



Goodhue County

Minnesota

GOODHUE COUNTY HEALTH & HUMAN SERVICES (GCHHS) AGENDA

COUNTY BOARD ROOM
RED WING, MN

MAY 16, 2023
10:30 A.M.

Join on your computer, mobile app or room device

[Click here to join the meeting](#)

Meeting ID: 294 677 034 088
Passcode: bNzyTk

Or call in (audio only)

+1 872-240-890,,326762190#

Phone Conference ID: 326 762 190#

1. CALL TO ORDER
2. REVIEW AND APPROVE BOARD MEETING AGENDA:
3. REVIEW AND APPROVE PREVIOUS MEETING MINUTES:

Documents:

[APRIL 18, 2023 HHS BOARD MINUTES.PDF](#)

4. REVIEW AND APPROVE THE FOLLOWING ITEMS ON THE CONSENT AGENDA:

- a. Child Care Licensure Approvals

Documents:

[CHILD CARE APPROVALS.PDF](#)

- b. Community Living Infrastructure Grant Amendment

Documents:

[COMMUNITY LIVING INFRASTRUCTURE GRANT AMENDMENT.PDF](#)

c. CREST Compact And Bylaws Amendment

Documents:

[CREST COMPACT AND BYLAWS AMENDMENT.PDF](#)

5. ACTION ITEMS:

a. Accounts Payable

Documents:

[ACCOUNTS PAYABLE.PDF](#)

b. HHS Waiver-Social Services Redesign Concept
Nina Arneson, Mike Zorn, and Kris Johnson

Documents:

[HHS WAIVER-SOCIAL SERVICES REDESIGN.PDF](#)

6. INFORMATIONAL ITEMS:

a. 1st Quarter 2023 Fiscal Report
Kayla Matter

Documents:

[1ST QTR 2023 FISCAL REPORT.PDF](#)

7. FYI-MONTHLY REPORTS:

a. Child Protection Report

Documents:

[CHILD PROTECTION REPORT.PDF](#)

b. DHS Goodhue County Performance Report- Cash And SNAP

Documents:

[GOODHUE_REPORT_CASH_AND_SNAP_2023-04-27.PDF](#)

c. Medical Assistance DHS Support Memo

Documents:

[DHS MA COUNTY SUPPORT.PDF](#)

8. ANNOUNCEMENTS/COMMENTS:

9. ADJOURN

a. Next Meeting Will Be June 20, 2023

PROMOTE, STRENGTHEN, AND PROTECT THE HEALTH OF INDIVIDUALS,
FAMILIES, AND COMMUNITIES

**GOODHUE COUNTY
HEALTH & HUMAN SERVICES BOARD MEETING
MINUTES OF APRIL 18, 2023**

The Goodhue County Health and Human Services Board convened their regularly scheduled meeting at 10:33 A.M., Tuesday, April 18, 2023, in the Goodhue County Board Room and online via Teams.

Brad Anderson, Linda Flanders, Todd Greseth, Susan Johnson, Nina Pagel, Susan Betcher and Jason Majerus

STAFF AND OTHERS PRESENT:

Nina Arneson, Mike Zorn, Lisa Woodford, Leota Lind, Scott Schufman, Maddy Schwartz and Online via Teams- Abby Villaran, Briggs Tople and Stacy Lance

AGENDA:

On a motion by B. Anderson and seconded by L. Flanders, the Board approved the April 18, 2023 Agenda.

MEETING MINUTES:

On a motion by S. Johnson and seconded by L. Flanders, the Board approved the Minutes of the H&HS Board Meeting on March 21, 2023.

CONSENT AGENDA:

On a motion by B. Anderson and seconded by N. Pagel, the Board approved all items on the consent agenda.

ACTION ITEMS:

On a motion by L. Flanders and seconded by S. Johnson, the Board approved payment of all accounts as presented.

On a motion by B. Anderson and seconded by L. Flanders, the Board approved the Child Care Appreciation Day Proclamation.

INFORMATIONAL ITEMS:

South Country Health Alliance Update given by Leota Lind, CEO and Scott Schufman, CFO

Goodhue County Health & Human Services Board
Meeting Minutes of April 18, 2023

FYI & REPORTS:

Child Protection Report
HHS Staffing Report
2022 Crisis Response Annual Report- SERCC
HHS Perfect Financial Performance

ANNOUNCEMENTS/COMMENTS:

ADJOURN:

On a motion by B. Anderson and seconded by L. Flanders, the Board approved adjournment of this session of the Health & Human Services Board Meeting at or around 11:22 am.

DRAFT

**GOODHUE COUNTY
HEALTH & HUMAN SERVICES (HHS)**



REQUEST FOR BOARD ACTION

Requested Board Date:	May 16, 2023	Staff Lead:	Katie Bystrom
Consent Agenda:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachments:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Action Requested:	Approve Child Care Licensure Actions		

BACKGROUND:

Child Care Relicensures:

- Janet Fennern Cannon Falls
- Carol Ludwig Cannon Falls
- Chelsey Sather Pine Island

Child Care Licensures:

- Allison Arndt Zumbrota

Number of Licensed Family Child Care Homes: 67

RECOMMENDATION: Goodhue County HHS Department recommends approval of the above.



**GOODHUE COUNTY
HEALTH & HUMAN SERVICES (GCHHS)**



REQUEST FOR BOARD ACTION

Requested Board Date:	May 16, 2023	Staff Lead:	Nina Arneson
Consent Agenda:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Approve MN Department of Human Services (DHS) Community Living Infrastructure (CLI) Grant Amendment for HHS Housing Resource Specialist (HRS) Position		

BACKGROUND:

Goodhue County Health & Human Services (HHS) currently has a contract with the Minnesota Department of Human Services (DHS) to provide services under the Community Living Infrastructure (CLI) grant through the Housing Resource Specialist (HRS) position in HHS. The original, two-year contract, from state base funding was set to expire on June 30, 2023. On April 26th, 2023, HHS received notification that the grant contract for the HRS position would be extended through June 30th, 2025. An amendment was signed for this extension and new budget proposal for these funds.

The amended budget continues to include HRS position salary and fringe along with some minor modifications for the time of the HRS Supervisor (Health Communities Supervisor), work related travel, training, and office equipment. DHS also clarified that HHS is able to carry over funds not spent in the first two years of the grant. This extension allows for the continued work of the HRS through June 30, 2025.

This grant with the Housing Resource Specialist (HRS) position has created an opportunity for GCHHS to focus on housing. As one of the key social determinants of health, working with internal and external partners to address the many gaps along the housing continuum in Goodhue County is a key role. The HHS department will be bringing forward this work for the HHS Board’s information at a later date.

RECOMMENDATION: Goodhue County HHS Recommends Approval as Requested.

Promote, Strengthen and Protect the Health of Individuals, Families and Communities!
Equal Opportunity Employer
www.co.goodhue.mn.us/HHS



Amendment No. 1 for Grant Contract No 194695

Contract Start Date:	June 22, 2021	Original Contract Amount:	\$ 195,700.00
Original Contract Expiration Date:	June 30, 2023	Previous Amendment(s) Total:	\$ 195,700.00
Current Contract Expiration Date:	June 30, 2023	This Amendment:	\$ 146,164.00
Requested Contract Expiration Date:	June 30, 2025	Total Contract Amount:	\$ 341,864

This amendment (“Amendment”) is by and between the State of Minnesota, through its Commissioner of the Minnesota Department of Human Services, Housing and Support Services (“STATE”) and **Goodhue County**, located at 426 West Avenue, Red Wing, MN 55066, an independent contractor, not an employee of the State of Minnesota (“COUNTY”).

Recitals

1. STATE has a grant contract with COUNTY identified as Grant No. 194695 to increase and improve opportunities for Minnesotans with disabling conditions and housing instability to live successfully in the community, per Minnesota Statutes, Section 256.01 subdivision 2 (a)(6) (Original Grant Contract);
2. The Original Grant Contract is being amended because STATE and COUNTY agree that additional time and funds are necessary for the satisfactory completion of the grant contract;
3. STATE and COUNTY agree to amend the contract as stated below:

Contract Amendment

In this Amendment, changes to Original Grant Contract language will use ~~strike through~~ for deletions and underlining for insertions.

The parties agree to the following revisions:

REVISION 1: Clause 1.2, “**Expiration date**” is amended as follows:

1.2. Expiration date. This CONTRACT is valid through ~~June 30, 2023~~ June 30, 2025, or until all obligations set forth in this CONTRACT have been satisfactorily fulfilled, or until a contract for the FY2023-2025 biennium, if awarded, is executed whichever occurs first.

