurances, found in Sections II.A and II.B of this Application.
		By selecting this submission statement the State either has on file with the Secretary or has submitted new or revised State policies, procedures, methods, and descriptions that meet all requirements found in Section II.A.
2.		The State cannot provide the policies, procedures, methods, descriptions, and/or assurances for all application requirements of Part C of the Act as found in Part C of the IDEA, 20 U.S.C. 1431 through 1443 and the Part C regulations in 34 CFR Part 303. The State has determined that it is unable to provide the policies, procedures, methods, descriptions, and/or assurances that are checked 'No' in Sections II.A and II.B. However, the State assures that throughout the period of this grant award the State will operate consistently with all requirements of IDEA in 20 U.S.C. 1431 through 1443 and the 2011 Part C regulations in 34 CFR Part 303. The State will develop and/or make such changes to existing policies, procedures, methods, descriptions, and assurances as are necessary to bring the policies, procedures, methods, descriptions, and assurances into compliance with the requirements of the IDEA Part C Act and regulations, as amended, as soon as possible, and not later than June 30, 2022. The State has included the date by which it expects to complete necessary changes associated with policies, procedures, methods, descriptions, and assurances marked 'No'. The items checked 'Yes' in Section II.A are enclosed with this application as revised or new or are identified as "OF" already on file with the Secretary.1
Ор	tional:	
3.	··	The State is submitting new or modified State policies and procedures previously submitted to the Department and checked in Section II.A, "N", "R" or "OF" cell(s) found in the 'Yes' column. These modifications are a result of: (1) the State revising its applicable State law or regulations; (2) changes required by the Secretary due to new interpretation of the Act or regulations by a Federal court or the State's highest court; and/or (3) because of an official finding of noncompliance with Federal law or regulation.
В.	Conditi	onal Approval for Current Grant Year
lf ti	ne State re	eceived conditional approval for the current grant year, check the statement(s) below:
1.	Conditio	nal Approval Related to Assurances in Section II.A:
	a. b.	approval letter (attach any additional documentation required by the FFY 2020 letter).

Part C Annual State Application: FFY 2021 OMB No. 1820-0550/Expiration Date: 12/31/2023

¹ If Option 2 is checked, the State is to provide dates in Sections II.A and II.B as to when the required policies, procedures, methods, descriptions, and assurances will be provided, which date can be no later than June 30, 2022.

2.	Condition	Conditional Approval Related to Other Issues:							
	a.	The State previously submitted documentation of completion of all issues identified in the FFY 2020 conditional approval letter.							
	b.	The State is attaching documentation of completion of all issues identified in the FFY 2020 conditional approval letter. (Attach documentation showing completion of all issues.)							
	C.	The State has not completed all issues identified in the FFY 2020 conditional approval letter. (Attach documentation showing completion of any issues and a list of items not yet completed.)							

Section II

A. State Policies, Procedures, Methods, and Descriptions

As checked below, the State hereby declares that it has or has not filed the following policies, procedures, methods, and descriptions with the U.S. Department of Education, and, as of the date of the signature below, affirms and incorporates by reference those policies, procedures, methods, and descriptions with respect to Part C of the Individuals with Disabilities Education Act (IDEA or Act) in 20 U.S.C. 1431–1443 and the Part C regulations in 34 CFR Part 303 (Part C). By submission of this Section II, the State assures that throughout the period of this FFY 2021 grant award, the State will operate consistently with all requirements of Part C of the IDEA in 20 U.S.C. 1431 through 1443 and the Part C regulations in 34 CFR Part 303. The State will develop and/or make such changes to existing policies, procedures, methods, descriptions, and assurances as are necessary to bring the policies, procedures, methods, descriptions, and assurances into compliance with the requirements of the IDEA Part C Act and regulations by the date indicated below and not later than June 30, 2022.

- Check and enter date(s) as applicable.
- Enclose relevant documents.

Yes (If New or Revised is checked, the State is submitting policies, procedures, methods, and descriptions with this application. If already 'On File with OSEP', check OF.)

N = 'New' Policy and/or Procedure

R = 'Revised' Policy and/or Procedure

OF = Policy and/or Procedure is already 'On File' with the USDE

No (Policies, procedures, methods, and descriptions have not been provided. Provide date by which State will submit to OSEP required documentation, which date shall be no later than June 30, 2022.)

Yes:	Yes:	Yes:			
N	R	OF	No	S	tate Policies, Procedures, Methods, and Descriptions
					Subpart C—State Policies and Procedures
		х		1.	Each application must include the name of the State-lead agency, as designated under §303.120, that will be responsible for the administration of funds provided under this part. (34 CFR §303.201)
		х		2.	Each application must include a description of services to be provided under Part C to infants and toddlers with disabilities and their families through the State's system. (34 CFR §303.203(a))
				3.	Each application must include the State's policies and procedures regarding the identification and coordination of all available resources within the State from Federal, State, local, and private sources as required under subpart F of 34 CFR Part 303.
					The State must have policies and procedures that meet the requirements listed in 3(a) and the methods identified in 3(b), and must provide responses to those

Yes:	Yes:	Yes:		
N	R	OF	No	State Policies, Procedures, Methods, and Descriptions
				entries. If the State has not adopted a system of payments, it may respond "NA" to 3(a).
	_	X		(a) If the State has adopted a system of payments, each application must include any policies or procedures adopted by the State as its system of payments and those policies and procedures must meet the requirements in §§303.510, 303.520 and 303.521 (regarding the use of public insurance or benefits, private insurance, or family costs or fees).
				(34 CFR §303.203(b)(1))
				The policies and procedures listed in 3(a) are optional. Enter 'NA' in the cells to the left if the State has elected not to adopt a system of payments (which includes a system to use public insurance or benefits or private insurance or family fees to pay for Part C services); otherwise check the appropriate response under the 'Yes' column and, if checking 'N' or 'R', attach policies and procedures.
			:	The State's response under 3(a) of Section II.A must match the State's response under Section IV.A.
				(b) Each application must include the methods (State law, regulation, signed interagency or intra-agency agreements or other appropriate written method(s) approved by the Secretary) used by the State to implement the payor of last resort and fiscal responsibility requirements in §303.511(b)(2) and (3).
NA	NA	NA .	NA	(34 CFR §303.203(b)(2))
AVA		101	147	If the State uses signed interagency agreements or "other appropriate written method(s)" to meet the requirements in 3(b), please check 'N' or 'R' and submit with the application. If the State's method is a State statute or regulation, the State does not need to submit that method (the statute or regulation) with its application.
		x		4. Each application must include the State's rigorous definition of developmental delay as required under §§303.10 and 303.111. Each Statewide system must include the State's rigorous definition of developmental delay, consistent with §§303.10 and 303.203(c), that will be used by the State in carrying out programs under Part C of the Act in order to appropriately identify infants and toddlers with disabilities who are in need of services under Part C of the Act. The definition must—
			70.00	(a) Describe, for each of the areas listed in §303.21(a)(1), the evaluation and assessment

Yes:	Yes:	Yes:		
N	R	OF	No	State Policies, Procedures, Methods, and Descriptions
-				procedures, consistent with §303.321, that will be used to measure a child's development; and
				(b) Specify the level of developmental delay in functioning or other comparable criteria that constitute a developmental delay in one or more of the developmental areas identified in §303.21(a)(1).
				(34 CFR §§303.203(c) & 303.111)
			:	If the State provides services under Part C to at-risk infants and toddlers through the statewide system, the application must include—
:				(a) The State's definition of at-risk infants and toddlers with disabilities who are eligible in the State for services under Part C (consistent with §§303.5 and 303.21(b)); and
NA	NΑ	NA	NA	(b) A description of the early intervention services provided under Part C to at-risk infants and toddlers with disabilities who meet the State's definition described in §303.204(a).
				(34 CFR §303.204).
			-	The policies and procedures listed in 5 are optional (i.e., they only apply if the State opts to serve at-risk children). Enter 'NA' in the cells to the left if the State has elected not to provide services under Part C to at-risk infants and toddlers; otherwise check the appropriate response under the 'Yes' column and, if checking 'N' or 'R', attach the definition and description.
	Å			 Each State application must include a description of the State's use of funds under Part C for the fiscal year or years covered by the application. (34 CFR §303.205)
				The State must complete Section III of this application.
		×		7. Each application must include the State's policies and procedures that require the referral for early intervention services under Part C of specific children under the age of three, as described in §303.303(b) (which includes children who are the subject of a substantiated case of abuse or neglect, or directly affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure). (34 CFR §303.206)
		х		8. Each application must include a description of the procedure used by the State to ensure that resources are made available under Part C for all geographic areas within the State. (34 CFR §303.207)

Yes:	Yes:	Yes:		
Ŋ	R	OF	No	State Policies, Procedures, Methods, and Descriptions
				9. Each application must include a description of the policies and procedures used by the State to ensure that, before adopting any new policy or procedure (including any revision to an existing policy or procedure) needed to comply with Part C of the Act and 34 CFR Part 303, the lead agency—
		X	<u>-</u>	 (1) Holds public hearings on the new policy or procedure (including any revision to an existing policy or procedure); (2) Provides notice of the hearings held in accordance with §303.208(b)(1) at least 30 days before the hearings are conducted to enable public participation; and (3) Provides an opportunity for the general public, including individuals with disabilities, parents of infants and toddlers with disabilities, EIS providers, and the members of the Council, to comment for at least 30 days on the new policy or procedure (including any revision to an existing policy or procedure) needed to comply with Part C of the Act and 34 CFR Part 303.
				(34 CFR §303.208(b))
	-			(a) <u>Application Requirements</u> : Each State must include the following in its application:
•		X		 (1) A description of the policies and procedures it will use to ensure a smooth transition for infants and toddlers with disabilities under the age of three and their families from receiving early intervention services under Part C to preschool or other appropriate services (for toddlers with disabilities) or exiting the program for infants and toddlers with disabilities. (2) A description of how the State will meet each requirement in §303.209(b) through (f). (3) (i) (A) If the lead agency is not the SEA, an interagency agreement between the lead agency and the SEA; or (B) If the lead agency is the SEA, an intraagency agreement between the program within that agency that administers Part C of the Act and the program within the agency that administers section 619 of the Act (ii) To ensure a seamless transition between services under Part C and under Part B of the Act, an interagency agreement under
				paragraph (a)(3)(i)(A) of this section or an intra-agency agreement under paragraph (a)(3)(i)(B) of this section must address how

Yes:	Yes:	Yes:		
N	R	OF	No	State Policies, Procedures, Methods, and Descriptions
				the lead agency and the SEA will meet the requirements of paragraphs (b) through (f) of this section (including any policies adopted by the lead agency under §303.401(d) and (e)), §303.344(h), and 34 CFR 300.101(b), 300.124, 300.321(f) and 300.323(b). (4) Any policy the lead agency has adopted under §303.401(d) and (e). (b) Notification to the SEA and appropriate LEA. The State must ensure that— (1) Subject to paragraph (b)(4) of this section, not fewer than 90 days before the third birthday of the toddler with a disability if that toddler may be eligible for preschool services under Part B of the Act, the lead agency notifies the SEA and the LEA for the area in which the toddler resides that the toddler on his or her third birthday will reach the age of eligibility for services under Part B of the Act, as determined in accordance with State law; or (2) Subject to paragraph (b)(4) of this section, if the lead agency determines that the toddler is eligible for early intervention services under Part C of the Act more than 45 but less than 90 days before that toddler's third birthday and if that toddler may be eligible for preschool services under Part B of the Act, the lead agency, as soon as possible after determining the child's eligibility, notifies the SEA and the LEA for the area in which the toddler with a disability resides that the toddler on his or her third birthday will reach the age of eligibility for services under Part B of the Act, as determined in accordance with State law; or (3) Subject to paragraph (b)(4) of this section, if a toddler is referred to the lead agency fewer than 45 days before that toddler's third birthday and that toddler may be eligible for preschool services under Part B of the Act, as determined in accordance with State law; or (3) Subject to paragraph (b)(4) of this section, if a toddler is referred to the lead agency fewer than 45 days before that toddler to the SEA and the LEA for the area in which the toddler resides; but, the lead agency is not required to conduct a

Yes:	Yes:	Yes:		
N	R	OF	No	State Policies, Procedures, Methods, and Descriptions
Yes: N	Yes: R		No	(c) Conference to discuss services. The State must ensure that— (1) If a toddler with a disability may be eligible for preschool services under Part B of the Act, the lead agency, with the approval of the family of the toddler, convenes a conference, among the lead agency, the family, and the LEA not fewer than 90 days—and, at the discretion of all of the parties, not more than 9 months—before the toddler's third birthday to discuss any services the toddler may receive under Part B of the Act. (2) If a toddler with a disability is determined to not be potentially eligible for preschool services under Part B of the Act, the lead agency, with the approval of the family of that toddler, makes reasonable efforts to convene a conference among the lead agency, the family, and providers of other appropriate services for the toddler to discuss appropriate services that the toddler may receive. (d) Transition plan. The State must ensure that for all toddlers with disabilities— (1)(i) It reviews the program options for the toddler with a disability for the period from the toddler's third birthday through the remainder of the school year; and (ii) Each family of a toddler with a disability who is served under Part C is included in the development of the transition plan required under this section and §303.344(h); (2) It establishes a transition plan in the IFSP not fewer than 90 days—and, at the discretion of all of the parties, not more than 9 months—before the toddler's third birthday; and (3) The transition plan in the IFSP includes, consistent with §303.344(h), as appropriate— (i) Steps for the toddler with a disability and his or her family to exit from the Part C program; and (ii) Any transition services that the IFSP Team identifies as needed by that toddler and his or her family.
				any services the toddler may receive under Part B of the Act. (2) If a toddler with a disability is determined to not be potentially eligible for preschool services under Part B of the Act, the lead agency, with the approval of the family of that toddler, makes reasonable efforts to convene a conference among the lead agency, the family and providers of other appropriate services for the toddler to discuss appropriate services that the toddler may receive. (d) Transition plan. The State must ensure that for all toddlers with disabilities — (1)(i) It reviews the program options for the toddler with a disability for the period from the toddler's third birthday through the remainder of the school year; and (ii) Each family of a toddler with a disability who is served under Part C is included in the development of the transition plan required under this section and §303.344(h); (2) It establishes a transition plan in the IFSP not fewer than 90 days—and, at the discretion of all of the parties, not more than 9 months—before the toddler's third birthday; and (3) The transition plan in the IFSP includes, consistent with §303.344(h), as appropriate—
				(i) Steps for the toddler with a disability and his or her family to exit from the Part C program; and (ii) Any transition services that the IFSP Team identifies as needed by that toddler and his or her family.
				(e) Transition conference and plan meeting requirements. Any conference conducted under paragraph (c) of this section or meeting to develop the transition plan under paragraph (d) of this section (which conference and meeting may be combined into one meeting) must meet the requirements in §§303.342(d) and (e) and 303.343(a).

Yes:	Yes:	Yes:		
N	R	OF	No	State Policies, Procedures, Methods, and Descriptions
				(f) Applicability of transition requirements. (1) The transition requirements in paragraphs (b)(1) and (2), (c)(1), and (d) of this section apply to all toddlers with disabilities receiving services under this part before those toddlers turn age three, including any toddler with a disability under the age of three who is served by a State that offers services under §303.211. (2) In a State that offers services under §303.211, for toddlers with disabilities identified in paragraph (b)(1) of this section, the parent must be provided at the transition conference conducted under paragraph (c)(1) of this section: (i) An explanation, consistent with §303.211(b)(1)(ii), of the toddler's options to continue to receive early intervention services under this part or preschool services under section 619 of the Act; (ii) The initial annual notice referenced in §303.211(b)(1). (3) For children with disabilities age three and older who receive services pursuant to §303.211, the State must ensure that it satisfies the separate transition requirements in §303.211(b)(6)(ii).
		x	-	11. Each application must contain a description of State efforts to promote collaboration among Head Start and Early Head Start programs under the Head Start Act (42 U.S.C. 9801, et seq., as amended), early education and child care programs, and services under Part C. (34 CFR §303.210)
	-	x		12. Each application must include, as required by Section 427 of the General Education Provisions Act (GEPA), a description of how the State has identified barriers and developed strategies to address the barriers and has provided a description of the steps the State is taking to ensure equitable access to, and participation in, Part C. (34 CFR §303.212(a))
NA	NA	NA	NA	13. (a) General. (1) Subject to paragraphs (a)(2) and (b) of this section, a State may elect to include in its application for a grant under Part C a State policy, developed and implemented jointly by the lead agency and the SEA, under which a parent of a child with a disability who is eligible for preschool services under section 619 of the Act and who previously received early intervention services under Part C, may choose the continuation of early intervention services under Part C for his or her child after the child turns three until the child enters, or is eligible under State law to enter, kindergarten or elementary school.

Yes:	Yes:	Yes:	1	
			No	State Policies Procedures Methods and Descriptions
N	R	OF	No	(2) A State that adopts the policy described in paragraph (a)(1) of this section may determine whether it applies to children with disabilities— (i) From age three until the beginning of the school year following the child's third birthday; (ii) From age three until the beginning of the school year following the child's fourth birthday; or (iii) From age three until the beginning of the school year following the child's fifth birthday; or (iii) From age three until the beginning of the school year following the child's fifth birthday. (3) However, in no case may a State provide services under this section beyond the age at which the child actually enrolls in, or is eligible under State law to enter, kindergarten or elementary school in the State. (b) Requirements. If a State's application for a grant under Part C includes the State policy described in paragraph (a) of this section, the system must ensure the following: (1) Parents of children with disabilities who are eligible for services under section 619 of the Act and who previously received early intervention services under Part C will be provided annual notice (the initial annual notice must be provided as set forth in §303.209(f)(2)(ii)) that contains— (i) A description of the rights of the parents to elect to receive services pursuant to §303.211 and services provided under Part B of the Act, including— (A) The types of services and the locations at which the services are provided; (B) The procedural safeguards that apply; and (C) Possible costs (including the costs or fees to be charged to families as described in §§303.520 and 303.521), if any, to parents; and (2) Consistent with §303.344(d), services provided pursuant to §303.211 will include an educational component that promotes school readiness and incorporates preliteracy, language, and numeracy skills.

Yes:	Yes:	Yes:		
N	R	OF	No	State Policies, Procedures, Methods, and Descriptions
				early intervention services under Part C of the Act under §303.211. (4) The lead agency must continue to provide all early intervention services identified in the toddler with a disability's IFSP under §303.344 (and consented to by the parent under §303.342(e)) beyond age three until that toddler's initial eligibility determination under Part B of the Act is made under 34 CFR §300.306. This provision does not apply if the LEA has requested parental consent for the initial evaluation under §300.300(a) and the parent has not provided that consent. (5) The lead agency must obtain informed consent from the parent of any child with a disability for the continuation of early intervention services pursuant to this section for that child. Consent must be obtained before the child reaches three years of age, where practicable. (6)(i) For toddlers with disabilities under the age of three in a State that offers services under this section, the lead agency ensures that the transition requirements in §303.209(b)(1) and (2), (c)(1) and (d) are met. (ii) For toddlers with disabilities age three and older in a State that offers services under this section, the lead agency ensures a smooth transition from services under this section to preschool, kindergarten or elementary school by: (A) Providing the SEA and LEA where the child resides, consistent with any State policy adopted under §303.401(e), the information listed in §303.401(d)(1) not fewer than 90 days before the child will no longer be eligible under subsection (a)(2) of this section to receive early intervention services under this section; (B) With the approval of the parents of the child, convening a transition conference, among the lead agency, the parents, and the LEA, not fewer than 90 days—and, at the discretion of all parties, not more than 9 months—before the child will no longer be eligible under subsection (a)(2) of this section to receive, or will no longer be eligible under subsection to receive, or lo longer receives, early intervention services under

Yes:	Yes:	Yes:		
N	R	OF	No	State Policies, Procedures, Methods, and Descriptions
				(7) In States that adopt the option to make services under Part C available to children ages three and older pursuant to §303.211, there will be a referral to the Part C system, dependent upon parental consent, of a child under the age of three who directly experiences a substantiated case of trauma due to exposure to family violence, as defined in section 320 of the Family Violence Prevention and Services Act, 42 U.S.C. 10401, et seq. (c) Reporting requirement. If a State includes in its application a State policy described in §303.211(a), the State must submit to the Secretary, in the State's report under §303.124, the number and percentage of children with disabilities who are eligible for services under section 619 of the Act but whose parents choose for their children to continue to receive early intervention services under §303.211. (d) Available funds. The State policy described in §303.211(a) must describe the funds—including an identification as Federal, State, or local funds—that will be used to ensure that the option described in §303.211(a) is available to eligible children and families who provide the consent described in §303.211(b)(5), including fees, if any, to be charged to families as described in §303.520 and 303.521. (e) Rules of construction. (1) If a statewide system includes a State policy described in §303.211(a), a State that provides services in accordance with this section to a child with a disability who is eligible for services under section 619 of the Act will not be required to provide the child FAPE under Part B of the Act for the period of time in which the child is receiving services under §303.211. (2) Nothing in this section may be construed to require a provider of services under Part C to provide a child served under Part C with FAPE.
				The policies and procedures listed in 13 are optional. Enter 'NA' in the cells to the left if the State has elected not to develop and implement a policy under 34 CFR §303.211 to make Part C services to children beyond age three; otherwise check the appropriate response under the 'Yes' column and, if checking 'N' or 'R', attach policies and procedures.

B. Assurances and Optional Assurance

The State makes the following assurances and provisions as required by Part C of the Individuals with Disabilities Education Act. (20 U.S.C. 1431 et. seq.; 34 CFR §§303.101-126; 303.220; 303.227)

Yes	No	Subpart B—Assurances	
(Assurance is hereby provided.)	(Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.) Check and enter date(s) as	(20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §§303.101-126; 303.220; 303.227)	
	applicable		
X		 The State has adopted a policy that appropriate early intervention services, as defined in 34 CFR §303.13, are available to all infants and toddlers with disabilities in the State and their families, including— Indian infants and toddlers with disabilities and their families residing on a reservation geographically located in the State; Infants and toddlers with disabilities who are homeless children and their families; and Infants and toddlers with disabilities who are wards of the State. (34 CFR §303.101(a)) 	
×		2. The State has in effect a statewide system of early intervention services that meets the requirements of section 635 of the Act, including policies and procedures that address, at a minimum, the components required in 34 CFR §§303.111 through 303.126. (34 CFR §303.101(a))	
х	-	3. The State ensures that any State rules, regulations, policies and procedures relating to 34 CFR Part 303 conform to the purposes and requirements of 34 CFR Part 303. (34 CFR §303.102)	
		 Each statewide system (system) must include, at a minimum, the components described in §§303.111 through 303.126. (34 CFR §303.110) 	
x		 The State has a policy in effect that ensures that appropriate early intervention services are based on scientifically based research, to the extent practicable, and are available to all infants and toddlers with disabilities and their families, including— (a) Indian infants and toddlers with disabilities and their families 	
		residing on a reservation geographically located in the State; and	

Yes No		Subpart B—Assurances		
(Assurance is hereby provided.)	(Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.)	(20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §\$303.101-126; 303.220; 303.227)		
ĺ	Check and enter date(s) as applicable	-		
		(b) Infants and toddlers with disabilities who are homeless children and their families. (34 CFR §303.112)		
X		 (a) The Statewide system ensures the performance of— (1) A timely, comprehensive, multidisciplinary evaluation of the functioning of each infant or toddler with a disability in the State; and (2) A family-directed identification of the needs of the family of the infant or toddler to assist appropriately in the development of the infant or toddler. (b) The evaluation and family-directed identification required in paragraph (a) of this section must meet the requirements of 34 CFR §303.321. (34 CFR §303.113) 		
X		7. The Statewide system ensures that, for each infant or toddler with a disability and his or her family in the State, an IFSP, as defined in 34 CFR §303.20, is developed and implemented that meets the requirements of 34 CFR §\$303.340 through 303.345 and that includes service coordination services, as defined in 34 CFR §303.34. (34 CFR §303.114)		
X	1	 The Statewide system includes a comprehensive child find system that meets the requirements in 34 CFR §§303.302 and 303.303. (34 CFR §303.115) 		
X	ξ	 (a) Focuses on the early identification of infants and toddlers with disabilities; and (b) Provides information to parents of infants and toddlers through primary referral sources in accordance with 34 CFR §303.301. (34 CFR §303.116) 		
X	1	O. The Statewide system includes a central directory that is accessible to the general public (i.e., through the lead agency's Web site and other appropriate means) and includes accurate, upto-date information about:		
		 (a) Public and private early intervention services, resources, and experts available in the State; 		

Yes	No (Assurance	Subpart B—Assurances		
(Assurance i hereby provided.)	is (Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.)	(20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §§303.101-126; 303.220; 303.227)		
	Check and enter date(s) as applicable	· · · · · · · · · · · · · · · · · · ·		
		 (b) Professional and other groups (including parent support and training and information centers, such as those funded under the Act) that provide assistance to infants and toddlers with disabilities eligible under Part C of the Act and their families; and (c) Research and demonstration projects being conducted in the State relating to infants and toddlers with disabilities. (34 CFR §303.117) 		
		 The Statewide system includes a comprehensive system of personnel development, including the training of paraprofessionals and the training of primary referral sources with respect to the basic components of early intervention services available in the State. The State's comprehensive system of personnel development— (a) Includes— 		
		` '		
X		 Training personnel to implement innovative strategies and activities for the recruitment and retention of EIS providers; Promoting the preparation of EIS providers who are fully and appropriately qualified to provide early intervention services under Part C; and Training personnel to coordinate transition services for infants and toddlers with disabilities who are transitioning from an early intervention services program under Part C of the Act to a preschool program under section 619 of the Act, Head Start, Early Head Start, an elementary school program under Part B of the Act, or another appropriate program. 		
		(b) May include—		
		 Training personnel to work in rural and inner-city areas; Training personnel in the emotional and social development of young children; Training personnel to support families in participating fully in the development and implementation of the child's IFSP; and Training personnel who provide services under this part using standards that are consistent with early 		
		learning personnel development standards funded under the State Advisory Council on Early Childhood Education and Care established under the Head Start		

Yes	No	Subpart B—Assurances
(Assurance is hereby provided.)	(Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.)	(20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §\$303.101-126; 303.220; 303.227)
	Check and enter date(s) as applicable	
		Act, if applicable. (34 CFR §303.118)
X		12. The Statewide system includes policies and procedures relating to the establishment and maintenance of qualification standards to ensure that personnel necessary to carry out the purposes of Part C are appropriately and adequately prepared and trained. These policies and procedures provide for the establishment and maintenance of qualification standards that are consistent with any State-approved or State-recognized certification, licensing, registration, or other comparable requirements that apply to the profession, discipline, or area in which personnel are providing early intervention services. Nothing in Part C of the Act may be construed to prohibit the use of paraprofessionals and assistants who are appropriately trained and supervised in accordance with State law, regulation, or written policy, to assist in the provision of early intervention services under Part C of the Act to infants and toddlers with disabilities. (34 CFR §303.119(a)–(c))
×		 13. The Statewide system includes a single line of responsibility in a lead agency designated or established by the Governor that is responsible for the following— (a) (1) The general administration and supervision of programs and activities administered by agencies, institutions, organizations, and EIS providers receiving assistance under Part C of the Act; and (2) The monitoring of programs and activities used by the State to carry out Part C of the Act (whether or not the programs or activities are administered by agencies, institutions, organizations, and EIS providers that are receiving assistance under Part C of the Act), to ensure that the State complies with Part C of the Act, including—
		 (i) Monitoring agencies, institutions, organizations, and EIS providers used by the State to carry out Part C of the Act; (ii) Enforcing any obligations imposed on those agencies, institutions, organizations, and EIS providers under Part C of the Act and 34 CFR Part 303; (iii) Providing technical assistance, if necessary, to those agencies, institutions, organizations and EIS providers; (iv) Correcting any noncompliance identified through monitoring as soon as possible and in no case later than one year after the lead agency's identification of

Yes	No	Subpart B—Assurances
(Assurance is hereby provided.)	(Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.)	(20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §§303.101-126; 303.220; 303.227)
	Check and enter date(s) as applicable	
		the noncompliance; and (v) Conducting the activities in paragraphs (a)(2)(i) through (a)(2)(iv) of this section, consistent with 34 CFR §\$303.700 through 303.707, and any other activities required by the State under those sections. (b) The identification and coordination of all available resources for early intervention services within the State, including those from Federal, State, local, and private sources, consistent with subpart F of 34 CFR Part 303. (c) The assignment of financial responsibility in accordance with subpart F of 34 CFR Part 303. (d) The development of procedures in accordance with subpart F of 34 CFR Part 303 to ensure that early intervention services are provided to infants and toddlers with disabilities and their families under Part C of the Act in a timely manner, pending the resolution of any disputes among public agencies or EIS providers. (e) The resolution of intra- and interagency disputes in accordance with subpart F of 34 CFR Part 303. (f) The entry into formal interagency agreements or other written methods of establishing financial responsibility, consistent with 34 CFR §303.511, that define the financial responsibility of each agency for paying for early intervention services (consistent with State law) and procedures for resolving disputes and that include all additional components necessary to ensure meaningful cooperation and coordination as set forth in subpart F of 34 CFR Part 303.
X		14. The Statewide system includes a policy pertaining to the contracting or making of other arrangements with public or private individuals or agency service providers to provide early intervention services in the State, consistent with the provisions of Part C of the Act and 34 CFR Part 303, including the contents of the application, and the conditions of the contract or other arrangements. The policy —
		 (a) Includes a requirement that all early intervention services must meet State standards and be consistent with the provisions of Part C; and (b) Is consistent with the Education Department General Administrative Regulations in 34 CFR Part 80.
		(34 CFR §303.121)

V		
Yes (Assurance is hereby provided.)	No (Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.) Check and enter date(s) as applicable	Subpart B—Assurances (20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §\$303.101-126; 303.220; 303.227)
Х	Сертопи	15. The Statewide system includes procedures for securing the timely reimbursement of funds used under Part C of the Act, in accordance with subpart F of 34 CFR Part 303. (34 CFR §303.122)
х		 The Statewide system includes procedural safeguards that meet the requirements of subpart E of 34 CFR Part 303. (34 CFR §303.123)
X		17. The Statewide system includes a system for compiling and reporting timely and accurate data that meets the requirements of 34 CFR §§303.700 through 303.702 and 303.720 through 303.724 and the following requirements. The data system includes a description of the process that the State uses, or will use, to compile data on infants or toddlers with disabilities receiving early intervention services under Part C, including a description of the State's sampling methods, if sampling is used, for reporting the data required by the Secretary under sections 616 and 618 of the IDEA and 34 CFR §§303.700 through 303.707 and 303.720 through 303.724. (34 CFR §303.124)
х.		18. The Statewide system includes a State Interagency Coordinating Council (Council) that meets the requirements of subpart G of 34 CFR Part 303. (34 CFR §303.125)
×		 19. The Statewide system includes policies and procedures to ensure, consistent with 34 CFR §§303.13(a)(8) (early intervention services), 303.26 (natural environments), and 303.344(d)(1)(ii) (content of an IFSP), that early intervention services for infants and toddlers with disabilities are provided— (a) To the maximum extent appropriate, in natural environments; and (b) In settings other than the natural environment that are most appropriate, as determined by the parent and the IFSP Team, only when early intervention services cannot be achieved satisfactorily in a natural environment. (34 CFR §303.126)
х	2	20. The Statewide system ensures that Federal funds made available to the State under section 643 of the Act will be expended in accordance with the provisions of 34 CFR Part 303, including §§303.500 and 303.501. (34 CFR §303.221)

Yes	No	Subpart B—Assurances
(Assurance is hereby provided.)	(Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.)	(20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §§303.101-126; 303.220; 303.227)
	Check and enter date(s) as applicable	
х		21. The Statewide system will comply with the requirements in §§303.510 and 303.511 in subpart F of this part. (34 CFR §303.222)
X		 22. The Statewide system ensures that— (a) The control of funds provided under 34 CFR Part 303, and title to property acquired with those funds, will be in a public agency for the uses and purposes provided in 34 CFR Part 303; and (b) A public agency will administer the funds and property. (34 CFR §303.223)
×		 (a) Make reports in the form and containing the information that the Secretary may require; and (b) Keep records and afford access to those records as the Secretary may find necessary to ensure compliance with the requirements of 34 CFR Part 303, the correctness and verification of reports, and the proper disbursement of funds provided under 34 CFR Part 303. (34 CFR §303.224)
X		 (a) Federal funds made available under section 643 of the Act to the State – (1) Will not be commingled with State funds; and (2) Will be used so as to supplement the level of State and local funds expended for infants and toddlers with disabilities and their families and in no case to supplant those State and local funds. (b) To meet the requirement in paragraph (a) of this section, the total amount of State and local funds budgeted for expenditures in the current fiscal year for early intervention services for children eligible under this part and their families must be at least equal to the total amount of State and local funds actually expended for early intervention services for these children and their families in the most recent preceding fiscal year for which the information is available. Allowance may be made for—

	Yes	No	Subpart B—Assurances
1	Assurance is hereby provided.)	(Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.)	(20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §§303.101-126; 303.220; 303.227)
		Check and enter date(s) as applicable	
			 (1) A decrease in the number of infants and toddlers who are eligible to receive early intervention services under this part; and (2) Unusually large amounts of funds expended for such long-term purposes as the acquisition of equipment and the construction of facilities. (c) Requirement regarding indirect costs. (1) Except as provided in paragraph (c)(2) of this section, a lead agency under this part may not charge indirect costs to its Part C grant. (2) If approved by the lead agency's cognizant Federal agency or by the Secretary, the lead agency must charge indirect costs through either— (i) A restricted indirect cost rate that meets the requirements in 34 CFR 76.560 through 76.569; or (ii) A cost allocation plan that meets the non-supplanting requirements in paragraph (b) of this section and 34 CFR Part 76 of EDGAR. (3) In charging indirect costs under paragraph (c)(2)(i) and (c)(2)(ii) of this section, the lead agency may not charge rent, occupancy, or space maintenance costs directly to the Part C grant, unless those costs are specifically approved in advance by the Secretary. (34 CFR §303.225)
	×		25. The Statewide system ensures that fiscal control and fund accounting procedures will be adopted as necessary to ensure proper disbursement of, and accounting for, Federal funds paid under 34 CFR Part 303. (34 CFR §303.226)
	X		26. The State ensures that policies and practices have been adopted to ensure that— (a) Traditionally underserved groups, including minority, lowincome, homeless, and rural families and children with disabilities who are wards of the State, are meaningfully involved in the planning and implementation of all the requirements of Part C; and (b) These families have access to culturally competent services within their local geographical areas. (34 CFR §303.227)

Yes	No	Subpart B—Assurances
(Assurance is hereby provided.)	(Assurance cannot be ensured. Provide date on which State will complete changes in order to provide assurance.) Check and enter date(s) as	(20 U.S.C. 1434; 1435; and 1437(b); 34 CFR §§303.101-126; 303.220; 303.227)
	applicable	
		Assurance Regarding Optional Policy
		Enter 'NA' in the cell to the left if this assurance is not applicable to your State.
NA		27. A State may adopt and has adopted a policy that includes making ongoing good-faith efforts to recruit and hire appropriately and adequately trained personnel to provide early intervention services to infants and toddlers with disabilities, including, in a geographic area of the State where there is a shortage of such personnel, the most qualified individuals available who are making satisfactory progress toward completing applicable course work necessary to meet the standards described in paragraphs (a) and (b) of this section. (34 CFR §303.119(d))

C. Certifications

The State Lead Agency is providing the following certifications:

Yes	
х	The State certifies that ED Form 80-0013, Certification Regarding Lobbying, is on file with the Secretary of Education.
	With respect to the Certification Regarding Lobbying the State recertifies that no Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making or renewal of Federal grants under this program; that the State shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," when required (34 CFR Part 82, Appendix B); and that the State Agency shall require the full certification, as set forth in 34 CFR Part 82, Appendix A, in the award documents for all sub awards at all tiers.
х	The State certifies that it has met the certifications in the Education Department General Administrative Regulations (EDGAR) at 34 CFR §80.11 relating to State eligibility, authority and approval to submit and carry out the provisions of its State application, and consistency of that application with State law are in place within the State.
X	3. The State certifies that the arrangements to establish financial responsibility for the provision of Part C services among appropriate public agencies under §303.511 and the lead agency's contracts with EIS providers regarding financial responsibility for the provision of Part C services meet the requirements in §§303.500 through 303.521 and are current as of the date of submission of the certification. (34 CFR §303.202)

D. Statement

I certify that the State of North Dakota has provided the policies, procedures, methods, descriptions, and assurances checked as 'yes' in Sections II.A and II.B and the certifications required in Section II.C of this application. These provisions meet the requirements of Part C of the Individuals with Disabilities Education Act as found in 20 U.S.C. 1431-1443 (as amended) and the 2011 regulations in 34 CFR Part 303 (as amended). The State will operate its IDEA Part C program in accordance with all of the required policies, procedures, methods, descriptions, assurances and certifications.