REVISION 2: Clause 3.1, subclauses 3.1.a., “**Compensation,**” and 3.1.c., “**Total obligation,**” only, are amended as follows:

- a. **Compensation.** COUNTY will be paid in accordance with **Attachment A-1:** Budget, which is attached and incorporated into this CONTRACT.
 - 1. COUNTY must obtain STATE written approval before changing any part of the budget. Notwithstanding Clause 16.1 of CONTRACT, shifting of funds between budget line items does not require an amendment, but does require written approval by the STATE.
 - 2. If COUNTY’s approved budget changes proceed without an amendment pursuant to this clause, COUNTY must record the budget change in EGMS or on a form provided by STATE.

- c. **Total obligation.** The total obligation of STATE for all compensation and reimbursements to GRANTEE shall not exceed ~~one hundred and ninety-five thousand and seven hundred dollars (\$195,700.00)~~ three hundred and forty-one thousand and eight hundred and sixty-four dollars (\$341,864.00).

EXCEPT AS AMENDED HEREIN, THE TERMS AND CONDITIONS OF THE ORIGINAL GRANT CONTRACT AND ALL PREVIOUS AMENDMENTS REMAIN IN FULL FORCE AND EFFECT AND ARE INCORPORATED INTO THIS AMENDMENT BY REFERENCE.

REMAINDER OF PAGE INTENTIONALLY LEFT BLANK

Signature page follows

By signing below, the parties agree to the terms and conditions contained in this CONTRACT.

APPROVED:

1. STATE ENCUMBRANCE VERIFICATION

Individual certifies that funds have been encumbered as required by Minnesota Statutes, chapter 16A and section 16C.05.

DocuSigned by:
By: Angela Lofgren
53AD6200B0B8428...
Date: 5/8/2023

Grant No 194695

2. COUNTY

Signatory certifies that County's articles of incorporation, by-laws, or corporate resolutions authorize Signatory both to sign on behalf of and bind the County to the terms of this Agreement. County and Signatory agree that the State Agency relies on the Signatory's certification herein.

By: _____

Title: HHS Director

Date: _____

3. STATE AGENCY

Individual certifies the applicable provisions of Minnesota Statutes, section 16B.97, subdivision 1 and Minnesota Statutes, section 16B.98 are reaffirmed.

By (with delegated authority): _____

Title: _____

Date: _____

ATTACHMENT A-1**Goodhue County****Fiscal Year 2022 – ~~2023~~ 2025 Budget**

Category of Funding	Budget	What This Funds
Housing Resource Specialist	\$195,700 \$341,864	<ul style="list-style-type: none"> • \$188,701: \$325,983 1 FTE Housing Resource Specialist (Salary and Fringe) • \$5,134: \$13,100 Supervisor of Program • \$500 Work related travel • \$500 Training • \$1,865: \$1,781 Office Equipment
TOTAL	\$195,700 \$341,864	

Goodhue County will be awarded ~~\$195,700~~ **\$341,864** this round of funding for the Community Living Infrastructure grant program for fiscal years 2022 – ~~2023~~ 2025. This funding will cover initiatives in the Housing Resource Specialist category of funding for the Community Living Infrastructure grant program.

**GOODHUE COUNTY
HEALTH & HUMAN SERVICES (GCHHS)**



REQUEST FOR BOARD ACTION

Requested Board Date:	May 16, 2023	Staff Lead:	Abby Villaran
Consent Agenda:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Approve Updated Regional CREST Community Based Compact and By-Laws.		

BACKGROUND:

Since 1995, counties in Southeast Minnesota – Fillmore County, Goodhue County, Houston County, Mower County, Olmsted County, Minnesota Prairie County Alliance which is comprised of Dodge County, Steele County and Waseca County, Wabasha County, and Winona County have agreed to integrate State financial resources into the regional Initiative and have worked cooperatively with each other on providing Adult Mental Health Services.

In Southeast Minnesota, we work collectively as a group known as CREST (Collaboration, Resources, Education, Services, Technology). CREST is a unique partnership of counties, providers, health systems, and individuals living with mental illness that collaborate hoping to positively impact our mental health delivery system.

The CREST Regional Management Team is comprised of supervisors, people with lived mental health experience, and providers from all the participating counties. The group has open monthly meetings to identify challenges, priorities, and solutions with a regional lens. Part of this work includes management of the Adult Mental Health Initiative (AMHI) Grant awarded to the CREST region by the Minnesota Department of Human Services.

Through these CREST partnerships we have developed programs and strategies to enhance our regional mental health delivery system including Southeast Regional Crisis Center (SERCC). We continue to provide education to case managers, mental health practitioners, and mental health professionals, individuals living with mental illness, and communities on behavioral health issues. We advocate to ensure quality services are available in all of our Southeast Minnesota communities.

Under the authority of the County Mental Health Authorities, in accordance with Minn. Stat. 245.465 and the Commissioner of Human Services; and Participating Counties adopted the CREST Compact Agreement and By-Laws developed on July 16, 2004.

By agreeing to integrate the Rule 12 State Operated Services Financial Resources it has allowed maximum flexibility in using the resources in a manner best suited to customer and regional needs. This request seeks approval of the following updates:

- CREST Compact Agreement
- CREST By-Laws

RECOMMENDATION: GCHHS Department recommends approval as requested.

CREST
(Collaborative, Resources, Education, Services and Technology)
Adult Mental Health Initiative (AMHI)
Community Based Compact and By-Laws

A. Purpose

CREST Mission

"To explore and implement creative and collaborative ways to meet the needs of and improve the quality of life of persons seeking mental health care and treatment."

The purpose of this Compact is to facilitate agreement between the Minnesota Department of Human Services (DHS) and local mental health authorities in Southeastern Minnesota counties [Fillmore, Goodhue, Houston, MNPrairie (Dodge, Steele, Waseca), Mower, Olmsted, Wabasha and Winona] to implement current and new community-based mental health services for individuals with serious and persistent mental illness. This relationship and commitment will provide a demonstration of evidenced-based and best practices and principles that may serve as an impetus for statewide change in the way community-based mental health services are delivered.

B. History

1. With the closure of Regional Treatment Centers in the early 1990s, counties were encouraged to develop partnerships with neighboring counties to plan for and develop acute care and community-based mental health treatment for those who had been served by the state hospital. Learning from the success of that approach, legislation was passed in 1996 to create and expand grant funding for regional partnerships to continue planning and service expansion efforts. Over time, this has resulted in 18 regional county initiatives and the White Earth Nation tribe who have identified as AMHIs. Each region ranges in size from single, large county entities in the metro area to regions encompassing up to 18 counties in greater Minnesota. The AMHIs continue to monitor, evaluate and reconfigure their service models while each county retains its role as the local mental health authority. The service delivery design is unique to each AMHI. This approach has allowed small or sparsely populated counties to develop services they would not have the capacity to otherwise. The AMHIs have been an effective mechanism for regional collaboration to build community-based mental health services in Minnesota. The relationships built and sustained in the AMHIs are key to creating a strong service system.
2. The CREST Initiative was developed in 1996, in accordance with Minnesota Statutes, section 245.4661 and in cooperation with DHS, to improve the mental health system in the Southeast Minnesota area. It brings together partners in the delivery of those services to clarify outcomes in order to increase accountability first to consumers, then to each other, and ultimately to the people of Minnesota. The redesign was planned by the CREST Regional Management Team and implemented with the approval of both the Department of Human Services and the CREST Community Based

Initiative Compact Council (what is now referred to as the Directors Group).

C. Project Description

The Department of Human Services and the local mental health authorities in Southeastern Minnesota share a common goal in serving persons with mental illness in the most clinically appropriate, person-centered, least restrictive, and cost-effective ways. This project has reshaped the residential-based and community-based networks into a more seamless system through new partnerships between consumers, DHS, counties, and local mental health care providers. The CREST relationship is comprised of 8 local mental health authorities and the Minnesota Department of Human Services. The focus is on improved access and outcomes for persons with mental illness. Decisions about allocation of AMHI grant funds to a community-based model will be made based on needs identified by the CREST Initiative county entities, locating services as close to consumer's homes as possible and the impact on use of inpatient programs.

D. Compact Principles

CREST AMHI is dedicated to improving the mental health of their community through intentional planning and partnerships across a region grounded in the following principles:

- Lived experience with mental illness guides the governance and services.
- Brings together people with lived experience, providers, counties, tribes, MCOs and DHS to fully utilize all available resources to meet regional needs.
- Develops and provides an array of person-centered services that builds on personal and cultural strengths.
- Utilizes a data driven model to evaluate the impact of services on health outcomes.
- Assures access, early intervention, coordination, and application of resources through creative partnerships.