If any policies, procedures, methods, descriptions, and assurances have been checked 'no', I certify that the State will operate throughout the period of this grant award consistently with the requirements of the IDEA as found in 20 U.S.C. 1431-1443 (as amended) and the 2011 regulations in 34 CFR Part 303 (as amended), and will make such changes to existing policies and procedures as are necessary to bring those policies and procedures into compliance with the requirements of the IDEA, as amended, as soon as possible, and not later than June 30, 2022. (34 CFR §76.104)

I, the undersigned authorized official of the

North Dakota Department of Human Services,

(Name of State and official name of State agency)

am designated under Part C by the Governor of this State to submit this application for FFY 2021 funds under Part C of the Individuals with Disabilities Education Act (IDEA).

Printed/Typed Name and Title of Authoriz	ed Representative of the State:	
Chris Jones, Executive Director, North Dakota Department of Human Services		
Signature:	Date:	
3-15-21		

Section III

A. Description of Use of Federal IDEA Part C Funds for the State Lead Agency (LA) and the Interagency Coordinating Council (ICC)²

Please Note: Completion of Section IIIA is required for all States, regardless of lead agency.

When completing this section include:

- Totals for the number of lead agency and ICC administrative positions, salaries and fringe benefits funded either 100 percent and/or less than 100 percent with Federal IDEA Part C funds;
- · A general description of the duties which the positions entail;
- A distinction between lead agency and ICC roles: insert (LA) or (ICC) in the "Description of Duties;" after each position; and
- · A subtotal of the amount.

Identify any administrative positions for which less than 100% of the time is spent on Part C and, for each such position, indicate the percentage of time spent on Part C and the total amount of salary and fringe benefits included in the Part C application budget.

Positions Funded	Number of Positions	% of Time Spent on Part C	Salaries & Fringe Benefits	Description of Duties
100% funded with Part C Funds	1	100%	\$106,495	State Part C Coordinator is responsible for General Supervision activities to assure compliance with Federal Regulations, timely correction of non-compliance, submission of required reports and applications, development and monitoring of budgets and contracts, and facilitating system change. (LA)
< 100% funded with Part C Funds				-
Subtotal of amount under A:			\$106,495	

² Federal IDEA Part C funds used to support the SICC must meet the requirements of 34 CFR §303.603.

B. Maintenance and Implementation Activities for the Lead Agency and the ICC

When completing this section include:

- A description of the nature and scope of each major activity to be carried out under Part C in maintaining and implementing the statewide system of early intervention services:
 - <u>Lead Agency Activities</u> could include enhancing the Comprehensive System of Personnel Development, implementing child find strategies, or ensuring a timely, comprehensive, multidisciplinary evaluation for each child;
 - ICC Activities could include coordinating child find identification efforts, ensuring the timely provision and payment of early intervention services to eligible children and their families, advising on early childhood transition, support for the ICC (travel), or other implementation and development activities of the ICC
- The approximate amount of Federal IDEA Part C funds to be spent for each activity; and
- · A subtotal of the amount.

Special Note: Prior Approval

Some direct costs require prior approval. These items include using Federal IDEA Part C funds to pay for: (1) equipment; (2) participant support costs (such as training or travel costs); (3) construction or renovation of facilities; and (4) rent, occupancy or space maintenance costs.³ The October 2019 Frequently Asked Questions (2019 FAQs) Prior Approval — OSEP and RSA Formula Grants⁴ which provides prior approval for certain equipment and participant support costs. Please review this FAQ at https://www2.ed.gov/policy/speced/guid/faq-prior-approval-10-29-2019.pdf) prior to completing Section III. B. For any activity or expense listed under Section III of this application that is not covered by the scope of the 2019 FAQs and requires OSEP prior approval, mark an "X" in the chart below. The State must submit supporting documentation for any direct costs that require OSEP prior approval.

Approval of the State's FFY 2021 application does not constitute OSEP's approval of these expenses unless specifically referenced.

(Add rows as needed)

Major Activity/ Expense	Part C Funds to be Spent	Description of Activities/Expenses (include whether it is for the Lead Agency or SICC)	Prior Approval Needed
Non-employee Travel	\$15,000	Travel (in & out of state) for Service Coordinators, Early Intervention Service Providers, Right Track, other Part C Stakeholders and family members to attend meetings, trainings or events. No individual participant or trainee cost per conference training or event will exceed a total cost of \$5,000.	

³ IDEA and the Uniform Guidance require prior approval for the following expenses: (1) equipment (tangible personal property (including information technology systems) having a useful life of more than one year and a per unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the nonfederal entity for financial statement purposes, or \$5,000 (see 2 CFR §200.33)); (2) participant support costs (direct costs for items such as stipends or subsistence allowances, travel allowances, and registration fees paid to or on behalf of participants or trainees (but not employees), in connection with conferences or training projects 2CFR §200.75; (3) construction/renovation (see 2 CFR §200.12(b)); and (4) rent (see 2 CFR §200.465)).

⁴ Under the 2019 FAQs, OSERS granted prior approval for participant support costs under IDEA that: (1) are associated with required meetings for the SICC; (2) incurred as part of providing services identified on an IFSP under IDEA; (3) do not exceed \$5000 per individual participant per training/conference. In addition, the 2019 FAQs provide prior approval for equipment that is identified on or directly related to the implementation of the IFSP.

*******			State
Major Activity/ Expense	Part C Funds to be Spent	Description of Activities/Expenses (include whether it is for the Lead Agency or SICC)	Prior Approval Needed
IT .	\$50,000	Notebooks, printers, and related equipment and software to upgrade items due for replacement. No single piece of equipment will exceed \$5,000. Annual licensing cost of Child Outcome Tool.	
Training	\$6,000	Fees for presenters and location costs to provide training to Lead Agency Staff, Early Intervention Service Providers, Right Track, other Part C Stakeholders and family members.	
Materials	\$2,500	Equipment and supplies for Early Intervention Programs to lend to parents involved in Early Intervention Services.	
Birth Review Program	\$3,500	Postage and material to distribute childfind information to the parents of newborns. Funds for support to assemble letters.	
Administrative Costs	\$5,000	Postage, copying, printing, connection charges, fees for publications of public notices and office supplies.	
Mediation	\$2,000	Contract for mediation services as needed.	
ICC Travel	\$5,000	Mileage, lodging, meals, stiped and childcare for ICC members to attend State ICC, Sub-Committees, and Regional ICC to participate in ICC meetings.	·
Subtotal of amount under B:	\$89,000		

C. Direct Services (Funded by Federal IDEA Part C Funds)

When completing this section include:

- A description of any direct early intervention service that the State lead agency expects to provide to eligible children and their families with Federal IDEA Part C funds;
- The approximate amount for each direct service (States must disaggregate by service the approximate amount of Federal IDEA Part C funds expected to be expended for each direct service); and
- A subtotal of the amount.

(Add rows as needed.)

Description of Each Direct Early Intervention Service	Approximate Amount of Federal IDEA Part C Funds to be Spent on Each Direct Service
Early Intervention Services—Funding for first partial month of Early Intervention services or if the parents are unable or choose to not apply for Medicaid.	\$969,361
Subtotal of amount under C:	\$969,361

D. Activities by Other State Agencies

If State agencies (other than the State lead agency) are to receive a portion of the Federal IDEA Part C funds and that amount is not already identified in Section III.C above, the State must include in this section:

- The name of each State public agency expected to receive funds;
- The approximate amount of funds each State public agency will receive; and
- · A summary of the purposes for which the funds will be used.

Provide subtotal of amount. (Add rows as needed.)

State Agency Receiving Funds	Amount of Funds	Purpose
Subtotal of amount under D:	\$0	

E. Description of Optional Use of IDEA Part C Funds⁵

In addition to using Federal IDEA Part C funds to maintain and implement the statewide system of early intervention, States may use funds for:

- expanding and improving on services for infants and toddlers and their families that are otherwise available; and
- initiating, expanding, or improving collaborative efforts related to at-risk infants and toddlers in any State that does not provide services for at-risk infants and toddlers. The application must include:
 - The name of the major activity;
 - The approximate amount of funds to be spent; and
 - A description of the activities.

Provide subtotal of amount. (Add rows as needed.)

Major Activity	Part C Funds to be Spent	Description of Activities
Right Track	\$812,940	A statewide contracted childfind activity to inform community referral sources and general public of child development and early intervention referral process, and to screen infants and toddlers referred from CAPTA agencies, the Birth Review Program (follow-up based on birth certificates), EHDI Project, and other community generated referrals.
Milestone Technical Assistance and Consulting	\$290,000	Technical Assistance Project-Monitors quality of regional Infant Development programs and provides statewide and program specific technical assistance regarding minimum compliance and best practice.
Individual Audiologists	\$10,000	Individual contracts with local audiologists to train Infant Development staff and interpret hearing screening results (OAE and tympanograms).
Subtotal of amount under E:	\$1,112,940	

Part C Annual State Application: FFY 2021 OMB No. 1820-0550/Expiration Date: 12/31/2023

⁵ See IDEA section 638.

F. Totals

Enter the subtotal amounts for Sub Sections A-E found in Section III and any indirect costs charged as specified in Section IV.B. The subtotal amounts (Rows 1-6) should total the estimated grant application amount. (A State may apply for less than the full estimated allotted amount.)

Row No.	Section	Amount
Enter the s	ubtotal amount	s for Sub Sections A-E found in Section III of this application.
1.	III.A.	\$ 106,495
2.	III.B.	\$89,000
3.	III.C.	\$ 969,361
4.	III.D.	\$0
5.	III.E.	\$ 1,112,940
Enter any Ir	ndirect Costs to	be Charged (See Section IV.B of this application.)
6.	IV.B	\$ 75,000
Total (Rows 1-6)		\$ 2,352,796

Section IV

The State

A. System of Payments / Use of Insurance / Program Income

v	
X	_ does (check as applicable)
(does not (check as applicable)
303.52 as a slie §200.30 expend	system of payments for Part C services under 34 CFR §§303.203(b)(1), 303.500(b), 303.520, and 1 which may include the use of public benefits or insurance, private insurance or family fees, such ding scale. Any family fees collected are treated as "program income" for purposes of 2 CFR 07(e) and 34 CFR §303.520(e) and are not included in the State's determination of State and local itures for maintenance of effort and non-supplanting purposes of 20 U.S.C. 1437(b)(5)(B) and 8 §303.225(a) and (b).
	he State has adopted new or has revised its existing policies and procedures regarding its system of payments, it must ese new and/or revised policies and procedures under Item 3.a in Section II.A above.
B. Re	stricted Indirect Cost Rate/Cost Allocation Plan Information
34 CFR agency requirer	DEA's non-supplanting provisions in 20 U.S.C. 1437(b)(5)(B) and Part C regulation in §303.225(c), a lead agency may not charge indirect costs to its Part C grant unless the lead charges indirect costs through either— (i) A restricted indirect cost rate that meets the ments in 34 CFR §§76.560 through 76.569; or (ii) A cost allocation plan that meets the non-ting requirements in paragraph (b) of this section and 34 CFR part 76 of EDGAR.
	he applicable status below (more than one check mark may be necessary) and enclose iate documentation for this Federal Fiscal Year.
	No indirect costs are charged to the Part C grant. The total amount of the Federal Part C grant is used for allowable direct costs.
	The lead agency is an State educational agency (SEA) and works directly with the U.S. Department of Education's Indirect Cost Unit to ensure that indirect costs are only charged on a restricted basis to the State's IDEA Part C grant. The State has a final restricted indirect cost rate agreement that is approved for the period through (Please attach a copy of the most recently approved restricted indirect cost rate agreement or cost allocation plan or other applicable indirect cost documentation.)
· (The lead agency is not an SEA and has a final restricted indirect cost rate that has been approved by the State lead agency's cognizant Federal agency and is in effect for this FFY (ending on June 30, 2022) The period of approval for the restricted indirect cost rate agreement is through (The State must attach a copy of the approved restricted indirect cost rate agreement.)
•	The lead agency is not an SEA and has either a provisional or final restricted indirect cost rate that expires or expired on and the State is in the process of negotiating a new

⁶ Charging indirect costs on a "restricted" basis is a key part of implementing the IDEA Part C requirement in IDEA section 637(b)(5)(B), which requires that federal funds be used to supplement (and not supplant) "State and local funds expended for infants and toddlers with disabilities and their families. The restricted indirect cost rate formula is described at 34 CFR §§75.564 and 76.565. The formula limits the general administrative costs that can be included in the indirect cost pool (numerator) and requires adjustments to the modified total direct cost (MTDC) base (denominator).

A "provisional" indirect cost rate is a temporary rate established for a future prospective period of time to permit budgeting, obligations, and payment of funds by awarding agencies until such time as the actual indirect costs can be determined and a final rate is established for the applicable period; provisional rates are subject to adjustment by issuance of a "final" rate based on actual indirect costs incurred for the period (usually the organization's fiscal year).

negotiated and approved by the State's cognizant Federal agency, at which point the State lead agency must make appropriate adjustments for applicable FFYs. The State acknowledges that a final restricted indirect cost rate may result in an adjustment of the final audited expenditures allowable to be charged to the Part C grant and the Department's approval of this FFY Part C application with an expired or provisional restricted indirect cost rate does not constitute approval of that rate as the final rate for the lead agency for this FFY. When a final restricted indirect cost rate is approved, the lead agency must submit to OSEP: (1) a copy of the "final" restricted indirect cost rate agreement; and (2) details of adjustments made to past GAPS draw downs in light of the "final" rate. (The State must attach a copy of the previously approved restricted indirect cost rate agreement.)

__X___ The lead agency is not an SEA and has a final cost allocation plan that has been approved by the State lead agency's cognizant Federal agency, which is Health and Human Services. The cost allocation plan charges costs only on a restricted basis and has also been approved by ED's Indirect Cost Unit. It is in effect until amended for this Federal fiscal year (FFY) (ending on June 30, 2022). (The State must attach a copy of the approved cost allocation plan and approval documentation from both the lead agency's cognizant Federal agency and ED's Indirect Cost Unit.)



Program Support Center Financial Management Portfolio Cost Allocation Services

90 7th Street, Suite 4-600 San Francisco, CA 94103-6705 PHONE: (415) 437-7820 FAX: (415) 437-7823 EMAIL: CAS-SF@psc.hhs.gov

January 17, 2019

Kathy Smith, Liaison Accountant, Fiscal Administration North Dakota Department of Human Services State Capitol-Judicial Wing 600 E. Boulevard Ave Dept. 325 Bismarck, ND 58505-0250

Dear Ms. Smith:

This letter provides approval of the North Dakota Department of Human Services Cost Allocation Plan (Plan) amendment transmitted to our office on April 6, 2018, and subsequently revised on September 27, 2018, and January 17, 2019. This amendment, which was submitted in accordance with 45 CFR 95, Subpart E, is effective January 1, 2018 and July 1, 2018.

Acceptance of actual costs in accordance with the approved Plan is subject to the following conditions:

- 1) The information contained in the Plan and provided by the State in connection with our review of the Plan is complete and accurate in all material respects.
- 2) The actual costs claimed by the State are allowable under prevailing cost principles, program regulations and law.
- 3) The claims conform with the administrative and statutory limitations against which they are made.

This approval relates only to the methods of identifying and allocating costs to programs, and nothing contained herein should be construed as approving activities not otherwise authorized by approved program plans or Federal legislation and regulations.

Implementation of the approved Cost Allocation Plan may subsequently be reviewed by authorized Federal staff. The disclosure of inequities during such reviews may require changes to the Plan.

If you have any questions concerning the contents of this letter, please contact Stanley Huynh of my staff at (415) 437-7829. Please submit your next proposed Plan amendment electronically via email to CAS-SF@psc.hhs.gov.

Sincerely,

Arif M. Karim -S 09.234219200300.10

Arif Karim, Director Cost Allocation Services

cc: Jeff Newton, ACF Wanda Hall, ORR Kristina Buzzell, SSA David Steele, DoED Richard Allen, CMS Francisco Lebron, FNS Percy Devine III, ACL

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Attachments

- 1 County Cost Allocation Random Moment Time Study
- 5 Department of Corrections and Rehabilitation IV-E Time Sheet
- 7 ND DHS Manual Service Chapter 115-05, Administrative Policies of the Department of Human Services
- 8 Organizational Charts Illustrating Structures of County Social Service Board
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DEPARTMENT OF HUMAN SERVICES COST ALLOCATION PLAN

Part I: Introduction

A. DEPARTMENTAL OVERVIEW

The North Dakota Department of Human Services is an umbrella agency headed by an Executive Director appointed by the Governor. The Executive Director and the Deputy Director oversee the operations of four organizational components consisting of Program and Policy, Medical Services, Behavioral Health and Administration and Support.

Administration and Support consists of Human Resources, Legal Advisory, Information Technology Services (ITS), Public Information, and Fiscal Administration, which provide support services to all programs.

Program and Policy is comprised of seven major programs: Child Support, Economic Assistance Policy, Children and Family Services, Aging Services, Developmental Disabilities (including Long Term Care for the Developmentally Disabled), Vocational Rehabilitation, DD Council. Programs within Children and Family Services include foster care for children, day care licensing, child protective services and adoptions.

Behavioral Health consists of the eight Human Service Centers, and two institutions; Life Skills and Transition Center and North Dakota State Hospital, Behavioral Health Division and the Statewide Community Clinic Director.

Direct delivery of services to individuals and families is provided through eight regional human service centers located in each of the Governors designated planning regions. The human service centers provide a comprehensive array of outpatient services including mental health services, social services, addiction counseling, emergency services, outreach and vocational rehabilitation services which include employment services, supported employment, independent living, and various third-party programs providing cooperative rehabilitation services. The human service centers also provide supervision and direction to county agencies in the provision of social services. Additionally, the centers are responsible for coordination of the Aging Services program, including the long-term care ombudsman.

Institutionalized treatment services for substance abuse, mental illness, and secure services for sexual offenders are provided by the North Dakota State Hospital located at Jamestown. The Life Skills and Transition Center, located at Grafton, is an educational and training facility for persons with intellectual disabilities.

B. PURPOSE

The purpose of the cost allocation plan is to identify information necessary to document and justify a method of allocating costs among programs and between functions and activities on an equitable basis to assure:

- 1. That federal programs are charged only for costs assigned to them;
- 2. That any portions of the total costs assignable to federal programs which are to be excluded from federal sharing, based on the applicable law and regulations, are so excluded; and
- 3. That costs assignable to activities or functions having different federal sharing rates are properly segregated.

All minutes of recorded time, time studies, FTEs and allocations to programs and cost pools, including prior adjustments within the current fiscal year, are accumulated fiscal year to date each month.

The procedures used for determining the allowableness of costs and the allocation of costs are consistent with the provisions of 45 CFR 75 and 2 CFR 200. Accounting records are supported by source documentation.

C. DEFINITION

- 1. FTE: full time equivalent is equal to one employee for one month of work.
- 2. RMTS: The random moment time study (RMTS) is a time analysis system used by the Department of Human Services to equitably distribute costs to appropriate programs. The RMTS system provides statewide on-going sampling of county income maintenance and social services worker activities (see Attachment 1).
- 3. CENTRAL OFFICE: The central office includes Administration and Support, Program and Policy, Behavioral Health and Medical Services.

Effective Date: Feb 1, 2018 Date Submitted: April 6, 2018

Part II: Programs Administered and Administrative Structure

A. The following Attachments depict the organizational structure of the agency and programs administered by the agency.

Attachment 6 - The organizational charts illustrating the divisions and sub-units of the Department of Human Services

Attachment 7 - The North Dakota DHS Manual Service Chapter 115-05, Department of Human Services Administrative Policies.

Attachment 8 - The organizational charts illustrating the structures of county social service boards (CSSBs).

B. HUMAN SERVICE CENTERS

- 1. Activities of the human service centers are a direct function of the Department of Human Services as follows:
 - a. Provide direct services upon request of the consumer or upon a referral from a county or other agency;
 and
 - b. Administer and implement regulations, policies and procedures of the Department of Human Services.
- 2. Human Service Centers are administratively responsible for case management for individuals with intellectual disabilities and regional oversight of aging, child welfare, vocational rehabilitation, and developmental disabilities programs. Oversight activities include the investigation of child and elder abuse, child care and foster care licensing, program oversight for developmental disabilities services, and program oversight for county social services.

C. COUNTY SOCIAL SERVICE BOARDS

- 1. North Dakota programs are state supervised and county administered. Assistance payments and the authorization for medical assistance are certified at the county level and disbursements are made at the state level. County social service board expenditures for administration, social services and training are budgeted, funded and disbursed at the county level. Federal claims for administrative, social service and training costs are submitted by the state department on the basis of expenditure and functional reports from the counties. Reimbursement is made to the counties in whole, or in part, on the basis of such reports.
- 2. The county social service boards are supervised by the North Dakota Department of Human Services with the following structure:
 - a. Accounting procedures, fiscal and statistical reports, and related operations are reviewed by the Fiscal Administration unit. Audits are conducted by the State Auditor's Office and other independent auditors;
 - Eligibility for maintenance assistance and medical assistance programs are supervised by regional representatives of economic assistance under the functional direction of the director of economic assistance eligibility:
 - c. Staff development and training are supervised by the directors of the appropriate programs; and
 - d. Personnel policies and procedures are supervised by the director of Human Resources and the central personnel system.

D. PRIVATE AGENCIES AND OTHER PUBLIC AGENCIES

- 1. The Department of Human Services utilizes and coordinates the services available from private and other public agencies according to the commitments in state program plans. One of the following administrative methods may be used:
 - a. Under the provisions of a Memorandum of Understanding, services may be provided

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by an outside public agency within the scope of the service plan for the single state agency. Periodically, the public agency makes a full service report and certifies the cost of the service to the Department of Human Services for a federal matching claim. Billing will be based on actual costs incurred.

- Through an agreement with other private or public agencies, services may be purchased on an established rate structure.
- c. The Department of Human Services may receive donated funds to be used as the non-federal share of the cost of services provided or purchased. Funds donated for services or administrative functions are considered state funds and are used to claim federal financial participation.
 - (1) Public funds are considered as the State's share in claiming federal reimbursement only when the funds are:
 - Appropriated directly to the Department of Human Services, or transferred from another public agency to the Department of Human Services and under its administrative control, or certified by the contributing public agency as representing expenditures eligible for Federal match;
 - b. Not used to match other Federal funds; and
 - Not Federal funds, or are Federal funds authorized by Federal law to be used to match other Federal funds; or
 - (2) Funds donated from private sources are considered as the State's share in claiming federal reimbursement only when the funds are:
 - a. Donated without any restriction which would require their use for the training of a particular individual or at particular facilities or institutions; and
 - b. Do not revert to the donor's facility or use.
 - c. Are not used to match other Federal funds;
 - d. Are certified both by the Department of Human Services and by the donor (if funds are donated directly to the Department) or the Department and the entity designated by the DHS to receive donated funds (if funds are donated directly to the designated entity) as available and representing funds eligible for Federal match.

If a donation is received in excess of \$1,000, and is related to Medicaid services the Department will discuss the use of these funds with the Centers for Medicare and Medicaid.

All of the above procedures may not be applicable to every program. The program administrators must examine the procedures under consideration in light of the program regulations and the program's state plan.

Part III: Central Office Standard Allocation Procedures

- A. All actual administration expenses are direct charged or allocated and no indirect cost rates are used.
- B. When costs are allocated to programs, the distributions are based on the accumulated costs to date and are distributed on the basis of the accumulated statistics. The accumulated prior month's program distribution is subtracted to arrive at the current month's costs. The Executive Office and Support Units (HR, Fiscal Administration, Legal, Public Information Office, and Information Technology) are responsible to make department-wide purchases related to the functions of their specific areas. For example all computers, printers, and software are managed and purchased by the Department's Information Technology Division, and the HR division is responsible to purchase all service awards in accordance with Department policy. Each division has individuals who are authorized to approve purchases related to their area, some of which are direct charged to federal or state programs and some that are allocated to all benefiting programs. Each division in the Department is assigned a program accountant who is knowledgeable of the applicable federal and state requirements surrounding the programs in their division. The program accountant works directly with the division or program director to ensure costs are properly assigned to the appropriate funding source(s). Each program director has delegated their authority to the Department's support units to make purchases on their behalf to comply with Department policy and/or state law.
- C. The North Dakota central accounting system accumulates salaries, travel and all other expenses of the state central office into programs and cost pools by means of department identifiers (IDs). These expenditures are allocated in the following manner:
 - 1. Fringe benefits, including unemployment compensation insurance, follow the respective salary department ID;
 - 2. Travel expenses are charged according to the purpose of travel indicated on the travel vouchers for each day or trip;
 - 3. The State Motor Pool bills the Department for the use of vehicles. The Department is billed a usage fee for each vehicle. The fee is identified for each person and/or unit and direct charged to programs and/or functions:
 - 4. Copier cost pools are distributed on the total number of accumulated copies logged;
 - 5. Value of space in public buildings, which is based on cost, is allocated on the basis of square footage with the common area prorated on the basis of the direct; depreciation expense for the Southeast Human Service Center is also allocated based on square footage.
 - 6. Telephone service is charged based on usage and allocated to the central office cost pool;
 - 7. Payments for postage expenses, United Parcel Service (UPS), and bulk mail are predominately for check writes and are charged to a specific program. The balance is charged to Departmental Overhead Central Office/HSCs. Bulk mail is charged to programs based on usage. No attempt is made to charge the cost of UPS deliveries to programs as the actual usage is charged to Departmental Overhead Central Office/HSCs;
 - 8. The cost of the maintenance contracts are charged to the cost pool or program where the equipment has been assigned;
 - 9. Information Technology Department charges for systems, programming, computer time (clock time), microfiche, and applied overhead are charged by job number for each job run. Wide Area Network charges are allocated to various programs based on the accumulated time of income maintenance and social service workers for those programs as determined by random moment time study of the 47 CSSB workers, including income maintenance and social service codes.
 - Central supplies, central duplicating, and printing are identified and direct charged. Any costs not identified
 are charged to a multi-divisional department ID and subsequently to the Departmental Overhead Central
 Office/HSCs cost pool.
 - 11. Prairie Hills Plaza expenses are allocated between the various programs which utilize shared resources located at the Prairie Hills building based on the accumulated FTE's of each program. Current programs utilizing shared services located at Prairie Hills Plaza are Developmental Disabilities Division, Vocational Rehabilitation, Behavioral Health, and Aging Services.

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- 12. DHS North expenses are allocation between the various units located at the DHS North building based on the accumulated FTE's of each unit. Units currently located at DHS north include, MMIS claims, data entry, system support and development, decision support, ITS network, desktop and security services, electronic management services, ITS coordinator, project management, training, and ITS management and support.
- D. The Department of Human Services cost allocation system is a component of the Peoplesoft central accounting system which is under the control of the State Office of Management and Budget. The system is designed to report salaries for the month earned or what is referred to in the system as "fiscal month".
- E. The following pages report by unit how direct and allocated costs (indirect cost pools) are distributed to programs. There is a brief description of the unit, including the type of allocated and indirect cost pools associated with each unit.

Part IV: Administrative Costs

A. DEPARTMENTAL ORGANIZATION

The Executive Director for the Department of Human Services has direct authority over Human Resources, Fiscal Administration, Legal Advisory unit, Behavioral Health, and Medical Services. The Deputy Director has direct authority over Information Technology Services, Public Information, and Program and Policy.

The regional human service centers implement State programs that provide for the delivery of services. Administrative support for the centers is decentralized. Each center has a business office responsible for accounting activities. Human resources, payroll functions, and accounts receivable/billing for the eight regional human service centers are centralized in the State office. Network and Desktop Support services are centralized with the Information Technology Services unit.

The State Hospital and Life Skills and Transition Center's business office, accounts receivable, and HR functions are all centralized. Technology services for Network and Desktop support are centralized with the Information Technology Services unit.

B. COMPOSITION OF SUPPORT UNITS

The following units provide administrative support services under the direction of the Executive Director.

- 1. The State Human Resources (HR) office provides technical support and assistance to Department of Human Services and County Social Service Board staff for the purpose of hiring and retaining qualified employees.
- Fiscal Administration is responsible for fiscal operations including payroll, accounts receivable, accounts
 payable, budgeting, program reporting, provider auditing, office services (supplies etc.) and cost allocation for
 county social service boards.
- 3. Legal Advisory unit manages rule making for the department, litigates claims, prepares legal opinions and handles appeals.

The following units provide administrative support services under the direction of the Deputy Director.

4. The Information Technology Services (ITS) unit provides system and program customer support services related to technology and information management for the department. System support services include Network Services, Desktop Services, Security Services, Data Entry, MMIS Claims Processing, and Electronic Data Management Services (EDMS). Program support services include ITS Coordinators, Project Management Services, Training, and Decision Support.

The Public Information Officer facilitates the release of information through the media, coordinates and prepares special publications and provides support services as delegated by the Executive Director.

C. DEPARTMENTAL OVERHEAD

Administrative overhead from the Executive Office, services provided by central office support units and various departmental administrative expenses benefit each DHS organizational component to varying degrees. These expenses are categorized as to those that benefit central office programs and human service centers, those that benefit central office programs and human service centers and the state hospital and developmental center and lastly, those that benefit only central office programs. The three departmental overhead expense cost pools are defined below. For the composition of all departmental indirect cost pools refer to attachment 10.

1. Departmental Overhead - Central Office/Field Services

This cost pool accumulates departmental overhead expenses that benefit all DHS component units. Included in this cost pool are the following expenses:

- a. Executive Office
- b. Human Resources personnel benefiting all DHS staff
- c. ITS Systems Support Staff (Network Services, and EDMS personnel)

The accumulated expenses are distributed on the basis of the total accumulated FTE's of the department, including FTE's of the human service centers, State Hospital, and Life Skills and Transition Center.

2. Departmental Overhead - Central Office/HSCs

This cost pool accumulates departmental overhead expenses that benefit central office programs and the regional human service centers. Included in this cost pool are the following expenses.

- a. Human Resources personnel
- b. Fiscal Administration payroll personnel
- c. Expenditures that benefit the organizational components above but cannot be charged to a specific program or cost objective.
 - 1. State Fire and Tornado premiums
 - 2. Risk Management premiums
 - Expenses for copier, postage, supplies, printing and duplicating etc. that have not been direct charged.
 - 4. Statewide Cost Allocation Plan

The statewide indirect cost allocation plan was completed by the firm MGT Consulting Group. The costs will be claimed upon approval of the plan by the Health and Human Services Cost Allocation Division.

The accumulated expenses, of the above cost pool, are distributed on the basis of the total accumulated FTE's of the central office, and human service centers, and excluding the FTE's of the State Hospital and Life Skills and Transition Center.

3. Departmental Overhead - Central Office cost pool

This cost pool accumulates departmental overhead expenses that benefit only central office programs. Major expenses in this cost pool include:

- a. Human Resources personnel
- b. ITS Systems Support Staff (Not included in #1(c) above)
- c. Central Office telephone

The accumulated expenses are distributed on the basis of the total accumulated FTE's of central office program staff.

D. ALLOCATION OF SUPPORT UNITS

1. Human Resources

Human Resources personnel are direct charged to one of the departmental cost pools based on the duties they have been assigned. Staff who have been assigned duties that cannot be directly charged to a cost pool will be allocated to more than one cost pool based on a full-time time study. Cost pools that Human Resource personnel may be assigned to include: one of the departmental overhead cost pools, previously indicated, the county social services board cost pool, or the statewide human services center cost pool (see attachment 10). The costs allocated to the departmental overhead cost pools are funded with State general fund.

2. Fiscal Administration

The direct and allocated expenses for Fiscal Administration are accumulated in the following cost pools:

- a. The Chief Financial Officer cost pool accumulates the direct expenses of the Chief Financial Officer and any departmental overhead. The costs are allocated on the basis of the accumulated FTE's assigned to Fiscal Administration.
- b. The Fiscal Administration Central Office cost pool includes salaries, operating expenses and related overhead for accounting activities that support central office programs. These activities include revenue deposits, vendor payments, procurement, LOC drawdowns, office services, and other professional staff that provide accounting, and monitoring functions. The Fiscal Administration cost pool will be allocated on the basis of the accumulated monthly actual salaries and operating expenses incurred for central office programs or units. The costs allocated to a central office program will be charged to a direct or indirect grant (refer to attachment 10). Direct grant numbers begin with a "S". Indirect grant numbers begin with a "HS". The costs allocated to indirect grants (cost objectives) will be accumulated as a part of a total indirect cost pool and distributed to programs as addressed in the plan for that specific cost objective.
- c. The Fiscal Administration Budgeting/Contracting cost pool includes staff and related overhead for budget personnel, responsible to manage the overall departmental budget projections and funding activities and other professional staff that provide department wide accounting, and monitoring functions including subrecipient monitoring. See attachment 30 for the Department's subrecipient monitoring procedures. They support central office programs and assist business office staff in incorporating human service center and institution budget information. The Fiscal Administration Budgeting/Contracting cost pool will be allocated on the basis of the accumulated monthly actual salaries and operating expenses incurred for central office programs, and the actual salaries and operating expenses for each of the business offices in the 8 HSC's and the 2 institutions. The allocated costs will be charged to a direct or indirect grant as indicated in attachment 10. The costs allocated to indirect grants (cost objectives) will be accumulated as a part of a total indirect cost pool and distributed to programs as addressed in the plan for that specific cost objective.

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- d. The MMIS Operations Supervisor and related overhead will be allocated on the basis of the accumulated FTE's assigned to the MMIS Operations Supervisor.
- e. The Field Services Assistant CFO provides fiscal oversight to the eight human service centers, State Hospital, Life Skills and Transition Center and Electronic Health Record (EHR) unit. The direct and allocated costs for the Field Services Assistant CFO are based on the cumulative FTEs of the State Hospital, eight regional human service centers, Life Skills and Transition Center and EHR.

f. Program Reporting

Fiscal Administration Program Accountants are assigned to support a component, central office division unit or a fiscal administration function. The staff act as liaisons to program administrators to provide support for all accounting activities. Staff may be assigned to a specific unit or a combination of several units. The program accountants work directly with the program directors and are responsible to ensure expenditures are properly charged to the appropriate to federal and/or state programs in the state's accounting system. If an adjustment is needed in the state's accounting system to properly report expenditures, the program accountant is responsible to make the adjusting entry. Each program director has delegated their authority to the Department's support units to make purchases on their behalf to comply with Department policy and/or state law. Staff have been assigned to support the following units or combinations thereof:

- 1. ITS/Economic Assistance
- 2. MMIS
- 3. Children and Family Services/Foster Care/Cost Allocation Plan/Adoption
- 4. Medical Services/Behavioral Health Services
- 5. Administration and Support/County
- 6. Developmental Disability Services/Aging/Vocational Rehabilitation/Developmental Disability
- 7. DD Council/Child Support
- 8. EA/Foster Care/Sub Adopt/Administrative Support

The FTE and salaries and benefits of staff that are assigned to more than one division/unit are allocated based on a full-time time study.

g. Provider Audit

Provider Audit staff perform audits and rate setting activities for Nursing Homes, Foster Care group homes and Residential Treatment facilities, and Basic Care facilities. The direct and allocated costs will be allocated to the above cost objectives on the basis of the number of audit hours logged by individual providers accumulated for each provider group. The cost identified with each cost objective will be charged as follows:

- 1. Nursing Homes, Psychiatric Residential Treatment Facilities Charged to Medical Administration
- 2. Foster Care Group Home/Residential Care Facilities Charged to the foster care cost pool
- 3. Basic Care Basic Care pays for personal care service and room and board. Personal care services are charged to Title XIX Medical Assistance Payments. Room and board payments are charged to State general fund. Administrative expenses allocated to Basic Care are charged to Title XIX medical administration and State general fund on the basis of the accumulated dollars paid for personal care and room and board.

h. County Social Service Board Cost Pool

The CSSB cost pool accumulates the salary costs of Human Resources personnel assigned to provide technical support and assistance to CSSB offices, Fiscal Administration staff responsible to

Effective Date: Feb 1, 2018 Date Submitted: April 6, 2018 allocate county administrative expenses based on the State's approved cost allocation plan and county wide area network costs (WAN) paid by DHS. The CSSB allocation will be allocated to all county programs based on the accumulated time, as determined by the random moment time study, for income maintenance and social service workers for the 47 CSSBs.