E. Compact Membership

The membership of the CREST AMHI includes:

- Fillmore County
- Goodhue County
- Houston County
- Minnesota Prairie County Alliance (MNPrarie – Dodge, Steele and Waseca Counties)
- Mower County
- Olmsted County
- Wabasha County
- Winona County
- Commissioner: Department of Human Services
- Assistant Commissioner: Continuing Care

F. Administrative Structure

1. CREST Directors Group: The Group is established by authority of the respective Local Mental Health Authorities, in accordance with M.S. 245.465 et sequitur and the Commissioner of Human Services. The Group shall operate under limited authority granted to it by the respective Local Mental Health Authorities, such that authority not

expressly granted to the Group by individual County Boards, is reserved to those County Boards.

- a) The primary purpose of the Directors Group is to guide, direct and assist in the implementation of community based mental health services. Specific purposes include:
 - 1) Providing policy, implementation and outcomes-oriented level guidance regarding mental health services to ensure operational decisions are consistent with State and Local priorities.
 - 2) Providing feedback and assistance in demonstrating evidenced-based best practices and principles that may serve as an impetus for statewide changes in the way mental health services are delivered.
 - 3) The Directors Group is responsible for the fiscal policy and direction of the CREST AMHI. Olmsted County is the fiscal host and takes its direction from the Group.
 - 4) The Contract Management Team will develop/renew all CREST regional contracts based on guidance and direction from the Directors Group.
- b) The CREST Directors Group will meet monthly (the second Friday of each month) in person, with virtual meetings available as needed and/or as determined by the Directors Group. The Directors will adopt and amend annual budgets; consider and recommend transactions including staffing, contracts, leases, and grant applications; and adopt and amend bylaws. The CREST AMHI will be overseen by the Directors Group that is comprised of the following representatives:
 - c) County Entities (8)
 - 1) One voting representative from each of the participating county entities when they have signed the compact: Fillmore, Goodhue, Houston, MNPrairie, Mower, Olmsted, Wabasha, and Winona. Each voting representative is designated by the respective Local Mental Health Authority.
 - 2) If a voting representative is unable to attend, that participating county entity may send a replacement voting member. The expectation is that the replacement voting member will be fully briefed and prepared to vote on any matters before the Directors Group.
 - 3) Participating county entities may send additional non-voting representatives to participate in meetings as needed based on the agendas.
 - 4) Membership terms are sent by each Local Mental Health Authority.
 - d) Department of Human Services (2)

One representative from State-Operated Services and one representative from the Department of Human Services/Mental Health Division will be designated for membership. These

representatives shall be empowered to act on behalf of the Department within the scope of their delegated job duties.

e) Other Representatives

Based on meeting agendas, the Directors Group may invite others, such as providers, consumers, community partners, etc., to present about and/or discuss a specific agenda topic.

f) Chair: The Directors Group will be chaired on a rotating bases by the voting representative from each participating county entity. The rotation will be annually and in alphabetical order based on county entity name.

1) The Chair will prepare agendas and related materials in collaboration with the Vice-Chair, CREST regional staff and/or others as needed.

2) The Chair will preside over meetings.

3) If the Chair is unable to attend a Directors Group meeting the Vice-Chair will preside over the meeting.

g) Vice-Chair: The Vice-Chair position will be held by the incoming chair. For example if the Fillmore County representative is Chair, the Vice-Chair will be the Goodhue County representative. The Vice-Chair position will also rotate annually based on alphabetical order of county entity name.

1) The Vice-Chair will assist with agenda preparation and chair meetings when needed.

h) Directors Group Minutes: The Directors Group minute taking will be on a rotating bases from each participating county entity. The rotation will be annually and in alphabetical order based on county entity name. For example, if MNPrairie is currently taking minutes than Mower County will take minutes the following year and so on.

i) Decision Making: An attempt will be made to settle all Directors Group issues through a consensus model of decision making; however, a quorum shall consist of five members of the Directors Group for any meeting. A quorum must be present, either in person or via technology, for decisions to be made.

2. CREST Regional Management Team: The day-to-day operations of the CREST AMHI will be administered by the CREST Regional Management Team. The RMT will meet monthly, held in person or virtually, but at least one meeting a quarter must be held in person. The May RMT meeting will always be held in person so that RMT can hold elections and review consumer per diem rates. The RMT will submit minutes and/or reports and recommendations (at least quarterly) to the CREST Directors Group for review. The CREST RMT will be comprised of the following representatives:

a) County Entities (8)

1) One representative from each participating county entity when they

have signed the compact: Fillmore, Goodhue, Houston, MNPrairie, Mower, Olmsted, Wabasha, and Winona. Each representative will be designated by the respective Local Mental Health Authority.

- 2) Three consecutive, unexcused absences or non-participation during virtual meetings by any staff representative, may subject the representative to a notice being sent to the staff representative's county entity Director to determine interest and continued participation with RMT.
- b) Consumers (8)

One consumer, family member of a consumer or consumer advocate from each county entity will attend the CREST RMT meetings.
 - c) Department of Human Services (2)

One representative from State-Operated Services and one representative from the Department of Human Services/Mental Health Division will be designated for membership when they have signed the compact. These representatives shall be empowered to act on behalf of the Department within the scope of their delegated job duties.
 - d) Other Representatives

Based on meeting agendas, RMT may invite others, such as providers, consumers, community partners, etc., to present about and/or discuss a specific agenda topic.
 - e) Chair: RMT will be chaired on a rotating bases by a voting representative from each participating county entity. The rotation will be annually, beginning in May, and in alphabetical order based on county entity name.
 - 1) The Chair will prepare agendas and related materials in collaboration with the CREST Regional Program Coordinator and Vice-Chair.
 - 2) The Chair will preside over meetings.
 - 3) If the Chair is unable to attend a RMT meeting the Vice-Chair will preside over the meeting.
 - f) Vice-Chair: The Vice-Chair position will be held by the incoming chair. For example if a Fillmore County representative is Chair, the Vice-Chair will be a Goodhue County representative. The Vice-Chair position will also rotate annually, beginning in May, based on alphabetical order of county entity name.
 - 1) The Vice-Chair will take minutes at RMT meetings.
 - 2) The Vice-Chair will assist with agenda preparation and chair meetings when needed.
 - g) CREST Regional Program Coordinator
 - 1) Maintain RMT records, including but not limited to mailing lists and meeting minutes.
 - 2) Communicate with RMT members regarding meetings, agendas, etc.
 - 3) Work with Olmsted County finance staff regarding payment

of consumer per diems.

- h) The Chair and Vice-Chair position can be held by any county entity representative, whether the person is staff or a consumer representative.
 - i) **Decision Making:** An attempt will be made to settle all RMT issues through a consensus model of decision making; however, "majority vote" shall rule when voting on issues.
3. **Annual Joint RMT and Directors Group Meeting:** At least once a year the Directors Group and RMT will repurpose their monthly meetings to hold a joint meeting. The decision of when to hold this joint meeting will be decided mutually between the Directors Group and RMT. Agenda for the joint meeting will be decided mutually by the Chair and Vice-Chair of Directors Group and RMT.
 4. **Committees:** As needed, either the Directors Group or the RMT may establish a committee or subgroup to achieve a purpose of the CREST AMHI. Committee terms and number of members will vary by each committee and will be set by either the Directors Group or RMT. Committee members do not need to be members of the Directors Group or RMT but can be providers, county staff, consumers, community members, etc. The simple majority rule shall be implemented for all committees and subgroups.
 - a) **Executive Committee:** The Directors Group established an Executive Committee. This committee will comprise of the Chair and Vice-Chair of the Directors Group, one at large attendee of the Directors Group, CREST regional staff (as needed) and additional members as determined by the Directors Group. The Executive Committee will review and if needed research topics that come before the Directors Group in order to provide recommendations at Directors Group meetings.
 5. **Per Diems:** For county entity staff serving on either the Directors Group or RMT, that county entity will determine any compensation received for serving. There will be no per diems provided by CREST to county entity staff. The only per diems provided by CREST will be to the RMT consumer representatives. The per diem rate for consumer representatives will be a flat rate to attend each RMT meeting and mileage for those meetings that are in person. Mileage will be reimbursed for in person meetings based on the current IRS rate. The flat per diem will be set annually by the RMT at the RMT May meeting.
 6. **Conflict of Interest:** Directors Group and RMT members must immediately acknowledge a conflict of interest with any particular issue pending before the issue is discussed, as soon as that member believes that an actual, or apparent, conflict exists. Members are expected to maintain the highest ethical standards which include the avoidance of even the appearance of

impropriety.