3. Information Technology Services

Network Services personnel are responsible to plan, implement and support client-server technology for the central office, human service centers and institutions. Desktop services personnel support the installation of hardware and desktop application software. Staff are assigned and located in the central office, human services centers and institutions. Security services personnel are responsible for procedures to guard data confidentiality, integrity and availability for all departmental systems. The EDMS coordinator provides imaging and data management support. Direct and overhead costs for network and EDMS staff are allocated based on total accumulated FTE's of the department or charged to various programs based on the legislatively approved FTEs of the region the staff are located or charged to general fund.

IT Coordinators provide maintenance and daily operational activities support for systems programs. They are the liaison between DHS and the North Dakota Department of Information Technology Department (ITD). The accumulated direct and overhead costs for IT Coordinators are allocated based on data processing charges of the program systems. The Business Information Systems Administrators are a key component for major development and enhancement projects. They are responsible to determine the resources needed to implement a project on time and supervise the implementation of the solution. The accumulated direct and overhead costs for the Business Information Systems Administrators are direct charged to their assigned programs or allocated using the same cost pool as the system they have been assigned to. Training staff are responsible for web based training. Decision Support provides statistical analysis of data, for purposes of establishing trends, etc., to aid in forecasting changes that will affect departmental programs. The accumulated direct and overhead costs for training staff benefiting all DHS staff are allocated based on the total accumulated FTE's of the department. Decision Support staff direct and overhead costs are allocated based on a full-time time study. Architect Associates maintain the architecture of the enterprise-wide information technology function, such as application development, computer systems or telecommunications. The accumulated direct and overhead costs for Architect Associates are allocated to assigned projects based on a full-time time study. Business Analyst staff work as liaisons between business/end users and information technology in order to elicit, analyze, communicate, and validate requirements for new or changed business processes. The direct and overhead costs for Business Analyst staff are direct charged to their assigned programs or allocated using the same cost pool as the system they have been assigned to.

The accumulated direct and overhead costs for the Director of Information Technology Services and support staff are allocated based on the FTE's assigned to each of the ITS service units.

The Master Client Index expenses are allocated based on the active member counts for each source in the Master Client Index. Sources include: Child Support, Developmental Disabilities, SNAP, FRAME, CHIPS-Adm, Medicaid, TANF and Vocational Rehabilitation.

The Master Client Index Update expenses are allocated based on the active member counts for each source in the Master Client Index. Sources include: Child Support, Developmental Disabilities, SNAP, FRAME, CHIPS-Adm, Medicaid and TANF. Vocational Rehabilitation updates their own addresses and is not included.

MMIS Claims Processing

Data Entry staff are responsible to initiate batch processing, distribute reports and plan and distribute batch calendars. Direct and overhead costs of the Data Entry unit will be allocated based on the accumulated count of the number of documents scanned or keyed for each document type.

Effective Date: Oct 5, 2015 Date Submitted: April 6, 2018 The expenditures related to the MMIS Health Enterprise system that are allocated to programs, through the MMIS cost pool, include costs billed by the State Information Technology Department and vendor payments (Condunt and Truven Health Analytics) to maintain and support the system as well as the data warehouse charges. It does not include costs for design, development and implementation. Since the system is not yet certified, costs are reimbursed at 50/50 federal/state participation rate. The Operational Advance Planning Document for the MMIS project was approved November 3, 2015 with an effective start date of October 5, 2015. Other Federal programs that use MMIS to process claims include Money Follows the person, Infant Development Part C, Refugee Assistance and CHIP as well as State programs.

Direct and overhead costs of the Claims Processing unit, MMIS call center, and MMIS Business Analysts will also be allocated through the MMIS cost pool. Claim processing staff are responsible to process all MMIS claims. The call center fields calls from providers and provides customer service for the MMIS system. MMIS Business Analyst staff work as liaisons between business/end users and information technology.

Expenditures charged to the MMIS cost pool include system maintenance and operation costs for the medical claims payment system, MMIS Health Enterprise, the MMIS Claims Processing Unit direct and overhead costs, and the direct and overhead costs of the Business Analysis staff assigned to the MMIS system. Costs associated with these activities will be allocated to programs based on the number of transactional claim numbers paid for each program from MMIS and accumulated federal fiscal year to date each month. Claims for Money Follows the Person, Infant Development Part C. Refugee Assistance, Medicaid, CHIP, and other state funded programs are paid through the MMIS system. The Medicaid claims will be allocated between Medicaid and CHIP based on the number of CHIP premiums paid each month, with each premium payment counted as a claim. In addition, the state has a proxy, to allocate 1.51% of the Medicaid share of the MMIS system maintenance and operations and MMIS claims processing administration and operating costs to CHIP administration. The amount allocated to CHIP will be reimbursed at the enhanced rate of 88% federal share, based on the availability of federal CHIP administration funds. If CHIP administration costs exceed the 10% administration limit, the excess MCHIP portion of the allocation will be reimbursed by Medicaid at a 50/50 federal/state participation rate until certification of the system occurs, after which reimbursement will be at a 75/25 federal/state participation rate.

a. Collaboration with Other State Agencies

The North Dakota Health Information Network (NDHIN) is operated by the North Dakota Information Technology Department (ITD). The NDHIN provides-a secure, medical record sharing network for providers and consumers. DHS will update the State Medicaid Hit Plan (SMHP) and the associated Implementation and Advance Planning document (I-APD). ITD will request reimbursement from the North Dakota Department of Human Services (DHS) for contract expenditures. NDDHS will request the federal share of reimbursement from the Centers for Medicare and Medicaid Services for reimbursement. NDDHS has entered into an interagency agreement with ITD. See Attachment 40.

4. Public Information

The Public Information Office facilitates the release of information through the media, coordinates and prepares special publications, and provides support services as delegated by the Executive Director. The direct and allocated costs of the Public Information staff are allocated based on the total accumulated FTEs of the department, including FTEs of the human service centers, State hospital, and Life Skills and Transition Center.

5. Legal Advisory

Legal Advisory unit manages rule making for the department, litigates claims, prepares legal opinions, and handles appeals. The direct and overhead expenses for legal services are direct charged based on the legal service hours provided by the legal advisory unit for each program.

Effective Date: Oct 5, 2015 Date Submitted: April 6, 2018

Part V: Program and Policy

A. PROGRAM AND POLICY

The units included under Program and Policy are: Developmental Disabilities Division (including Long Term Care for the Developmentally Disabled), Children & Family Services, Aging Services, Economic Assistance Policy, Vocational Rehabilitation/DDS, Child Support and DD Council. Refer to Attachment 6, Organizational Charts, for structure of units that are part of program and policy. The accumulated direct and allocated costs for the director and support staff are distributed on the basis of the accumulated FTEs of the units included under program and policy.

B. The following units operate under the Deputy Director:

1. Aging Services Division

Aging Services is responsible for establishing programs to provide services for older individuals and persons with physical disabilities and to protect vulnerable adults from harm and violation of their rights. The accumulated direct and overhead costs for the Director of Aging are distributed on the basis of the accumulated FTEs of the individuals for the programs supervised.

Costs for aging services staff who perform activities that support home and community based care services for the elderly will be charged to the home and community based care cost pool. Costs for home and community based care services provided to the elderly are funded by Title XIX services and state funds. The state funded programs are entitled Service Payments to the Elderly and Disabled (SPED) and Expanded Service payments to the Elderly and Disabled. The SPED programs fund the home and community based care services that are received by the elderly who are not Title XIX eligible; and for specific services that are not covered by the waivers. The accumulated direct and allocated costs will be distributed based on the percentage of the number of persons receiving Title XIX Medicaid state plan services and the number of persons receiving services under the SPED programs. The cost allocated to Title XIX will be claimed as other Medicaid administration. Costs allocated to Medicaid waivers will be directly identified and reported separately.

The direct and allocated costs for other Aging staff will be charged to Aging Services Title III.

2. Developmental Disabilities Council

The developmental disabilities coordinator's direct and allocated costs are charged to the developmental disabilities grant. The DD Council planning costs and all contracted expenses are also charged to the federal grant.

All direct costs are charged to Federal programs. Allocated indirect costs are charged to general funds due to limited federal funding.

3. Vocational Rehabilitation and Disability Determination Services

The Director of Vocational Rehabilitation and Disability Determination Services is responsible for the planning, organizing and providing training and employment services to individuals with disabilities so they can become and remain employed and to provide eligibility decisions on behalf of applicants to the Social Security Administration. Refer to attachment 6, organizational chart. The accumulated direct and allocated costs for the Director are distributed on the basis of the accumulated FTE's of the Division.

A. Vocational Rehabilitation

Vocational rehabilitation services includes Services for the Visually Impaired, Client Assistance, Supported Employment, Independent Living for the Older Blind, and the Council on Human Resources.

Effective Date: Dec 1, 2016 Date Submitted: Sept 29, 2017

1. Reporting Units

- a. The direct and allocated costs for State Rehabilitation Services personnel are charged to Section 110. Basic Support, Title I of the Rehabilitation Act of 1973.
- b. The direct and allocated costs of the administrator of client assistance and any support staff are charged direct to Section 112, Client Assistance, Title I of the Rehabilitation Act of 1973.
- c. The direct and allocated costs of the administrator of supported employment and his staff are charged to Section 110, Basic Support, Title I of the Rehabilitation Act of 1973.
- d. Training costs for Vocational Rehabilitation personnel statewide are charged to the Section 110, Basic Support, Title I of the Rehabilitation Act of 1973.
- e. Contractual costs for independent living skills training are charged to the Independent Living Part B grant.

2. Vision Services Program

In an effort to optimize services to visually impaired, the Office of Vocational Rehabilitation created an ad hoc committee to review services and make recommendations. The Administrator of Vision Services provides planning and coordination of statewide services for visually impaired children, youth, and adults. The direct and allocated expenses are funded by Section 110, Basic Support, Title I of the Rehabilitation Act of 1973.

B. Disability Determination Services

The Director is responsible for the overall planning, organizing and coordination of activity associated with providing eligibility decisions. The direct and allocated costs of the Disability Determination Services are charged direct to Titles II and XVI of the Social Security Act as amended.

4. Children and Family Services

The Children and Family Services Division develops and coordinates social service programs provided through county social service boards, human service centers and private agencies to children who have become or are at risk of becoming neglected, abused, delinquent or unruly.

The accumulated direct and overhead costs for the Director of Children & Family Services, Assistant Director, and support staff are distributed on the basis of the accumulated FTEs of the division.

The IV-E Foster Care Participation Rate is calculated based upon the number of paid foster care cases that are IV-E eligible divided by the total number of paid foster care cases, regardless of the eligibility.

The following are functions of Children & Family Services

A. Permanency Unit

In addition to being the Administrator of the Foster Care program this position also has administrative responsibilities related to adoption assistance and refugee unaccompanied minor payments. The salary

and fringe benefits will be allocated based on a full-time time study (attachment 38) to the above cost objectives. The allocated salary and all other direct and allocated expenses for the foster care cost objective will be distributed to Title IV-E Foster Care Administration, Foster Care Emergency Assistance and Foster Care Regular (non IV-E, non EA eligible) based on an accumulated paid case count recorded for each program. The allocation to foster care emergency assistance will be charged to the TANF block grant. The allocation to Foster Care Regular is State funded. The costs for refugee unaccompanied minor payments will be direct charged. Duties related to adoption and permanency administration will be direct charged to adoption assistance and the foster care cost objective as described in this section. Other administration time will be allocated between the above cost objectives.

The Independent Living (IL) Administrator has administrative responsibilities related to sub guardianship, education and training vouchers, and RCCF/GH licensure in addition to the IL administrative duties. The salary and fringe benefits will be allocated based on a full-time time study to the above cost objectives. The allocated salary expense and all other direct and allocated costs to administer the foster care Independent living program and to purchase services for the purpose of providing independent living skills to youth who age out of foster care and young adults who have left foster care is charged to the foster care IV-E independent living grant.

The administrative expenses for Foster Care Training will be distributed to Title IV-E Foster Care Training, Foster Care Emergency Assistance and Foster Care Regular (state funds) based on an accumulated paid case count recorded for each program.

Foster Parent Training expenses are allocated to IV-E Foster Parent Training, Foster Care Regular Non IV-E (state funded) and Adoption Assistance IV-E and Adoption Assistance Non IV-E (state funded) based on accumulated paid case count recorded for each program.

The salary and operating expenses for staff participating in Foster Care Facility Licensing will be allocate based on the IV-E penetration rate, for all paid facility cases, between IV-E Foster Care Administration, Emergency Assistance and Regular Foster Care (state funded).

The Comprehensive Child Welfare Information and Payment System (CCWIPS) is a payment system for foster care and adoption programs only. The direct and allocated costs for the Title IV-E Eligibility Specialist/HELP Desk Administrator, Help Desk support staff and EDP costs for systems operations will be allocated to Foster Care IV-E, Foster Care Emergency Assistance, Foster Care Regular (non IV-E, non EA eligible), Adoption Assistance IV-E and Adoption Assistance Regular programs. The costs will be distributed based on an accumulated paid case count for each of the respective programs. The allocation for foster care emergency assistance will be charged to the TANF block grant. The allocation to foster care and adoption assistance regular programs is state funded. FRAME is a case management system. FRAME expenses are allocated based on accumulated time of social workers for those programs based on the random moment time study for county workers.

B. Adoption Assistance

Expenses charged to the adoption assistance cost objective include direct and allocated costs for the administrator of adoption and unwed parents and purchased services for special needs adoption. These contracted services provide for regionalized speal needs adoption staff who would be employed full time in the delivery of services in adoption to special needs defined children.

The direct and allocated expenses identified as adoption assistance will be distributed to Title IV-E Adoption Assistance Administration and Adoption Assistance Regular (Non IV-E eligible). The costs will be distributed on the basis of the accumulated number of children in paid adoption assistance recorded for each program. The costs for adoption assistance regular will be charged to State general fund.

C. On-site Case Reviews (OCR) and Family Preservation Services Administrator

Effective Date: July 1, 2017 Date Submitted: April 6, 2018 The Administrator of Family Preservation Services is responsible for Family Preservation, supervising the OCRs, and staff supervision, including the early childhood services administrator.

The salary and operating costs of the administrator will be allocated between assigned cost objectives based on a full-time time study. Duties related to Family Preservation will be charged to TANF. Duties relating to OCRs will be charged as follows:

The state OCR case review sample will include 42 foster care cases and 28 in-home cases. Activities related to OCRs will be directly charged to in-home and out-of-home placements based on the percentage of total cases. Out-of-home placements will be allocated to Foster Care IV-E, Emergency Assistance, and Foster Care non IV-E (state funded) based upon the accumulated paid case count for each program. In-home placements will be charged to state funds.

Duties related to early childhood will be charged to the Child Care Development Fund grant. Other administration time will be allocated between the above cost objectives.

D. Family Preservation/Child Abuse Prevention

Family preservation services are structured to keep families together. The administrator of Child Maltreatment and Prevention and Family Preservation services is responsible for Child Abuse Prevention and the following Family Preservation programs: Intensive In-Home, Parent Aid, Prime Time Day Care and Respite Care. Services provided for child abuse prevention will be charged directly to the Community Based Child Abuse Prevention (CBCAP) Grant. Family and individual therapy services included in the Rehabilitation Services State Plan are provided to Title XIX eligible clients for Intensive In-Home are billed to Title XIX as a medical rehabilitation service. Services provided to children for Prime Time Day Care and Respite Care are funded by Title IV-B Sub Part 2 and State general fund. Depending on the availability of funding, Title IV-B Sub Part 2 can also be used for direct services for Intensive In-Home (non-Title XIX clients) and for direct training of parent aids. Intensive In-Home, and Parent Aid, for eligible families, will be charged as Emergency Assistance. The salary and operating costs related to the administrator will be allocated between these two areas based on a full-time time study. Activities related to Child Abuse Prevention will be charged directly to the CBCAP Grant. Activities related to Family Preservation will be charged to TANF.

Effective Date: July 1, 2018 Date Submitted: April 6, 2018

E. Emergency Assistance Services

Emergency Assistance is the provision of out of home care and family services to eligible families with children who are experiencing a crisis. The services are provided in accordance with the approved State plan. Services are limited to a maximum duration of 12 months of service or less as necessary to alleviate the emergency condition and must be authorized during a single 30-day period, no less than 12 months after the beginning of the family's last Emergency Assistance authorization period.

The following expenses are identified as TANF emergency assistance authorized under prior law:

- Child Abuse and Neglect Investigations Counties bill a flat fee per investigation conducted.
- Foster Care Maintenance payments authorized for a period not to exceed 364 days. As stated
 in the TANF plan, TANF resources will be used for emergency assistance for maintenance
 payments for foster family care, group or residential child care for children separated from their
 parents. The application for Non-IV-E eligible children shall constitute the application for
 emergency assistance.
- 3. Multi County Child Abuse and Neglect Investigator Projects Contracts with counties for employment of child abuse and neglect investigators.
- Shelter Care Provide shelter to youth in lieu of temporary foster care for a brief period, usually less than 4 days.
- 5. Intensive In-Home Services Provides intensive counseling through In-Home Family service models to families who have a child in out of home placement or at risk of having a child placed out of home. Intensive-In-Home services are provided by regional human service centers and also purchased from private providers. Eligibility determination is completed by the CSSBs. The county sends a copy of the application form (attachment 27) to the human service center or private provider. The providers maintain a copy of the application and submit a bill for services to the central office. Payments for services provided to families that are eligible for the TANF emergency assistance are direct charged.
- 6. Parent Aid The county social service boards provide parent aid services. Parent aid services are provided to families who have children determined to be at risk of abuse or neglect. The parent aid is a tool to encourage, teach, and assist parents to enable them to develop independence and self-reliance. The worker performing activities in support of parent aide services will record time on the county RMTS as indicated in attachment 1.
- 7. In Home Case Management The county social service boards provide wrap around case management. Wrap around case management provides for a comprehensive systems oriented assessment of family risks and service needs. It requires the active involvement of the family in completing the assessment and engages them in the treatment planning. The services are provided by full time social workers and part time In-Home Specialists. The worker performing activities in support of wrap around services will record time on the county RMTS as indicated in attachment 1.

F. Child Protection Services

Child protection services provide for the protection & treatment of an abused or neglected child. The Administrator of Child Protection Services also supervises the criminal background check unit. The salary and operating costs related to the administrator will be allocated based upon a full-time time study. The salary and operating costs of the Deputy Administrator of Child Protection Services is charged to state funds.

The functions of the criminal background check position includes processing information for BCI/FBI, reporting out BCI/FBI background checks and gathering information from appropriate law enforcement agencies for BCI/FBI hits. The administrative cost for background checks is allocated to a foster care cost objective, adoptions cost objective and to a private/child care objective based on the number of transactions for each program, from the user fee bill, which includes instate and out of state background checks, for civil fingerprint transactions processed by the Federal Bureau of Investigation. The foster care cost objective is distributed to Title IV-E Foster Care Administration, Foster Care Emergency Assistance and Foster Care Regular based on accumulated paid case count for each program. The adoptions cost objective will be distributed to Title IV-

E Adoption Assistance and Adoption Assistance Regular based on the accumulated number on accumulated paid case count for each program. The allocation for the private/child care objective is direct charged state funds.

G. Early Childhood Services

Early Childhood Services primary function is oversight and support for child care licensing. Early Childhood Services are designed to increase the availability, affordability and quality of child care. The direct and allocated costs of the Administrator of Early Childhood Services are identified as administrative costs chargeable to the Child Care and Development Fund. The Department monitors expenditures to ensure the federal quality spending requirement is met and the 5% administrative cost limit is not exceeded. If administrative costs would exceed the limit, the excess costs would be borne by the state and not charged to any other federal program.

H. Collaboration With Other State Agencies

Department of Corrections & Rehab/Division of Juvenile Services

The Department of Corrections/Juvenile Services Division provides child welfare case management activities that are allowable IV-E administrative expenses based on a cooperative agreement with the Department of Human Services (attachment 28). The Division of Juvenile Services will bill the Department of Human Services on a cost per unit of service (unit equals 15 minutes).

The annual rate computation will be completed by the Division of Juvenile Services at the end of each state fiscal year. The rate is then used to bill for services provided in the next fiscal year. For purposes of rate calculation the allowable direct and indirect case management expenses are accumulated in a cost pool. The total cost of the Division of Juvenile Services for administration and community service programs are direct charged to the cost pool Expenses related to special programs and projects are deducted to arrive at the net total direct costs chargeable to the pool.

Indirect costs chargeable to the cost pool include the Director of the Department of Corrections and supporting administrative staff and statewide indirect costs. A percentage of the indirect costs are allocated to the cost pool based on FTE's. The percentage is computed by dividing the number of FTE's for the Division of Juvenite Services by the total FTE's of the Department of Corrections.

The rate is computed by dividing the yearly cost pool total by the total net annual hours worked. The annual hours worked per year are calculated on the basis of 173.33 average hours per month for Division of Juvenile Services direct staff (case managers). The net annual hours worked is the accumulated total of case manager hours paid less the hours for sick and annual leave, coffee breaks and any paid lunch break. The Division of Juvenile Services will bill the Department of Human Services for allowable services provided to foster care candidates for community pre placement activities and foster care eligibility determinations. The cost will be computed by multiplying the total units of service provided for each activity by the unit rate. The cost for community pre-placement is allocated to Title IV-E foster care administration and foster care regular on the basis of the accumulated number of children, in paid foster care placement, recorded for each program. The cost for foster care eligibility determination is direct charged to foster care administration.

Refer to Attachment 5 for Time Study instructions and examples of a DJS Case Manager's Monthly Activity Summary and Summary Worksheet of Total Billable IV-E Units and quarterly billing.

5. Developmental Disabilities

Developmental Disabilities Administration is responsible for establishing programs that offer services to developmentally disabled (DD) clients who otherwise would require institutional care. Responsibilities include policy development, quality assurance and implementing and monitoring Section 1915 waiver requirements. A large number of the DD clients that receive services are Medicaid eligible. The administrative expenses for the DD unit, including administrative costs of Therap, a database program

used to support DD case management activities will be funded by Title XIX, Infants and Toddlers with Disabilities and state funds (non-Title XIX). Therap contains client specific records and is used for progress assessment reviews used to determine eligibility. The accumulated direct and allocated costs for the unit will be distributed based on the ratio of the number of DD clients accumulated for one year, who are eligible for Title XIX, Infants and Toddlers with Disabilities and state funds.

The North Dakota Protection & Advocacy Project (P&A) advocates for the legal rights of North Dakotans with disabilities. The ND State Legislature has designated, by appropriation, this state agency as being responsible for Quality Assurance and for completing follow-up investigations of serious events that have occurred at residential and other locations. P&A submits a time sheet and the salary and operating costs directly associated with Medicaid allowable duties to the Department of Human Services quarterly for reimbursement. P&A certifies the expenditures have been incurred and that they have met the match for the non-federal share of the claims. These services are mandated under the 1915c waiver, however the Department chose to implement the services statewide.

6. Economic Assistance Policy Division

The Director and Assistant Director of Economic Assistance Policy are responsible to provide direction and supervision of program policy for Temporary Assistance for Needy Families (TANF), SNAP, Low Income Home Energy Assistance (LIHEAP), Child Care Assistance, Basic Care and Medicaid Eligibility. Refer to organizational charts (Attachment 6) for structure of units that are part of Economic Assistance.

The accumulated costs of the Director, Assistant Director and support staff are distributed on the basis of the accumulated FTEs of the division.

The economic assistance eligibility determination systems include: Technical Eligibility Computer System (TECS), Vision, Online Application System (OASYS), Self-Service Portal and Consolidated Eligibility System (SPACES), and any tools related to eligibility determination. The SPACES Implementation Advanced Planning Document was approved on July 27, 2016 and expires on September 30, 2018. The SPACES Operational Advanced Planning Document was approved on September 27, 2016 and expires September 30, 2017. The accumulated direct and overhead costs of the systems are allocated based on the accumulated time of eligibility workers for those programs as determined by the random moment time study for the income maintenance workers for the 47 CSSB workers.

The Systematic Alien Verification for Entitlements Program (SAVE) is utilized to verify a benefit applicant's immigration status or naturalized derived citizenship for federal, state and local benefit-granting agencies. The accumulated direct and overhead costs of SAVE are allocated to programs based on the accumulated time of eligibility workers for those programs as determined by the random moment time study for the income maintenance workers for the 47 CSSB workers. The SAVE expenses allocated to the Medicaid program, are 100% federally funded.

The following units are part of Economic Assistance Policy:

A. Regional Representatives of Economic Assistance

Regional representatives provide training and program policy consultation to county staff directly administering the programs. The staff are out-stationed and provide a direct line of communication for the department to county social services staff.

The direct and allocated costs for regional representatives will be charged to TANF, Medical Administration, CHIP Administration, SNAP, Child Care, LIHEAP, and Basic Care based on the accumulated time of eligibility workers as determined by the random moment time study for the 47 CSSB workers. See Attachment 10 for an explanation of the RMTS code and the distribution of time to programs used in the allocation process.

B. System Support & Development

EA System Support staff are responsible to assist in development, maintenance, testing and enhancements for VISION, SPACES and TEC systems to assure eligibility systems are determining eligibility in accordance with EA policies. The direct and allocated costs for the EA System Support staff are allocated to TANF, Medicaid, CHIPS-Administration and SNAP based on random moment time study of the eligibility workers in the county offices.

The direct and allocated costs for the supervisor of the Regional Representatives and System Support Development unit, and team lead, are allocated based on the accumulated FTE's of the two units.

C. Supplemental Nutrition Assistance Program (SNAP)

The SNAP unit provides benefits intended to supplement the food purchasing power of low-income households through the SNAP. Actual benefits are provided through an electronic benefit transfer. The direct and allocated costs are direct charged to the Department of Agriculture SNAP.

D. Energy Assistance

Energy Assistance provides benefits to supplement the fuel purchasing power of low-income households. The direct and allocated cost of the Administrator and support staff are charged to the Low Income Housing Energy Assistance Program.

E. Maintenance and Review

The Quality Control Unit provides data to the SNAP and Medicaid (including CHIP) programs on the accuracy with which the local agency is applying state eligibility and program requirements. The direct and allocated costs for the regional Quality Control Reviewers are charged to a quality control cost pool. These expenditures are distributed to programs on the basis of the accumulated to date number of reviews completed during the month. Staff completing payment error rate measure reviews will direct charge their time to Medicaid administration.

The Quality Assurance Unit provides guidance to the TANF, LIHEAP and Child Care programs on the accuracy with which the local agency is to apply state eligibility and program requirements and performs SNAP Quality Improvement reviews. The direct and allocated costs for Quality Assurance Reviewers will be charged to TANF, LIHEAP, Child Care, and SNAP. The salaries and benefits of staff that are assigned to more than one program are allocated based on a full-time time study. For an explanation of the RMTS codes and the distribution of time to programs used in the allocation process, see Attachment 10.

The direct and allocated costs for the state supervisor of Quality Assurance/Quality Control will be allocated based on the accumulated FTE's of the two units supervised.

F. Medicaid Policy

The direct and allocated costs for the Administrator of Medicaid Policy and the Medicaid eligibility specialists will be claimed as other Medicaid administration.

The direct and allocated costs for the Basic Care Administrator will be charged to Medicaid administration and basic care based on a full-time time study.

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7. Child Support

The Child Support Division is responsible to receipt and distribute all child support collections, locate absent parents, establish paternity, and enforce all IV-D court orders. The program is state supervised and state administered. The Child Support office is organized according to the following functions: operations, policy, regional child support, customer service/state disbursement unit, FACSES system and support staff. Child support services are provided throughout the state by eight regional units. Judicial services are purchased from the North Dakota Supreme Court, through the county and state clerks of court and from State's Attorneys. Unallowable costs described in 45 CFR 304.23 and 304.21 will not be allocated to or claimed by the child support program. All allocation of non IV-D cost pools using a case count will be allocated on the basis of the total active non IV-D caseload (those with a court order) accumulated each month for the allocation period. Any work performed in this division related to Medicaid activities is not charged to Title XIX.

The accumulated costs for the Administrator of Child Support and support staff are distributed among the operations, policy, customer services/state disbursement unit, regional units, and FACSES functions based on the accumulated FTEs of the staff assigned to each function.

The direct and allocated costs for the operations, policy, and regional child support functions will be direct charged to the Child Support Program.

The direct and allocated costs for customer service/state disbursement unit will be allocated based on an accumulated case count of IV-D, and Non-IV-D cases established or modified after 10-1-98 and other non IV-D cases. The costs for other non IV-D not eligible for federal match will be funded with State funds.

FACSES staff that provide maintenance and support for the FACSES system and EDP costs for operations and support activities for the FACSES system will be allocated, for reporting purposes, between IV-D and non IV-D claimable based on the case count.

Services provided by the clerks of court for IV-D child support activities will be obtained through a cooperative agreement with the North Dakota Supreme Court and select counties. The agreements are made in accordance with regulations addressed in CFR 45 304.21. The salaries and fringe benefits will be allocated between IV-D, allowable non IV-D activities, and all other clerk of court activities based on a time study of one month per quarter (Attachment 17). The Supreme Court and select counties will bill the State Child Support Office for the IV-D and allowable non IV-D costs. When coding each individual day's time a case identifier, for IV-D and non IV-D cases, or the designation program administration (PA) must be recorded for each increment of time. Program administration includes any activities performed by a worker that are not related to a specific case.

EDP costs, for clerks of court, for CPU time to access the child support system will be allocated between IV-D and non IV-D based on an accumulated case count of IV-D, non IV-D cases established or modified after 10-1-98 and other non IV-D cases. The cost for IV-D, non IV-D established or modified after 10-1-98 will be claimed for federal child support reimbursement. Other non IV-D costs that are not eligible for federal match will be funded with state funds.

Child support cases may require the services of a court appointed referee to adjudicate the case. The case may require a court hearing or adjudication may be reached prior to an actual court hearing. The types of cases where services of a referee are required include, hearing to establish child support, order to show cause, income withholding, and paternity. The child support program reimburses the North Dakota Supreme Court for referee and support staff time. The referee and support staff will complete a time study to record

Effective Date: Oct 1, 2017 Date Submitted: April 6, 2018 time spent on IV-D cases for prehearing review, hearing time and post hearing time. The salary and fringe benefits will be allocated between IV-D and all other non-child support time based on a time study of one month per quarter (attachment 17).

The North Dakota Supreme Court employs a child support coordinator who has responsibility to implement child support policies and federal requirements as addressed by the Department of Human Services Child Support Enforcement Office. Direct services are provided through the clerks of court and court appointed referees as indicated above. Per 2 CFR 200.417 a standard indirect cost allowance equal to 10% of the cost billed by the Supreme Court for salaries of clerks of court and court appointed referees for IV-D cases will be claimed as a IV-D child support expense.

State's Attorneys bill for actual time, spent on cases at an hourly rate of service, and for the other direct costs, such as travel and printing on the IV-D Child Support Enforcement Activities Report (Form 341), Attachment 18. The State office reimburses the state's attorneys and charges the cost to the child support program.

Child Support staff providing non IV-D income withholding services will be funded with State funds.

- A. Collaboration With Other State Agencies
- 1. North Dakota Supreme Court

An interagency agreement was entered into with the North Dakota Supreme Court for the purpose of implementing Title IV-D and to provide the most effective and efficient operation of a statewide IV-D program with as little duplication of service among agencies as possible. See Attachment 41.

2. North Dakota Department of Emergency Services and Homeland Security Division of State Radio

An interagency agreement was entered into with the North Dakota Department of Emergency Services and the Homeland Security Division of the Telecommunications System for the purpose of accessing the National Law Enforcement Telecommunications System. See Attachment 31.

Part VI: Medical Assistance

A. Title XIX Medicaid

The North Dakota Department of Human Services refers to the division that administers the Medicaid program for recipients as the Medical Services Division. These services are funded with XIX, XXI, MFP and state funds. The administrative costs incurred by this division are referred to in the plan as either Medical or Medicaid Administration costs. The administrative expenditures are claimed at 50% FFP with the exception of the following five specific areas: the direct salaries, travel, and training of the Skilled Professional Medical Personnel (75% FFP), the Healthy Steps Program is funded with XXI, county staff for their efforts in Healthy Steps eligibility determination are funded with XXI, Money Follows the Person is funded at the applicable FMAP. The North Dakota Department of Human Services has an approved proxy methodology to claim Tittle XXI enhanced FMAP funds for children formerly eligible for the Children's Health Insurance Program who now, under the new ACA provisions are eligible for Medicaid.

The Medical Services Division is responsible to administer the Medicaid program for services provided to eligible recipients. Direct services are not provided by the Department's staff, and their responsibilities include creating and administering policy for institutional reimbursement, admission and quality of care, and third party collections. The division is headed by the Medical Services Director. The following units report directly to the Director of Medical Services: Administrative Support, Program Integrity, Information Analytics/Rate Setting, and Utilization Review. The Deputy Director is in charge of Home and Community Based Services, Health Tracks and Healthy Steps, Primary Care Provider and PACE, Medicaid Expansion and Disease Management.

The accumulated costs for the Director and Deputy of Medical Services and support staff, which includes the Administrative Support and Information Analytics units, will be allocated to a program operations cost pool, a home and community based services cost pool and a MMIS operations cost pool based on the accumulated FTEs of the total staff assigned to the functions that comprise each of the cost pools.

B. The following units operate directly under the Medical Services Director:

1. Utilization Review

a. Skilled Professional Medical Experts

The direct salaries, travel, and training expenses of the Utilization Review Administrator, Home Health/Out of State Administrator, Out of State Administrator, Out of State/Durable Medical Equipment Administrator, Durable Medical Equipment Administrator, Nursing Home Private Pay/Psychiatric Residential Treatment Facility/PASAR Administrator, Medicaid Pharmacy Administrator, and the Assistant Medicaid Pharmacy Administrator are charged based on timesheets. Time spent performing duties that require professional medical knowledge and skills as defined by 42 CFR 432.50(d)(1) are charged at the enhanced rate. Activities performed that do not meet the enhanced rate criteria are claimed as Medical administration. The physician, dentist, and optometrist only perform skilled medical professional duties and are claimed 100% at the enhanced skilled professional rate based upon payroll certifications.

b. Medical Coding Specialists

Costs for the medical coding specialists will be charged to the MMIS operations cost pool and other Medicaid administration based upon full-time time studies.

c. Pharmacy Technician

Costs for the pharmacy technician will be claimed as other Medicaid administration.

2. Information Analytics and Rate Setting

a. Information Analytics – staff in this area of the Division advise the Medical Services Director on various program and policy issues. To fulfill this function, staff assess the organizational, health care and otherrelated environments that influence Medicaid policy development, review and analyze and summarize CMS guidance, analyze and interpret various Medicaid data extracts and reports in relation to creation or

Effective Date: October 6, 2015 Date Submitted: May 19, 2017 modifications of policies and the impact on the program and perform in-depth data research needed to address or trouble shoot issues in order to present possible solutions/scenarios for resolution.

Staff are also responsible to evaluate analytic reports, ad hoc reporting, or data pulls performed by staff for appropriateness and accuracy before distribution. Staff must also understand the various Medicaid reimbursement methodologies, enrollment trends, eligibility groups, providers, and policies in order to assess and recommend data requirements necessary to accurately formulate recommendations or resolutions and present outcomes and recommendations of analyses to the Medicaid Services Director.

b. Rate Setting

The direct and allocated costs for the Medicaid Rate Setting and support staff, who perform rate-setting and hospital settlement activities, will be claimed as other Medicaid administration.

c. The direct and allocated costs for the Medicaid Tribal Project Lead, who supports Medicaid initiatives, primarily with IHS/Tribal 638 care coordination implementation, will be claimed as Medicaid administration.