G. Roles and Responsibilities of Each Party

DHS and the local mental health authorities from southeastern Minnesota each have a number of responsibilities with respect to meeting the consumer outcomes as identified above. The following are the key responsibilities of each.

1. Joint Responsibilities
 - a. Participate in the CREST Directors Group. The Group is established to ensure Compact implementation, monitoring, and compliance. The Group has created its own operating bylaws, which are incorporated in the Compact.
 - b. Review and approve any Compact amendments.
 - c. Prepare and approve Memorandum of Understandings which supports the goals of the initiative.
 - d. Carry out the roles and responsibilities assigned to each party by M.S. 245.461, 2568.0622, 256B.0623 and 2568.0624.
 - e. Meet to review progress in implementing services and activities and to support each other in the attainment of outcome measures.
 - f. Explore ways to find startup funds for any new community-based programs.
2. Local Mental Health Authority Responsibilities
 - a. Provide guidance and information on local community needs and programming that can address those needs.
 - b. Implement services and activities that correspond to the identified consumer outcomes in the Compact.
 - c. Collect and report data as necessary to determine the success of meeting the outcome targets.
 - d. Work with DHS to develop, implement, and administer a consumer satisfaction survey.
 - e. Assign a county representative to the CREST Directors Group and one to the CREST RMT.
 - f. Designate an entity as fiscal host for the grant funds and revenues generated by the CREST AMHI. See Section G4 - Fiscal Host Responsibilities.
 - g. Ensure consumers and other local stakeholders participate fully in the planning process.
3. DHS Responsibilities
 - a. Affirm that DHS has the fundamental and primary responsibility to provide mental health services to persons in need and that these cannot be delegated to the local mental health authority (Minnesota Statutes, Chapters 245, 246 and 253).
 - b. Receive information on programmatic needs *from* the CREST Regional Management Team and the CREST Directors Group and collaboratively work to respond to those needs.
 - c. Meet with the local mental health authority representatives as needed - but at least monthly - and provide technical assistance, support and be actively involved in program implementation.

- d. Respond to waiver requests within 30 days with resolution in conjunction with timeframes established in the CREST AMHI.
- e. Redeploy State-Operated Services employees to the CREST AMHI project at such time that community-based services and sites are ready to start operation.
- f. Provide - through its representatives at St. Peter Regional Treatment Center (SPRTC), State Operated Services (SOS), and the Mental Health Division - data necessary to determine the success in meeting the outcome targets.
- g. Assist the local mental health authorities to develop a consumer satisfaction survey consistent with the outcome targets.
- h. Prepare any necessary report for the Legislature on the status or success of the project.
- i. Ensure that any funds generated through this project are used to further the purposes of the CREST AMHI project.
- j. Ensure that resources are available via State Operated Services/Department of Human Services to meet the mental health needs within CREST that cannot be met by the community-based system of care. DHS commits to adhere to its legislative mandate that says: The commissioner's proposals to close a regional treatment center, state- operated nursing home or program operated by a regional treatment center or state-operated nursing home under this subdivision must not result in a net reduction in the total number of services in any catchment area in the state and must ensure new community-based programs are located in areas that are convenient to the individuals receiving services and their families [Special Session HF 6-Article 6, section 64, subdivision 1, (c)]; and there shall be no increase in the county share of the cost of care provided in state operated services without legislative authority [Special Session HF 6-Article 6, section 64, subdivision 4, (b)].

4. Fiscal Host Responsibilities

- a. Olmsted County is designated as the fiscal host for CREST. The fiscal host shall establish an account to ensure proper record keeping of all the receipts and expenditures. There shall be strict accountability of all funds and complete reporting of all receipts and disbursements by the fiscal host. The fiscal host shall receive for deposit all gifts, grants, and funds accruing to CREST from any source whatsoever. The fiscal year for shall be a calendar year, January 1 through December 31.
- b. The fiscal host contracting policies and procedures will be followed regarding any contracts, leases, and/or grant agreements with other entities on behalf of CREST with the approval of the CREST Directors Group.
- c. The CREST county entities will execute cooperative agreements detailing the receipt and distribution of grant funds.
- d. The fiscal host shall be eligible for reimbursement of costs incurred in the administration of CREST funds. This reimbursement shall be

determined by the CREST Directors Group in its approval of the budget and shall not exceed 10% of the operating expenses.

- e. The fiscal host shall ensure the receipts and expenditures of CREST funds are included in an annual audit of the County conducted by the Minnesota Office of State Auditors or Certified Public Accounting firm.

H. Liability:

The Partners agree that each party will be responsible for its own acts and results thereof to the extent authorized by law and shall not be responsible for acts of and others or results thereof. The State agrees to defend and indemnify the County entities for actions of State employees. The State's liability is governed by the Minnesota Tort Claims Act, Minnesota Statutes, section 3.736, and other applicable law.

The County entities agrees to defend and indemnify the State for actions of County entity employees. County entity's liability is governed by the Municipal Tort Claims Act, Minnesota Statutes Chapter 466 and other applicable law.

I. Amendment, Revisions or Clarifications

The Compact shall be reviewed annually, or upon request, by the Directors Group and may be amended to reflect mutually agreed-upon changes which shall be in writing.

J. Conflict Resolution

Any conflicts that arise will first be brought to the RMT; if unresolved, it will be referred to the CREST Directors Group. Any unresolved conflict in the administration of the Compact may be submitted directly to the Assistant Commissioner of Continuing Care or the Commissioner of Human Services for mediated resolution. The Commissioner's office may use the services of appropriate State-level mediation services to facilitate mutually agreeable outcomes to the dispute.

K. Terms of the Compact

This Compact will be effective on the date of final signature obtained from the authorized County representatives and initial authorization by the Commissioner (or his designee) of the Minnesota Department of Human Services. The conditions and commitments of each party to this Compact will apply until such time that one or more parties wish to withdraw from the Compact. A 90-day written notice to the remaining parties must be given. At such a time, all parties agree to meet to review the conditions and commitments of this Compact and to consider revisions as may be agreed upon by the remaining parties.

L. Dissolution

1. If any participating county entity chooses to opt out of providing CREST-funded mental health services, it will provide written notice to the other Compact members at least 90 days prior to the proposed opt out date. In this event, the remaining Compact members shall jointly determine whether to dissolve the Compact or redistribute the CREST funds amongst the remaining county entities and amend the Compact.

2. The Compact members may dissolve the Compact effective upon mailing of 90 days of written notice to other affected parties, under any of the following conditions:
 - a. If funding from federal, state, or other sources is not obtained and continued at levels sufficient to allow for purchase of the indicated quantity of services. The Compact may at the parties' discretion be modified to accommodate a reduction in funds.
 - b. If federal or state regulations or guidelines are modified, changed, or interpreted in such a way that the services are no longer allowable or appropriate under this Compact or are no longer eligible for the funding proposed for payments authorized by this Compact.
3. Any such dissolution of the Compact shall not reduce or negate any obligations or liabilities of any party already accrued prior to such dissolution.
4. At the time of dissolution of the Compact, the Directors Group should dispose of any assets of CREST in a manner that is consistent with the purpose of CREST. It is intended that the Directors Group will terminate its operation at the conclusion of the Compact. An orderly transfer of responsibility and function to other extant and appropriate organizational and governing structures in place at the time of the Compact's dissolution is intended.

M. Severability.

The provisions of this Compact are severable. If any paragraph, section, subdivision, sentence, clause, or phrase is for any reason held to be contrary to law, or contrary to any rule or regulation having the force and effect of law, such decision shall not affect the remaining portions of this Compact.

N. Entire Agreement.

This Compact and the documents referred to within contains the entire terms of the Compact and shall supersede all oral and written agreements and negotiations by the parties relating to the subject matter of this Compact.

O. Counterparts.

This Compact may be executed in any number of counterparts which, when taken together, will constitute one original, and photocopy, facsimile, electronic or other copies shall have the same effect for all purposes as an ink-signed original.

IN WITNESS WHEREOF, the parties have executed this Compact as of the dates written below.

CREST AMHI Compact Member Signature

The undersigned accepts the understandings and commitments contained in the CREST Compact.