3. Program Integrity

a. Program Integrity Administrator

The accumulated direct and overhead costs for the Program Integrity Administrator are distributed on the basis of the accumulated FTEs of the individuals for the programs supervised.

b. Audit Coordinator for Providers

-Costs for staff who audit providers will be claimed as Medicaid Administration.

c. Provider Enrollment

The direct and allocated costs for Provider Enrollment will be claimed as other Medicaid administration.

d. Surveillance and Utilization Review

The job duties for the Administrator of S/URS-TPL-Provider Fraud, and a TPL analyst includes both MMIS activities and non-allowable MMIS activities for investigative functions relating to researching suspect TPL claims, filing of major medical claims with third party providers, and special studies. The salary costs will be allocated based upon individual timesheets. The Surveillance and Utilization Review Analysts whose duties relate 100% to enhanced funding for MMIS activities will be direct charged to the MMIS operations cost pool. Any allocated costs will be claimed as other Medicaid administration.

4. Administrative Support

The accumulated costs for the administrative support staff will be allocated to a program operations cost pool and a program policy cost pool based on the accumulated FTEs of the total staff assigned to the functions that comprise each of the cost pools.

C. The following units operate under the Deputy Director.

1. Health Tracks/Healthy Steps

The direct and allocated costs of the Administrator of Health Tracks/Healthy Steps will be allocated to other Medicaid administration and the Children's Health Insurance Program based on the accumulated FTEs of staff assigned to each program.

a. Health Tracks -

Health Tracks provides preventive health care to Medicaid eligible youth up to age 21. The direct

Effective Date: October 1, 2017 Date Submitted: September 29, 2017 expenses of the Health Tracks Regional Coordinators and any allocated expenses will be claimed as other Medicaid administration.

- b. Healthy Steps -Healthy Steps is the children's health insurance program that offers affordable, comprehensive health coverage for children 18 years of age and younger. The direct and allocated expenses are charged to Title XXI, Children's Health Insurance Program.
- 2. Home and Community Based Services Staff in the Home and Community Based Services area work to support home and community-based options for clients and families seeking services. This unit administers provider enrollment for home and community-based providers, three Medicaid 1915c waivers for children, Money Follows the Person, and a state-funded Autism voucher.

Costs for staff who perform activities that support home and community based services will be charged to the home and community based services cost pool. The accumulated direct and allocated costs for the home and community based supervisor are distributed on the basis of the accumulated FTEs of the individuals for the programs supervised.

a. Money Follows the Person Program

The Money Follows the Person (MFP) Program increases the use of Home Community Based Services (HCBS) by transitioning individuals from institutions to the community of their choice, creating a system that offers home and community based choices, and providing the coordination of services and resources to support their long-term independent living goals. The costs will be claimed as MFP Administration Services.

b. Children's Hospice Waiver

The Children's Hospice Waiver supports families so they can care for their children in their homes as long as possible avoiding lengthy hospital stays and delaying or avoiding institutional care. The program also allows families to access treatments that focus on curative and comfort care for their child. The costs will be claimed as other Medicaid administration.

c. Children's Medically Fragile Waiver

Children's Medically Fragile Waiver assists families in keeping their child home instead of having to place them in a nursing home or hospital to receive needed care. This waiver is "parent- driven" meaning the parent determines what their family can or cannot do, and the parent identifies what it will take for the family to be able to keep their child at home. The costs will be claimed as other Medicaid administration.

d. Autism Services

Autism Services is responsible for establishing programs to provide services for individuals that have an autism spectrum disorder, including administering the autism waiver and autism voucher program. Autism services is also responsible for managing a statewide autism spectrum disorder training program, including training of medical and behavior health providers, education staff, childcare providers and parents. The direct and allocated costs will be charged to Medicaid Title XIX and Title XXI as well as general funds. The direct and overhead costs of the autism administrator and support staff are allocated based on a full-time time study.

The autism waiver serves families and qualifying children with Autism Spectrum Disorder by promoting maximum child development and preventing out-of-home placements. Services include evidence-based and promising practices, case management services, technology and technology-based support, in-home support, equipment and supplies, home monitoring, respite care, residential supports and services and behavioral consultation.

Effective Date: October 6, 2015 Date Submitted: May 19, 2017 The autism voucher program helps families that are not receiving services through a Medicaid waiver, pay for assistive technology, training, and other approved support services that enhance the quality of life of children with Autism Spectrum disorders. Costs associated with the autism voucher program are directly charged to state funds.

3. Primary Care Provider and PACE

The salary and operating costs related to the Primary Care Provider and PACE Administrator will be claimed as other Medicaid administration.

4. Medicaid Expansion and Disease Management

The salary and operating costs related to the Medicaid Expansion and Disease Management Administrator will be allocated between these two areas based on a full-time time study.

a. Medicaid Expansion - Waiver #ND 04000-02

Administration

The salary and operating costs of the Medicaid Expansion/Health Management Administrator will allocated based on a full-time time study to Medicaid Expansion.

Prior to the implementation of North Dakota Health Enterprise MMIS, the ND Medicaid Expansion managed care activities were not able to be incorporated into the system, thus no administrative costs have been associated with MMIS. Once the State has included the ND Medicaid Expansion managed care population in ND Health Enterprise MMIS, North Dakota will be using the cost allocation used for the ND Health Enterprise MMIS to allocate costs to the ND Medicaid Expansion waiver administrative costs.

The Department has the Medicaid Expansion program under contract with a vendor. All administrative contracts are reimbursed 50% Federal and 50% State, except the External Quality Review contract which received CMS approval to be reimbursed at 75%. The External Quality Review contract is 100% eligible for 75% FFP. The EQR contract for period 7/1/15 – 6/30/17 was approved by CMS on 7/17/17 and the contract period from 7/1/17-6/30/19 was approved by CMS on 9/15/17.

D. Collaboration with Other State Agencies

- 1. The NDQuits is a statewide tobacco cessation program operated by the North Dakota Department of Health (NDDOH) and serves both the Medicaid and non-Medicaid populations. NDQuits is provided through telephone and the internet. The NDDOH contracts with independent vendors to enroll individuals into the program. Upon intake to the program, callers are asked their insurance status and name of insurance, including government programs. Monthly utilization data is compiled by in the independent contractors from the intake surveys. The NDDOH will continue compiling the client data from the independent contractors to arrive at a Medicaid allocation factor to apply to the NDQuits expenditures. NDDOH will submit NDQuits expenditures to the North Dakota Department of Human Services (NDDHS) on a quarterly basis using the current quarter's allocation factor. The expenditures submitted will include the contract costs incurred by the vendors who operate the tobacco cessation quitline. The costs submitted will not include tobacco cessation medication. NDDHS will request the federal share of these administrative expenditures to the Centers for Medicare and Medicaid Services for reimbursement. NDDHS has entered into an interagency agreement with NDDOH. See Attachment 39.
- The North Dakota Department of Corrections and Rehabilitation (DOCR), through its Division of Juvenile
 Services provides targeted case management for delinquent and unruly youth in custody of the DOCR.
 NDDHS has entered into an interagency agreement with the DOCR to define responsibilities of both parties in
 relation to targeted case management services provided to Medicaid eligible delinquent and unruly youth, see
 Attachment 43.

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Part VII: Behavioral Health

Behavioral Health includes the eight regional human service centers which provide for the direct delivery of services through the eight regional human service centers under the Direction of the Statewide Community Clinic Director, the Behavioral Health Services Division and the Institutions (North Dakota State Hospital and the Life Skills and Transition Center at Grafton).

The Statewide Community Clinic Director is responsible for overall planning, organizing and coordinating of activity associated with the eight human service centers. Expenses of the Statewide Community Clinic Director for direct and allocated costs will be allocated to the Human Service Centers based upon the accumulated FTEs of the organizational units (see Attachment 10).

The Chief Clinics Officer provides overall clinical supervision to the eight regional human service centers and serves as superintendent of the State Hospital. The direct and allocated costs for the Chief Clinics Officer will be equitably split between the two roles. The State Hospital share will be charged to General Fund and eight regional human service center's share will be allocated based on FTE's of the eight regional HSCs.

The Director of Field Services provides operational oversight to the eight human services centers, State Hospital and Life Skills and Transition Center. The direct and allocated costs for the Director of Field Services are allocated based on the cumulative FTEs of the State Hospital, eight regional human service centers, State Hospital and Life Skills and Transition Center.

A. EHR - Electronic Health Record

The EHR system is a Netsmart software system, used by the centers, that specializes in assisting health care organizations to track service data. The cost of the EHR system is funded with State general fund.

B. Behavioral Health Division

The accumulated direct and overhead costs for the Director of the Behavioral Health Division and the Administrative Assistant of the Division are distributed on the basis of the accumulated FTEs of the individuals for the programs supervised.

The Mental Health staff are responsible for the development of community programs and services for the mentally ill. The direct and allocated costs will be charged to the mental health block grant and to state funds, depending on the availability of federal block grant funds.

Salary and operating costs of substance abuse staff who are responsible for the development of community programs and services for the identification, treatment and prevention of alcohol and drug abuse and the certification of addiction counselors will be charged to the Substance Abuse Prevention and Treatment (SAPT) block grant and state funds, depending on the availability of federal block grant funds. Salary and operating costs of Substance Abuse staff who are responsible for coordinating treatment services for individuals on probation or parole to lessen the likelihood of reoffending will be direct charged to special funds.

Contractual expenditures for mental health or substance abuse will be direct charged to specific portions of each grant (i.e. substance abuse treatment, substance abuse prevention) based on the designated purpose of the contract.

C. Human Service Centers

The human service centers are to provide services to individuals or families to help them achieve, monitor, or

Effective Date: April 1, 2018 Date Submitted: April 6, 2018 support the highest level of personal independence and economic self-sufficiency, including health, drug and alcohol, mental health, education, manpower, social, vocational rehabilitation, aging, food and nutrition and housing services. Refer to Attachment 6, organizational charts, for structure of each Regional Human Service Center.

The following cost allocation concepts will be used consistently throughout these centers.

- 1. Each human service center's costs will be handled separately and distinctly.
- 2. The North Dakota central accounting system accumulates salaries, travel and all other expenses of the regional office into programs by means of a department identifier (ID). Expenditures are charged to a department ID as follows:
 - a. Fringe benefits, including unemployment compensation insurance, follow the respective salary department ID;
 - b. Copier costs are to be charged to the support services department ID;
 - c. Rent is allocated and charged to a program department ID on the basis of square footage with the common area prorated on the basis of the direct;
 - d. Telephone service is charged based on usage billed by Information Technology Department;
 - e. Local telephone service charges are allocated to a program department ID on the basis of the number of phones associated with the personnel charged to each department ID;
 - f. Postage costs will be charged to support services;
 - g. The cost of the service contracts are charged to the department ID of the individuals who have been assigned the equipment; and
 - h. Supplies, duplicating, and printing are charged to the individual program if it can be identified.
- 3. The regional human service centers have access to State Motor Pool vehicles. Charges for State Motor Pool vehicles are billed by the State Motor Pool direct to the central office. All mileage logs are entered into the state centralized motor pool system and allocated to benefiting programs by central office.
- 4. The funding of Human Service Center (HSC) department IDs is controlled by the central office. Multiple funding sources can be used to fund many of the department IDs. Each department ID is assigned a speed chart number which indicates a specific federal or state project number. When a specific funding source has been totally utilized by the Department the central office can change the project number assigned to the speed chart used by the HSC. Costs will be charged to the federal block grants (social service and substance abuse and mental health) until all federal funds have been expended. Collections including client fees, third party payers, etc. and state general fund will be used to fund expenses that are not funded by federal grants or other specific funding sources.
- 5. The costs for administration, support services and any costs allocated from the central office cost pools will be accumulated in a cost pool and allocated to the benefiting programs for each human service center. If a regional human service center director is responsible for two human service centers, those costs are included in the administration department ID of the director's designated home center. Support Services includes the regional human service center fiscal manager, secretarial staff and any other support functions that cannot be direct charged to a program.
 - 6. Expenses benefiting all human service centers are allocated to various programs based on the accumulated FTE's of each regional human service center.

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Human Service Centers Cost Pools and Allocation Basis

Expenditures that have been accumulated by the central accounting system into cost pools are allocated on a basis that will provide an equitable distribution of the costs to the benefiting programs or activities.

- 1. The costs for administration; support services and any allocated costs from central office will be allocated to the following benefiting functions and/or programs on the basis of the accumulated FTEs for each month
 - a. Rehabilitation Services 110 Basic Support
 - b. Regional County Social Service Supervisor
 - c. DD Program Management
 - d. DD Program Administrator
 - e. Social Services
 - f. Alcohol & Drug
 - g. Mental Health Partnership
 - h. Mental Health
 - i. Other State General Funded Programs.

See Attachment 10 for an example of administration and support services cost pools.

2. The expense of county social service supervisors is allocated on the basis of time recorded on the Work Force System. The time is identified by project and division for each worker. Expenses for each worker is allocated on the basis of his/her individually recorded time. The time for each project is identified with one of the following cost objectives; administration, training, foster care and child welfare. The administration cost objective includes time for service codes for administration activities, paperwork, leave, travel, etc. The training cost objective includes time for service codes for training as trainee or trainer. The foster care cost objective includes time for services codes related to foster care. The child welfare cost objective includes time for service codes for family therapy, individual therapy, child protection investigations, generic case management etc. The time for service codes for administration and training is distributed to the foster care and child welfare cost objectives on the basis of time by service code recorded for each of these cost objectives.

The expenses allocated to the foster care cost objective will be distributed to Title IV-E foster care administration, foster care emergency assistance and foster care regular on the basis of the accumulated number of children in paid foster care recorded for each program. The allocation of foster care emergency assistance will be charged to the TANF block grant. The expenses allocated to the child welfare cost objective will be charged to state general fund.

- 3. The HSC function "Case Management for Foster Care Candidates" includes the following types of costs:
 - 1. Referral to services:
 - 2. Preparation for and participation in judicial determination;
 - 3. Placement of the child;
 - 4. Development of the case plan;
 - 5. Case reviews:
 - 6. Case management and supervision; and
 - 7. Travel associated with any of the above activities.

Title IV-E Candidates are children who are potentially eligible for Title IV-E and whose case file contains one of the following: (1) a defined case plan which clearly indicates that, absent effective preventive services, foster care is the planned arrangement for the child, (2) an eligibility determination form which has been completed to establish the child's eligibility under Title IV-E, or (3) evidence of court proceedings in relation to the removal of the child from the home, in the form of a petition to the court, a court order or a transcript of the courts proceedings.

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The cost for foster care case management is computed on a cost per unit of service rate (refer to attachment 36 Human Service Center Rate Setting manual). Human Service Center staff record time for foster care case management on the EHR system. A report is generated in the central office each quarter of the number of units of case management provided in each region. The total cost of case management in each region is computed by multiplying the units of service by the unit rate calculated by the HSC rate setting process. The cost will be allocated to Title IV-E foster care administration, foster care emergency assistance and foster care regular on the basis of the accumulated number of children in paid foster care placement, recorded for each program. The allocation to foster care emergency assistance will be charged to the TANF block grant. The allocation to foster care regular is State funded.

4. The DD Program Managers salary and operating costs are allocated based on a full-time time study between Medical Assistance Administration and other non-Medical Assistance Administration activities. The time spent on Medical Assistance Administration is charged 50% to federal fund Medical Assistance Administration and 50% to state general fund. The time spent on the other service codes is charged to state general fund.

Program Administrators supervise the DD Program Managers. Expenses are allocated based on statewide case count between DD Title XIX Medicaid, Infant Development Part C and state funds.

5. The Vocational Rehabilitation staff assist persons with disabilities through a wide scope of individualized services. Vocational Rehabilitation Vision Specialist provide evaluation, restoration, and training to visually impaired individuals in the home, at school, or on the job that leads to maximum independence. These services are provided statewide to children, adults, and the older blind. Vocational Rehabilitation Counselors assist individuals with disabilities to assess their skills and abilities, identify a vocational goal, develop an individualized plan to achieve employment, and provide services that result in meaningful employment. The Vocation Rehabilitation counselors also provide services to young adults as they prepare to transition from high school to work.

The accumulated direct and overhead costs for the Vocational Rehabilitation staff are allocated between Vocational Rehabilitation and VR-Older blind based on the accumulated time recorded for each activity. Staff providing vocational rehabilitation services complete full-time time studies which will serve as the basis for the allocation.

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Part VIII: County Cost Allocation

The Economic Assistance and Social Service programs are State supervised and County administered. Each county has a County Social Service Board (CSSB) which is responsible to administer these programs. See Attachment 8 – for examples of the (CSSB) organizational structures.

- A. All actual Administration expenses are allocated. There are no indirect cost rates used.
- B. When costs are charged to programs, the distributions are based on the accumulated costs to date and are distributed on the basis of accumulated percentages of RMTS observation hits to date. The accumulated prior month's program distribution is subtracted to arrive at the current month's costs. Trends are reviewed by the Department's fiscal staff for anomalies each month. The Department accumulates a quarterly summary that is sent to each county Director for review. The Director approves the hits completed within their respective county to ensure they are accurate and reasonable. The Director may appoint an employee to sign on their behalf if the worker is knowledgeable of the work activity of the Social Service and Eligibility participants within the county.
- C. Cost Pools CSSB expenses are grouped statewide into 4 cost pools. The cost pools are Social Services, Income Maintenance, Allocable Indirect, and In-Home Care Specialist. The cost pools are derived at the state level from the total of all CSSB expenditure reports received monthly on State Form Number (SFN) 119 submitted by each CSSB.
- D. Clerical Support Staff The cost of full time social service clerks will be charged to the social service cost pool. The costs of full time income maintenance clerks will be charged to the income maintenance cost pool. Clerks who do not work full time as social services or income maintenance will be charged to the indirect cost pool. The clerical staff will not participate in the random moment time study. The cost of full time social service clerks, included in the social service cost pool, will be allocated on the basis of the observations recorded by the Social Service RMTS. The cost of full time income maintenance clerks, included in the income maintenance cost pool, will be allocated on the basis of the observations recorded by the Income Maintenance RMTS. Clerks included in the indirect cost pool will be allocated as indicated below.
- E. Direct Charges Direct charges to federal programs are separately maintained and excluded from the cost pools. Direct charges are not subject to the time study methodology and should not be included in the cost pool to which the RMTS derived percentages are applied.
- F. Income Income for client fees, day care licensing fees and other receipts derived from administrative expenditures, will be deducted from the cost pools before any allocations are made. (This ensures costs are properly classified, and are not duplicated in the cost pools.)
- G. Indirect Expenses Indirect expenses include salaries and employers share of employee benefits, travel and other costs for the CSSB directors, supervisors (not directly charged to other cost pools), clerical support staff (not directly charged to other cost pools) and all overhead costs such as telephone, heat, lights, water, rent of premises, supplies, postage and other allowable miscellaneous expenditures necessary to provide services.