COUNTY OF _____

By: _____

Dated: _____

Title: Chairperson of the GCHHS

ATTESTED TO:

By: _____

Dated: _____

Title: GCHHS Director

APPROVED AS TO FORM AND EXECUTION:

By: _____

Dated: _____

Title: County Attorney

**GOODHUE COUNTY
HEALTH & HUMAN SERVICES (GCHHS)**



REQUEST FOR BOARD ACTION

Requested Board Date:	May 16, 2023	Staff Lead:	Kayla Matter
Consent Agenda:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Attachments:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Action Requested:	Approve April 2023 HHS Warrant Registers		

BACKGROUND:

This is a summary of Goodhue County Health and Human Services Warrant Registers for: April 2023.

	Date of Warrant		Check No.		Total Batch
			Series		
IFS	April 7, 2023	ACH	39528	39555	\$80,607.56
IFS	April 7, 2023		467280	467345	\$42,733.06
IFS	April 14, 2023	ACH	39584	39596	\$7,651.81
IFS	April 14, 2023		467394	467428	\$49,645.31
IFS	April 18, 2023		467429	467429	\$229.90
IFS	April 21, 2023	ACH	39597	39610	\$19,505.33
IFS	April 21, 2023		467430	467453	\$44,357.13
IFS	April 28, 2023	ACH	39653	39738	\$17,147.51
IFS	April 28, 2023		467621	467713	\$99,126.02
SSIS	April 28, 2023	ACH	39628	39652	\$67,598.62
SSIS	April 28, 2023		467508	467548	\$198,383.04
IFS	April 28, 2023	ACH	39653	39692	\$7,613.18
IFS	April 28, 2023		467579	467854	\$16,028.62
Total					\$650,627.09

RECOMMENDATION: Goodhue County HHS Recommends Approval as Presented.

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**GOODHUE COUNTY
HEALTH & HUMAN SERVICES (GCHHS)**



REQUEST FOR BOARD ACTION

Requested Board Date:	May 16, 2023	Staff Lead:	Nina Arneson
Consent Agenda:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Attachments:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Action Requested:	Approval to move forward with HHS Waiver / Social Services Redesign Concept within the next 3 years.		

BACKGROUND:

The following request will be brought forward for the Goodhue County Personnel Committee’s review on May 16, 2023 at 8:00am:

- **HHS Waiver/Social Services Redesign Concept**

Please see the attached Personnel Committee memo. The HHS Department staff will inform the HHS Board of the Personnel Committee’s actions at our May 16, 2023 Health and Human Services Board meeting.

RECOMMENDATION: GCHHS Department recommends approval as requested.



Goodhue County
Health and Human Services


426 West Avenue
Red Wing, MN 55066
(651) 385-3200 • Fax (651) 267-4882



DATE: May 10, 2023
TO: Goodhue County Personnel Committee
FROM: Nina Arneson, GCHHS Director
RE: HHS Waiver/Social Services Redesign Request

As an accredited, integrated Health and Human Services agency, GCHHS places a strong priority on fiscally responsible, cost effective, early intervention strategies that enhance safety and well-being for our most vulnerable residents, increasing quality of life for the entire community.

A variety of factors--the aging population, large caseloads, the large number of staff members overseen by each supervisor, the lack of service providers to name a few--illustrate the challenges of maintaining safety and effectively serving Goodhue County residents.

GCHHS has identified that the current staffing model is unsustainable and is not providing the level of service to maintain safety and provide sufficient services to Goodhue County residents.

Health and Human Services presented to the Goodhue County Health and Human Services Board on March 21, 2023 the HHS Social Services – Waivers Redesign. Double click on the pin to see that presentation. 

There were subcommittee meetings on April 10, 2023, double click on the pin to see that presentation.  and May 9, 2023 double click on the pin to see that presentation  where we drilled down into the details of the redesign as it relates to the DHS Human Services Cost Report for 2020 for Social Services Costs and Revenues.

After receiving feedback from the subcommittee during the April 10 meeting, we were asked to provide a couple of different redesign options which were reviewed by the subcommittee during the May 9 meeting:

- Plan 1 is to hire 17 new staff along with 3 promotions to Lead HHS Team Leader.
- Plan 2 is to hire 10 new staff along with 3 promotions to Lead HHS Team Leader.

The HHS budget has a variety of revenue sources that allow for less reliance on levy funds than most other Goodhue County departments, so both plans in this request utilize a small percentage of levy funds. Plan 1 requires \$77,186 in County levy funding, and plan 2 would require \$76,077 in levy funding, A County levy tax increase of \$77,000 would result in a tax increase of \$1.81 for a \$250,000 home (see table below).

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Estimate for taxes on houses of different values

Goodhue County (Increase of \$77,000)

As of May 2023

Estimated Market Value	Taxable Market Value	Class Rate	Net Tax Capacity	2023 County Rate	County Taxes
\$100,000	\$71,760	1%	718	42.863%	307.58
\$150,000	\$126,260	1%	1,263	42.863%	541.19
\$200,000	\$180,760	1%	1,808	42.863%	774.79
\$250,000	\$235,260	1%	2,353	42.863%	1,008.39

Estimated Market Value	Taxable Market Value	Class Rate	Net Tax Capacity	2023 County Rate	County Taxes	Increase/(Decrease)
\$100,000	\$71,760	1%	718	42.940%	308.14	\$0.55
\$150,000	\$126,260	1%	1,263	42.940%	542.16	\$0.97
\$200,000	\$180,760	1%	1,808	42.940%	776.18	\$1.39
\$250,000	\$235,260	1%	2,353	42.940%	1,010.21	\$1.81

Goodhue County Social Services - Waivers Redesign Plan 1 66.90 FTE

Social Services/Waivers Staffing Redesign Estimate Cost

1	Social Services Supervisor Step 5 (Single Health)	\$120,836.00
2	Social Services Supervisor Step 5 (Family Health)	\$263,982.00
1	Case Aide Step 1 (Single Health)	\$64,478.00
2	Case Aide Step 1 (Family Health)	\$151,266.00
2	Care Coordinators (3 MN Choice 1 Waiver) (Single Health)	\$156,596.00
2	Care Coordinators (3 MN Choice 1 Waiver) (Family Health)	\$178,906.00
1	Social Worker Foster Care/Adoption Licensur (Family Health)	\$89,453.00
1	Social Worker Child & Family (Family Health)	\$89,453.00
1	Social Worker PSOP Step 1 (Single Health)	\$78,298.00
1	Social Worker PSOP Step 1 (Family Health)	\$89,453.00
1	Social Worker CMH Worker (Family Health)	\$89,453.00
1	Social Worker Mental Health Outreach (Single Health)	\$78,298.00
1	Social Worker Mental Health Outreach (Family Health)	\$89,453.00
17 New Staff		\$1,539,925.00

3 Social Services/Waiver Team Leader existing staff (Step Differential) **\$11,733.00**

Social Services/Waiver Staffing Redesign Total Estimated Cost \$1,551,658.00

Revenue to offset personnel cost

Federal Revenue Reimbursement SSTS/LTSS 15.00%	(\$232,749.00)
Eliminate contracted vendor for non billable CMH-TCM	(\$45,000.00)
1 MH SW billable CMH-TCM net \$356@8 clients/month billable clients	(\$34,176.00)
2 PSOP SW billable CW-TCM net \$332@10 clients/month	(\$79,680.00)
1 Child and Family SW billable CW-TCM net \$332@10 clients/month	(\$39,840.00)
3 Waiver MnCHOICES Assessors SCHA 75 clients/year (2.5 hours each)	(\$18,007.00)
1 Waiver Case Manager 25 visits/month (1.5 hours each)	(\$44,046.00)
Current Staffing Revenue generated over budget (Increase Staffing Revenue)	
Staffing Revenue Reinvested in Staff	(\$980,974.00)

Conservative (taking avg of all 5 years of staffing revenues)

County Levy Funding \$77,186.00

HHS Staffing Revenues Generated from HHS Board Additional Staffing Solutions Approved 11/21/2017

	Actual	Budget	Revenue generated over budget	HHS Fund Balance
2022	\$5,689,754.00	\$4,629,350.00	\$1,060,404.00	\$16,902,784.00
2021	\$5,638,507.00	\$4,437,027.00	\$1,201,480.00	\$13,499,131.00
2020	\$5,006,183.00	\$4,061,896.00	\$944,287.00	\$11,030,007.00
2019	\$5,005,687.00	\$4,037,399.00	\$968,288.00	\$8,422,008.00
2018	\$4,757,522.00	\$4,027,109.00	\$730,413.00	\$7,075,964.00
			\$4,904,872.00	

HHS Revenues & Expenditure Budget Report

	Revenues Actual	Expenditures Actual	Net Budget
2022	\$21,415,209.00	\$18,203,938.00	\$3,211,271.00
2021	\$20,037,099.00	\$17,451,817.00	\$2,585,282.00
2020	\$19,430,344.00	\$17,272,398.00	\$2,157,946.00
2019	\$18,605,873.00	\$16,968,272.00	\$1,637,601.00
2018	\$17,892,635.00	\$16,452,256.00	\$1,440,379.00

Goodhue County Social Services - Waivers Redesign Plan 2 62.90 FTE

Social Services/Waivers Staffing Redesign Estimate Cost

1	Social Services Supervisor Step 5 (Single Health)	\$120,836.00
2	Social Services Supervisor Step 5 (Family Health)	\$263,982.00
1	Case Aide Step 1 (Family Health)	\$75,633.00
1	Care Coordinators (2 MN Choice 1 Waiver) (Single Health)	\$78,298.00
2	Care Coordinators (2 MN Choice 1 Waiver) (Family Health)	\$178,906.00
1	Social Worker PSOP Step 1 (Family Health)	\$89,453.00
1	Social Worker CMH Worker (Family Health)	\$89,453.00
1	Social Worker Mental Health Outreach (Single Health)	\$78,298.00
10	New Staff	\$974,859.00

3 Social Services/Waiver Team Leader existing staff (Step Differential) **\$11,733.00**

Social Services/Waiver Staffing Redesign Total Estimated Cost \$986,592.00

Revenue to offset personnel cost

Federal Revenue Reimbursement SSTS/LTSS 15.00%	(\$147,989.00)
Eliminate contracted vendor for non billable CMH-TCM	(\$45,000.00)
1 MH SW billable CMH-TCM net \$356@8 clients/month billable clients	(\$34,176.00)
1 PSOP SW billable CW-TCM net \$332@10 clients/month	(\$39,840.00)
2 Waiver MnCHOICES Assessors SCHA 75 clients/year (2.5 hours each)	(\$18,007.00)
1 Waiver Case Manager 20 visits/month (1.5 hours each)	(\$35,236.00)
Current Staffing Revenue generated over budget (Increase Staffing Revenue) Staffing Revenue Reinvested in Staff	(\$590,267.00)
County Levy Funding	\$76,077.00

Conservative (2/3 of avg of first 3 years \$880,996) as less billing; as less support staff; case managers will need to do more of their own paper work.

HHS Staffing Revenues Generated from HHS Board Additional Staffing Solutions Approved 11/21/2017

	Actual	Budget	Revenue generated over budget	HHS Fund Balance
2022	\$5,689,754.00	\$4,629,350.00	\$1,060,404.00	\$16,902,784.00
2021	\$5,638,507.00	\$4,437,027.00	\$1,201,480.00	\$13,499,131.00
2020	\$5,006,183.00	\$4,061,896.00	\$944,287.00	\$11,030,007.00
2019	\$5,005,687.00	\$4,037,399.00	\$968,288.00	\$8,422,008.00
2018	\$4,757,522.00	\$4,027,109.00	\$730,413.00	\$7,075,964.00
			\$4,904,872.00	

HHS Revenues & Expenditure Budget Report

	Revenues Actual	Expenditures Actual	Net Budget
2022	\$21,415,209.00	\$18,203,938.00	\$3,211,271.00
2021	\$20,037,099.00	\$17,451,817.00	\$2,585,282.00
2020	\$19,430,344.00	\$17,272,398.00	\$2,157,946.00
2019	\$18,605,873.00	\$16,968,272.00	\$1,637,601.00
2018	\$17,892,635.00	\$16,452,256.00	\$1,440,379.00

On May 9, 2023 the sub-committee asked HHS to bring forward a personnel request with a phased implementation of plan 1 for several reasons:

- There is a very small levy impact with either plan.
- The cost difference between plan 1 and plan 2 is extremely small, so that Plan 1 provides much more service with very little additional cost.
- Many of the positions requested not only generate revenue, but they also have a strong likelihood of reducing costs for major budget drivers such as state hospital costs, nursing home costs, or residential treatment for youth.
- A phased in option allows HHS to adjust the plan if state or federal funding changes, or if other circumstances change.

The tentative implementation schedule:

- June, 2023 (5)
 - hire three supervisors
 - hire two MnCHOICES assessors
- October, 2023 (3)
 - Hire PSOP worker, MH Outreach worker, EW worker
- January, 2024 (2)
 - Hire case aide for Intake/CP Assess
 - Hire CMH case manager
- June, 2024 (3 promotions)
 - Promote leads
- January, 2025 (4)
 - Hire case aide for Waiver team
 - Hire case aide for Adult team
 - Hire 3rd MnCHOICES assessor
 - Hire CP ongoing case manager
- June, 2025 (3)
 - Hire 2nd PSOP worker
 - Hire 2nd MH Outreach worker
 - Hire Licensing SW

HHS Waiver/Social Services Subcommittee Members:

Brad Anderson; County Commissioner
Susan Betcher; County Commissioner
Susan Johnson; HHS Lay Board Member
Nina Arneson; HHS Director
Kris Johnson; HHS Deputy Director
Mike Zorn; HHS Deputy Director
Kayla Matter; Accounting Supervisor
Katie Quinn; Social Services Supervisor
Katie Tang; Social Services Supervisor
Abby Villaran; Social Services Supervisor
Lisa Woodford; HHS Administrative Aide

RECOMMENDATION:

The HHS Department recommends approving the following:

1. Move forward to approve the Waiver/Social Services redesign concept of plan 1 over the tentative implementation schedule from June 2023 to June 2025 with flexibility of the design, development and implementation.
2. Move forward immediately to post for 3 supervisors and 2 MnCHOICES assessors utilizing the MN Merit system.
3. Move forward to hire in October; PSOP worker; Mental Health Outreach worker; Elderly Waiver worker.
4. Move forward to hire additional staff in 2024 and 2025 as outlined in the above schedule.
5. If any internal candidates are selected then move forward to immediately to back fill that position until an external candidate has been hired to finish the process.
6. Hire after GCHHS Board's review and approval.



Goodhue County
Health and Human Services

426 West Avenue
Red Wing, MN 55066
(651) 385-3200 • Fax (651) 267-4882

DATE: May 16th, 2023

TO: Goodhue County Health and Human Services (HHS) Board

FROM: Kayla Matter, Accounting Supervisor
Mike Zorn, Deputy Director

RE: First Quarter 2023 Fiscal Report

In the first quarter of CY 2023, Goodhue County Health & Human Services Agency had the following budget financial summary.

- We expended 25% (\$4,970,227) of our budget (\$19,910,242) 25% of the way through the year. Last year at this time, we expended 25%.
- We have collected 15% (\$3,003,116) of our anticipated revenue (\$19,910,242), 25% of the way through the year. Last year at this time, we collected 15%.

Children in Out of Home Placement:

We have expended 24% (\$431,658) of our budget (\$1,823,500), 25% of the way through the year.

County Burials:

We have expended 26% (\$10,247) of our budget (\$40,000), 25% of the way through the year.

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State Hospital Costs:

We have expended 35% (\$70,236) of our budget (\$200,000) 25% of the way through the year. Last year at this time, we expended \$90,862. This number varies by how many or how long someone is admitted.

Salaries, Benefits, Overhead and Capital Equipment:

On agency salaries, benefits, overhead and capital equipment line items, we have expended 26% (\$3,306,069) of our budget (\$12,923,358) 25% of the way through the year.

Staffing Revenues Additional Staff:

For the first quarter report, total staffing revenue is 28% at \$1,266,966. Our budget is \$4,457,388 for these revenue categories.