Indirect expenses will be allocated to the social service and income maintenance cost pools based on the number of observations from the random moment time study that have been identified to each of the cost pools.

The county also allocates allowable indirect costs to the CSSB, for indirect administrative costs incurred on behalf of the CSSB, for activities costs such as processing payroll, paying invoices, depositing monies, maintaining bank accounts, etc. The costs are allocated based upon a county specific cost allocation plan,

Effective Date: Jan 1, 2018 Date Submitted: Sept 27, 2018 prepared in accordance with 2 CFR 200.416. This administrative claim does not include the county general government costs. The North Dakota Association of Counties contracts with a vendor each year to prepare a cost allocation plan and appropriately allocate costs for each county in the state. After the vendor completes the work for each county as required by the contract, the North Dakota Association of Counties submits an administrative claim to the Department for each county's allocated cost. Due to time required to prepare the cost allocation plans, and allocate the costs, the claim is usually submitted 15 months after the end of the calendar year. The Department consistently processes this claim in July of each year, allocating the expenses to the social service and income maintenance cost pools based on the number of observations from the current year's random moment time study that have been identified to each of the cost pools. See vendor service agreement at Attachment 1, Page 36.

- H. Allocation Principles for Cost Pools The cost pools, including a proportionate share of indirect expenses will be distributed to programs based on the random moment time study codes described in Attachment 1. Allowable federal funds will be claimed upon availability. Non-responses are coded as 99s for missed observations. A report for late responses is ran in the preceding month and a list of counties who have not submitted their hits is generated. The counties are then notified they have appeared on the list. If the county did submit the hits but a network error occurred, they can resubmit the hit. If a county has significant hits coded as 99 further investigation will follow by the Department's fiscal staff.
 - Social Service Cost Pool
- a. Code 1 Child Protection Service Assessment is used to identify time spent on child abuse and neglect investigations. The counties bill to TANF.
 - b. Code 5 Candidate for Foster Care Case Management will be allocated to Title IV-E foster care administration, foster care emergency assistance and foster care regular (non IV-E, TANF eligible) on the basis of the number of children in paid foster care placement, recorded for each program. The allocation to foster care emergency assistance will be charged to the TANF block grant. The allocation to foster care regular is State funded. Court Related Activities or Initial Foster Care Case Management (code 8) will be allocated and funded on the same basis as pre-placement activities (code 5).
 - c. Code 2 Title IV-E Eligibility Determination Foster Care and Adoption Assistance will be charged to the Title IV-E foster care administration.
 - d. Code 7 Adoption Assistance Case Management will be charged to Title IV-E adoption assistance administration and to state or county funds based on respective percentages of children receiving adoption assistance who are IV-E eligible or ineligible. The ineligible cost will be charged funds.
 - e. Code 3 Medicaid Eligibility and Health-Related Activities for children and adults will be charged to Title XIX as Medical Administration. As described in the definition code 3 includes any non-invoiced activity to help Medicaid-eligible adults gain access to services or assist them in understanding their needs.
 - f. Code 11 Foster Care Training will be distributed to Title IV-E training and Foster Care Regular (Non IV-E eligible) based on an accumulated paid case count recorded for each program.
 - g. Code 12 Foster Care Recruitment and Licensing of Family Foster Care Homes will be allocated to Title IV-E foster care administration, foster care emergency assistance and foster care regular (non IV-E, TANF eligible) on the basis of the number of children in paid family foster care placement. The allocation to foster care emergency assistance will be charged to the TANF block grant. The allocation to foster care regular will be charged to the counties.

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- h. Code 14 Children's Special Health Services will be billed to the North Dakota Department of Health. Charged to Title V Maternal and Child Health Care Block Grant.
- i. Code 15 Child Care Licensing will be charged to the Child Care Development Fund.
- j. Code 20 Adult Services All Other will be charged to general funds.
- k. Code 21 Adult Services HCBS will be charged to county funds. Included in code 21 is the time for actual services provided to Home and Community Based Care clients under the Medicaid waiver and the state program for Special Payments to the Eiderly and Disabled (SPED). The counties bill the respective programs for the actual cost of services provided.
- Code 16 Family Preservation Services Emergency Assistance will be charged to the TANF block grant as emergency assistance or state funds, depending on the availability of federal funds.
- m. Code 17 Family Preservation Services Non-Emergency Assistance will be charged to Title IV-B Child Welfare Services or state funds, depending on the availability of federal funds.
- n. Code 22 Adult Services HCBS County Funded will be charged to Title XX Social Service Block Grant. Included in code 22 is the time for actual services provided to Home and Community Based Care clients who are not eligible recipients under the Medicaid waiver or the state program for Special Payments to the Elderly and Disabled (SPED).
- o. Code 13 In-Home Targeted Case Management is a non-claimable non reimbursable code and will be charged to county funds. The counties bill Medicaid for the actual cost of services provided. The total expense allocated to code 13 is offset by the actual cost billed to Medicaid for targeted case management.
- p. Code 6 Title IV-E Foster Care Case Management is used only when providing foster care case management to children in foster care placement who have been determined Title IV-E eligible. Code 6 will be allocated to Title IV-E foster care administration and IV-E non reimbursable (unlicensed homes) based on the number of IV-E children in paid foster care placement and the number of children who had initially been determined IV-E eligible but moved to an unlicensed home in the same removal episode. The allocation to IV-E non reimbursable is state funded.
- q. Code 4 Other Services for Children will be charged to county funds.
- r. Code 18 Sex Trafficking Identification; and Code 19 Runaway Foster Youth are used to identify Title IV-E agency administrative activities for children and youth in the placement, care, or supervision of the title IV-E agency who are at risk of becoming a sex trafficking victim or who are identified as a sex trafficking victim as well as other specified activities on behalf of any child missing from foster care and will be charged to Title IV-E foster care administration.
- s. Code 8 Court costs will be allocated to Title IV-E foster care administration, foster care emergency assistance and foster care regular (non IV-E, TANF eligible) on the basis of the number of children in paid foster care placement, recorded for each program.

General Administration-Not Program Specific (Code 29) will be excluded from the allocation computation, the effect being to allocate the general administration costs associated with that time to all other codes/activities proportionately.

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2. Income Maintenance Cost Pool

TANF cash benefits in the form of grant payments to recipients are paid by the VISION/SPACES system. Included in VISION/SPACES is an assessment and contract development process along with the eligibility determination and benefit calculation process. The VISION system also provides for Medicaid eligibility for TANF eligible households and for all coverage types to process children & families for extended Medicaid benefits. Eligibility and benefit determination for SNAP and SNAP combination cases is processed by the Technical

Eligibility Computer System (TECS). TECS is the existing FAMIS certified computer system for North Dakota. Following is an explanation of the allocation of RMTS codes for income maintenance cost pool expenses. Medicaid eligibility and determination costs are approved to be reimbursed at 75 FMAP per the current fiscal operational advance planning document.

- a. Code 50 TANF Only Eligibility and benefit determination for cases receiving only a TANF benefit will
 be charged to the block grant as TANF administration.
- b. Code 51 TANF, SNAP Eligibility and benefit determination to provide assistance to TANF/SNAP combination cases will be allocated one half to the block grant as TANF administration, and one half to SNAP as benefiting programs.
- c. Code 52 SNAP/MA Eligibility and benefit determination activities supporting both SNAP and Medical Assistance will be allocated one half to SNAP and one half to medical administration as benefiting programs.
- d. Code 53 Medical/CHIP All medical activity time for Non-TANF cases including initial and continuing eligibility determinations will be allocated between other Medicaid administration and S-CHIP administration based on a percentage of the number of new approved applications for assistance received each month for each program.
- e. Code 54, 55 LIHEAP Administration LIHEAP Service LIHEAP Administration and Services is direct charged to the Low Income Home Energy Assistance block grant.
- f. Code 56 TANF/Medicat/SNAP Eligibility and benefit determination for a recipient who is eligible and receiving benefits from all three programs will be allocated one-third to the block grant as TANF administration, one-third to Medical Administration and one-third to SNAP.
- g. Code 57 TANF/MA Eligibility and benefit determination for TANF/MA combination cases will be allocated one half to the block grant as TANF administration and one half to Medical Administration as benefiting programs.
- h. Code 58 TANF Services Activities for assessment, contract development, and referral for services including JOBS activities will be charged to the TANF block grant as a service activity.
- Code 59, 60, 61 SNAP Only SNAP Issuance SNAP Only Other Activities Eligibility and benefit
 determination for SNAP is direct charged to SNAP.

For the six counties designated as Indian counties, the time is charged to enhanced funding. The percentage to be charged to enhanced funding is computed based on the ratio of Indian cases in the six (6) counties as compared to the total SNAP cases.

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- j. Case 62 Foster Care Assistance will be direct charged to Title IV-E, Foster Care Administration.
- k. Code 63 Foster Care Training will be distributed to Title IV-E training and foster care regular (non IV-E eligible) based on an accumulated case count recorded for each program.
- I. Code 64 Adoption Assistance will be direct charged to Title IV-E, Adoption Assistance Administration.
- m. Code 65 Children's Special Health Services will be direct charged to Title V, Maternal and Child Health Care block grant.
- Code 67 Child Care Assistance Eligibility determination for child care will be charged to the Child Care Development Fund.
- Code 69 Basic Care Assistance Basic Care eligibility determinations for room and board benefits will be funded 100% by the county.
- p. Code 71 General Assistance eligibility and payment services will be charged to county funds.
- q. Code 72 General Administration (NOT program specific) Will be excluded from the allocated computation. The effect is to allocate general administration costs associated with that time to all other codes/activities proportionately.
- 3. In-Home Care Specialist Cost Pool

Will not be allocated based on RMTS and is charged to county funds.

Part IX: Tribal Social Services

The North Dakota Department of Human Services has entered into cooperative agreements with the Tribal Social Service offices for the purpose of assuring the availability, accessibility, coordination, and appropriate utilization of required health and social service resources to applicants and eligible persons under Federal Titles IV-E and XIX of the Social Security Act. Included as Attachment 37 Part 1 is a copy of the agreement with Standing Rock Sioux Tribe. This agreement is representative of all tribal agreements.

For purposes of claiming federal reimbursement under Titles IV-E and XIX the tribes quarterly submit a 4 week full-time time study and a corresponding quarterly report of expenditures on the Administrative Cost Pool/Certification of Expenditures report (see attachment 37 part 2). The report has an expenditure category for Administration Related Expenditures and an expenditures category for Training Related Expenditures. Tribal Social Service office expenses for Administration Related Expenditures are grouped into 2 cost pools. The cost pools are a social service administration cost pool (cost pool 1) and a child welfare direct service administration cost pool (cost pool 2).

The social service administration cost pool includes the social service director and supporting staff. Refer to Attachment 37 Part 5 for an organization chart of the Three Affiliated Social Service Office as an example of how tribal offices are structured. The costs are distributed between the child welfare direct service cost objective and all other tribal social service objectives based on the ratio of the number of FTE's charged to the child welfare cost objective and the number of FTE's related to all other tribal social service cost objectives. The social service administration costs allocated to the child welfare cost objective, based on the percentage of FTE's, are identified on the Certification of Expenditure report as cost pool 1.

The child welfare direct service cost pool (cost pool 2) is comprised of expenses for the Indian Child Welfare Act (ICWA) program administrator and support staff, direct service delivery workers, and the foster care developer responsible for the recruitment of foster homes.

The tribes have an approved Indirect Cost Negotiation Agreement of indirect rates to be used on grants and contracts. The base for the indirect cost rate equals total direct costs, less capital expenditures and pass through funds. (see attachment 37 part 6 for an example of Standing Rock Sioux Tribes indirect rate approved by the US Department of Interior.) Pass through funds are normally defined as major subcontracts, payments to participants, stipends to eligible recipients and subgrants, all of which normally require minimal administrative effort. These indirect rates recoup costs for tribal support that is common to all tribal operations and includes the Tribal Business Council, Program Management, etc. Each tribes approved rate will be applied to the total direct cost for cost pool 1 and cost pool 2 to determine the indirect cost expense. The indirect expense is added to the direct expense to determine the total child welfare cost for each pool.

The total direct and indirect child welfare expense, from cost pool 1 & 2 will be distributed to programs based on personnel activity full time records of participants in the child welfare pool. Refer to Attachment 37 Part 3 for a copy of the child welfare time record used by the participants. The time study participants will record time based on the time study codes and definitions described in Attachment 37 Part 4. Following is an explanation of the allocation of the time study codes for the child welfare cost pool:

- Expenses allocated to Child Protection Service Assessment (code 1), Clinical Treatment and Other Invoiced and Contracted Services (code 10) and Adult Services (code 11) are non-claimable non reimbursable for the tribes.
- Foster Care and Adoption Assistance IV-E Eligibility Determination (code 2) will be charged to Title IV-E foster care administration.
- c. Medical Eligibility and Health Related Activities for Children Or Adults (code 3) and Administrative Case Management (code 7) will be charged to Title XIX as medical administration.
- d. Foster Care Training (code 8) will be distributed to Title IV-E training and other non IV-E eligible cases based on a tribal paid case count of the number of title IV-E foster care cases and other non IV-E eligible foster care cases for the last month of each quarter.

- e. Candidate for Foster Care Case Management (code 4), Foster Care Case Management, Court Related and Other Administrative Activity (code 5) and Recruitment and Licensing of Family Foster Care Homes (code 9) will be distributed to title IV-E foster care administration and foster care non IV-E eligible based on a tribal paid case count of the number of Title IV-E foster care cases and other non IV-E eligible foster care cases for the last month of each quarter.
- f. Adoption Case Management and Other Related Administrative Activity (code 6) will be distributed to title IV-E adoption assistance administration and adoption non IV-E eligible based on a tribal paid case count of the number of title IV-E adoption cases and other non IV-E eligible adoption cases for the last month of each quarter.

The Training Related Expenditure Category is for the purpose of reporting direct training expenditures. The reported training is specific to the following categories:

- a. Staff Foster Care and Adoption Related Training This includes travel and per diem of staff and expenses of trainers for workshops, conferences, seminars, and in-service related to the job.
- Staff College Classes Short term training for foster care and adoption personnel for training institutes and academic classes at educational institutions. Expenses include travel, per diem, books and educational supplies.
- c. Current and Prospective Foster/Adopt Parent Training This is short term training (including travel & per diem) to current or prospective foster or adoptive parents and the members of the state (tribal) licensed or approved child care institutions providing care to foster and adopted children receiving title IV-E assistance.
- d. The total of all non-stipend training expenditures will be charged to foster care training.
- e. Total Indirect The tribes approved indirect cost rate will be applied to the total direct training costs and will be charged to foster care administration.
- f. Full time long term training leading to a BSW or MSW Includes expenses of persons, who have entered into a stipend agreement, who are employed by the tribe or are preparing for employment, who are in full time long term training that will lead to a BSW or MSW. Expenses include stipend, tuition, travel, books and educational supplies. The expenditures will be charged to foster care training.

All direct and indirect foster care training costs will be distributed to Title IV-E foster care training and foster care non IV-E eligible training based on a tribal paid case count of the number of Title IV-E foster care cases and other non IV-E eligible foster care cases for the last month of the quarter.

Public Assistance Cost Allocation Plan/Amendment (PACAP)

Checklist

Public Assistance agencies (PA) are responsible for reviewing and analyzing their operations and developing a Plan that will adequately describe how administrative costs are identified, measured, and allocated to benefitting programs. Subpart E of 45 CFR Part 95 establishes the cost allocation plan requirements that the Public Assistance (PA) agency must follow in the preparation of the plan. PA agencies are required to amend the Plan whenever it becomes outdated due to organization changes, changes in Federal law or regulation, and other changes occur which makes the allocation basis or procedures described in the plan invalid. However, if the PA agency has not made any changes to the plan during the State fiscal year, an annual statement shall be submitted to the Director, Division of Cost Allocation certifying that the plan is not outdated within 60 days after the end of the fiscal year.

The Public Assistance Plan submission should be supported by the following:

Check		· · · · · · · · · · · · · · · · · · ·
X	1.	A summary of changes to the PACAP.
<u>X</u>	2.	An organizational chart showing the placement of each organizational component.
	3.	A listing of all Federal and non-Federal programs performed, administered, or serviced.
\	4.	A description of the activities performed by each organizational component and where not self explanatory an explanation of the benefits provided to Federal programs.
<u>X</u>		The procedures used to identify, measure, and allocate costs to each benefiting program and activity, including activities with different Federal Financial Participation (FFP) rates.
X	6.	The estimated cost impact resulting from proposed changes to the previously approved Plan.
X.	7.	A statement stipulating that wherever costs are claimed for services provided by a governmental agency outside the PA agency they will be supported by a written agreement which includes, at a minimum, the specific services(s) being purchased, the basis upon which the billing is made by the provided agency, and a stipulation that the billing will be based on the actual costs incurred (45 CFR 95.507 (b) (6)).
λ	8.	If the PA programs are administered by local government agencies under a State supervised system the PA agency's Plan will also include a cost allocation plan(s) for local agencies.
<u>X</u>	9.	A certification by a duly authorized official of the PA agency containing the statements shown in 45 CFR 95.507 (b) (8) (i)-(iv).
¥	10.	Other information as necessary to establish the validity of the procedures used by the State agency to identify, measure, and allocate costs.

Please explain any not checked on a separate sheet.

MUDINUM 4/0/18
Signature VIII Alloward Alloward

COST ALLOCATION CERTIFICATION

I hereby certify that the information contained in the Department of Human Services cost allocation plan is accurate and that I am authorized to file the plan. I further certify that (a) the information contained in the proposed plan was prepared in conformance with the Uniform Grant Guidance, 2 CFR 200, (b) that the costs are accorded consistent treatment through the application of generally accepted accounting principles appropriated to the circumstances; and an adequate accounting and statistical system exists to support claims that will be made under the cost allocation plan.

328.18

Signature

Tom Eide, CFO ND Department of Human Services