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kmatter
04/24/2023 11:58:45AM

Goodhue County



REVENUES & EXPENDITURES BUDGET REPORT

Report Basis: Cash

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11 Fund
Health & Human Service Fund

From: 01/2023 Thru: 03/2023

Percent of Year: 25%

<u>Account Number</u>	<u>Description</u>	<u>Status</u>	<u>03/2023 Amount</u>	<u>Selected Months</u>	<u>2023 Budget</u>	<u>% Of Budget</u>
FINAL TOTALS:	590 Accounts					
		Revenue	967,303.85-	3,003,115.94-	19,910,242.00-	15
		Expend.	1,834,586.84	4,970,226.90	19,910,242.00	25
		Net	867,282.99	1,967,110.96	.00	0

Goodhue County HHS Out of Home Placement

ACCOUNT #	DESCRIPTION	ACTUAL	ACTUAL	BUDGET	% OF	% OF
		2022	THRU 3/23	2023	BUDGET	YEAR
11-430-710-3410-6020	ELECTRIC HOME MONITORING	\$7,000.00	\$1,096.50	\$2,000.00	55%	25%
11-430-710-3710-6020	CHILD SHELTER -SS	\$18,000.00	\$6,500.00	\$18,000.00	36%	25%
11-430-710-3711-6020	FOSTER CARE CHILD SHELTER - CS		\$0.00			25%
11-430-710-3750-6025	NORTHSTAR KINSHIP ASSISTANCE	\$0.00	\$0.00			25%
11-430-710-3780-6025	NORTHSTAR ADOPTION ASSISTANCE	\$0.00	\$0.00			25%
11-430-710-3800-6057	RULE 4 TRMT FOSTER CARE - SS	\$70,000.00	\$41,847.27	\$100,000.00	42%	25%
11-430-710-3810-6057	REGULAR FOSTER CARE - SS	\$500,000.00	\$142,748.40	\$500,000.00	29%	25%
11-430-710-3810-6058	REGULAR FOSTER CARE - SS-CS- EXPENSES	\$37,000.00	\$20,168.32	\$37,000.00	55%	25%
11-430-710-3814-6056	EMERGENCY FOSTER CARE PROVIDER	\$8,000.00	\$792.00	\$8,000.00	10%	25%
11-430-710-3814-6057	EMERGENCY FOSTER CARE	\$5,000.00	\$184.20	\$5,000.00	4%	25%
11-430-710-3820-6020	RELATIVE CUSTODY ASSISTANCE		\$0.00			25%
11-430-710-3830-6020	FOSTER CARE - RULE 8 SS	\$140,000.00	\$38,590.82	\$140,000.00	28%	25%
11-430-710-3831-6020	FOSTER CARE - RULE 8 CS	\$70,000.00	\$0.00	\$70,000.00	0%	25%
11-430-710-3850-6020	DEPT OF CORR GROUP FACILITY - SS	\$275,000.00	\$52,008.60	\$295,000.00	18%	25%
11-430-710-3852-6020	DEPT OF CORR GROUP FACILITY - CS	\$200,000.00	\$19,125.00	\$200,000.00	10%	25%
11-430-710-3880-6020	EXTENDED FOSTER CARE - IND LIVING 18-20	\$113,500.00	\$31,335.73	\$100,000.00	31%	25%
11-430-710-3890-6020	SHORT TERM FOSTER CARE/RESPITE CARE	\$2,500.00	\$547.11	\$2,500.00	22%	25%
11-430-740-3830-6020	RULE 5 SS	\$340,000.00	\$76,713.85	\$340,000.00	23%	25%
11-430-740-3831-6020	RULE 5 CS	\$6,000.00	\$0.00	\$6,000.00	0%	25%
	TOTAL OUT OF HOME PLACEMENT	\$1,792,000.00	\$431,657.80	\$1,823,500.00	23.7%	25%
	Over/(Under) Budget for percent of year	\$1,795,000.00	-\$24,217.20	\$455,875.00	25%	25%
	Percent Over/(Under) Budget	\$3,000.00			-1.33%	

December	0.00%
November	0.00%
October	0.00%
September	0.00%
August	0.00%
July	0.00%
June	0.00%
May	0.00%
April	0.00%
March	-1.33%
February	-0.29%
January	0.04%
Over/Under Budget 2022	-6.35%

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2023 Budget	% OF BUDG	% OF YEAR
PROGRAM 600 INCOME MAINTENANCE					
SALARIES					
SALARIES & BENEFITS	318,214.89	818,700.14	3,020,322.00	27	25
TOTAL SALARIES	318,214.89	818,700.14	3,020,322.00	27	25
OVERHEAD					
AGENCY OVERHEAD	43,475.32	100,580.33	366,470.00	27	25
TOTAL OVERHEAD	43,475.32	100,580.33	366,470.00	27	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	11,815.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	11,815.00	0	25

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2023 Budget	% OF BUDG	% OF YEAR
PROGRAM 640 CHILD SUPPORT AND COLLECTIONS					
SALARIES					
SALARIES & BENEFITS	107,445.64	202,273.68	809,793.00	25	25
TOTAL SALARIES	107,445.64	202,273.68	809,793.00	25	25
OVERHEAD					
AGENCY OVERHEAD	18,578.00	31,057.40	215,340.00	14	25
TOTAL OVERHEAD	18,578.00	31,057.40	215,340.00	14	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	0.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	0.00	0	25

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2023 Budget	% OF BUDG	% OF YEAR
PROGRAM 700 SOCIAL SERVICES PROGRAM					
SALARIES					
SALARIES & BENEFITS	432,651.72	1,018,431.32	4,030,925.00	25	25
TOTAL SALARIES	432,651.72	1,018,431.32	4,030,925.00	25	25
OVERHEAD					
AGENCY OVERHEAD	46,437.94	104,871.01	431,161.00	24	25
TOTAL OVERHEAD	46,437.94	104,871.01	431,161.00	24	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	11,351.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	11,351.00	0	25

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2023 Budget	% OF BUDG	% OF YEAR
FUND 11 PUBLIC HEALTH FUND					
SALARIES					
SALARIES & BENEFITS	401,395.18	951,163.01	3,546,842.00	27	25
TOTAL SALARIES	401,395.18	951,163.01	3,546,842.00	27	25
OVERHEAD					
AGENCY OVERHEAD	36,129.76	78,992.48	479,339.00	16	25
TOTAL OVERHEAD	36,129.76	78,992.48	479,339.00	16	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	0.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	0.00	0	25

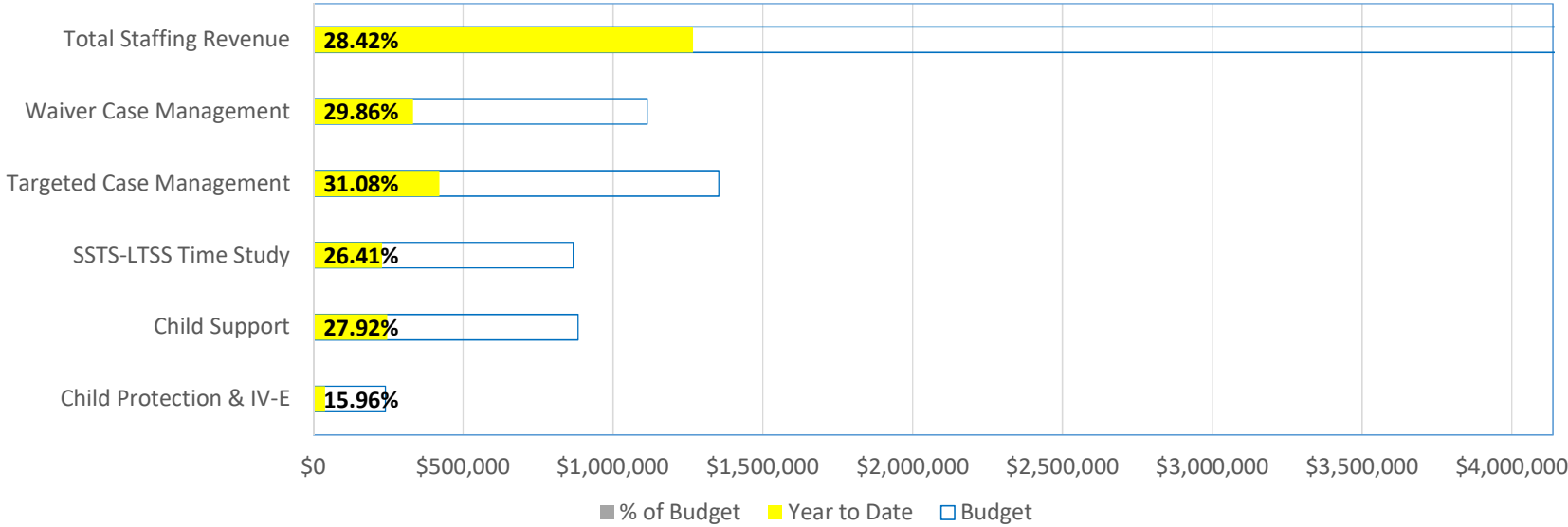
DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2023 Budget	% OF BUDG	% OF YEAR
FUND 11 HEALTH & HUMAN SERVICE FUND					
SALARIES					
SALARIES & BENEFITS	1,259,707.43	2,990,568.15	11,407,882.00	26	25
TOTAL SALARIES	1,259,707.43	2,990,568.15	11,407,882.00	26	25
OVERHEAD					
AGENCY OVERHEAD	144,621.02	315,501.22	1,492,310.00	21	25
TOTAL OVERHEAD	144,621.02	315,501.22	1,492,310.00	21	25
CAPITAL EQUIPMENT					
CAPITAL EQUIPMENT OVER \$5,000	0.00	0.00	23,166.00	0	25
TOTAL CAPITAL EQUIPMENT	0.00	0.00	23,166.00	0	25

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2023 Budget	% OF BUDG	% OF YEAR
FINAL TOTALS	1,404,328.45	3,306,069.37	12,923,358.00	26	25

STATEMENT OF REVENUES AND EXPENDITURES

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2023 Budget	% OF BUDG	% OF YEAR
HHS Staffing Revenues					
11-420-640-0000-5289 CS ST MA Incentive	1,811.73-	6,316.40-	20,000.00-	32	25
11-420-640-0000-5290 CS ST Incentives	0.00	5,468.00-	20,000.00-	27	25
11-420-640-0000-5355 CS Fed Admin	43,100.00-	202,718.00-	725,000.00-	28	25
11-420-640-0000-5356 CS Fed Incentive	0.00	27,600.00-	100,000.00-	28	25
11-420-640-0000-5379 CS Fed MA Incentive	1,263.70-	4,405.76-	18,000.00-	24	25
11-430-700-0000-5292 State LTSS	0.00	76,907.00-	307,125.00-	25	25
11-430-700-0000-5383 Fed LTSS	0.00	93,904.00-	375,000.00-	25	25
11-430-700-3810-5380 Fed MA SSTS	0.00	34,972.00-	135,000.00-	26	25
11-430-710-0000-5289 Child Protection	0.00	0.00	158,263.00-	0	25
11-430-710-3810-5366 FC IV-E	0.00	25,249.00-	80,000.00-	32	25
11-430-710-3810-5367 IV-E SSTS	0.00	23,239.00-	50,000.00-	46	25
11-430-710-3930-5381 CW-TCM	0.00	130,849.40-	500,000.00-	26	25
11-430-730-3050-5380 Rule 25 SSTS	0.00	0.00	0.00	0	25
11-430-740-3830-5366 IV-E Rule 5	0.00	13,103.00-	2,000.00-	655	25
11-430-740-3910-5240 St Adult MH-TCM	853.50-	569.00-	3,000.00-	19	25
11-430-740-3910-5381 MA Adult MH-TCM	26,836.72-	60,153.10-	175,000.00-	34	25
11-430-740-3910-5401 SCHA Adult MH-TCM	70,061.20-	199,341.84-	550,000.00-	36	25
11-430-740-3930-5401 SCHA Pathways	6,396.72-	18,996.32-	60,000.00-	32	25
11-430-760-3930-5381 Adult VA/DD-TCM	6,039.86-	10,543.97-	65,000.00-	16	25
11-463-463-0000-5290 St AC Waiver	90.00-	5,938.75-	11,000.00-	54	25
11-463-463-0000-5292 St MA CM Waivers	30,861.38-	91,527.54-	275,000.00-	33	25
11-463-463-0000-5382 Fed MA CM Waivers	30,791.68-	91,327.80-	275,000.00-	33	25
11-463-463-0000-5402 SCHA Waivers	33,349.89-	60,913.37-	325,000.00-	19	25
11-463-463-0000-5429 SCHA Care Coord	18,936.39-	31,537.24-	135,000.00-	23	25
11-463-463-0000-5859 SCHA/CCC	51,385.26-	51,385.26-	93,000.00-	55	25
TOTAL HHS Staffing Revenues	321,778.03-	1,266,965.75-	4,457,388.00-	28	25

HHS Staffing Revenue Q1/2023
25% of Year



**GOODHUE COUNTY
HEALTH & HUMAN SERVICES (GCHHS)**



**Monthly Update
Child Protection Assessments/Investigations**

Month	2021	2022	2023
January	20	16	16
February	17	16	13
March	15	20	18
April	24	19	15
May	26	20	
June	22	18	
July	19	16	
August	17	13	
September	17	29	
October	12	23	
November	33	14	
December	23	8	
Total	245	212	62

Promote, Strengthen and Protect the Health
of Individuals, Families and Communities!
Equal Opportunity Employer
www.co.goodhue.mn.us/HHS



Goodhue County Performance Report

Cash Assistance and SNAP Timeliness Measures April 2023

Reporting Period:
Jan. 1, 2022 – Dec. 31, 2022



For more information contact:
Minnesota Department of Human Services
Human Services Performance Management System
DHS.HSPM@state.mn.us | (651) 431-5780

About the Cash Assistance and SNAP Timeliness Performance Report

Report Overview

This report for the Human Services Performance Management system (referred to as the Performance Management system) compares county performance to the thresholds established for the system. A threshold is defined as the minimum level of acceptable performance, below which counties will need to complete a Performance Improvement Plan (PIP) as part of the remedies process defined in statute. For counties below the threshold, an official PIP notification—with instructions for accessing PIP forms, PIP completion directions, and available technical assistance—will be provided with the report.

This report contains data on both the Expedited Supplemental Nutrition Assistance Program (SNAP) measure and the cash assistance and SNAP application timeliness measure including:

- The county's Jan. 1, 2022 – Dec. 31, 2022 performance
- Performance data trends for recent years
- A performance comparison to other counties in the same Minnesota Association of County Social Services Administrators (MACSSA) region

Supplemental information about the Performance Management system can be found on CountyLink, www.dhs.state.mn.us/HSPM, including:

- A description of how performance is assessed for counties with 20 or fewer people or events in a measure
- A description of how race and ethnicity data are reported
- Information about the Performance Management system's history, outcomes, mission, vision, and Council

Expedited SNAP- Threshold Suspension

For many counties, the large increase in the number of applications for food and cash assistance during the COVID-19 pandemic continued to effect county operations. Additionally, people have increasingly turned to more convenient online methods of seeking assistance, such as MNbenefits, further increasing the volume of applications. The increased application volume compounded by workforce shortages and learning to work with a new system have caused a backlog for some counties making it difficult to approve and issue expedited SNAP benefits within one day.

Due to the unforeseen increase in applications, workforce challenges and transition to a new application system, preparing PIPs may not be a valuable way for counties to approach improving performance. By suspending the threshold, no PIPs will be issued for this measure. This will give counties an opportunity to continue in-progress efforts to address the backlog and adjust to the increased application counts. It will also give DHS an opportunity to make system improvements within the MNbenefits application and with other processes to better meet applicant needs and support efficiencies for counties' and Tribal Nations' application processing workflows.

Learn more:

https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_FILE&RevisionSelectionMethod=LatestReleased&Rendition=Primary&allowInter-rupt=1&noSaveAs=1&dDocName=mndhs-062608

Small Numbers Policy

The policy for assessing performance in counties with small numbers was updated and a policy update bulletin issued in 2022:

https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_FILE&RevisionSelectionMethod=LatestReleased&Rendition=Primary&allowInterrupt=1&noSaveAs=1&dDocName=dhs-337635

The policy overview below reflects the current assessment method.

- If a county has a denominator of 20 or fewer and is meeting the threshold for a measure, the county is performing to expectations and no further assessment will take place.
- If a county has no people in a measure, it will be considered to be meeting the threshold.
- If a county has a denominator of 20 or fewer and is not meeting the threshold for a measure, performance will be reviewed across two years of data. Two years below the performance threshold for any one measure will trigger the PIP process.
- Measures using a regression threshold model, such as the Self-Support Index, will not be subject to the small numbers policy. The reason for this is that the regression models account for a variety of factors outside of county control, including caseload size.

About the Performance Data by Race and Ethnicity

Overview of Performance Data by Race and Ethnicity

This report provides performance data for counties grouped by race and ethnicity where there were 30 or more people of a group included in the denominator. The data is that of the case applicant; other household members may have a different race and/or ethnicity that is not reported here.

Hispanic or Latino ethnicity is reported separately from race. People are counted once by Hispanic ethnicity and again with their reported race so groups added together exceed the total number of applications.

MAXIS data includes immigrant subgroups, but this report does not include these metrics. Instead, the major racial and ethnic groups are included to reduce the occurrence of small number exclusions. More detailed data about performance by immigrant subgroups may be available upon request. If you would like to request a more detailed report on your county's performance by race and ethnicity, please submit a request to DHS.HSPM@state.mn.us.

Purpose

The racial and ethnic data is included in this report for informational and planning purposes. We encourage you to review this data to identify opportunities for improvement. As the Performance Management reports evolve, we intend to add additional demographic data to help counties better understand their performance and improve outcomes for all Minnesotans. The racial and ethnic group data included in this report does not give a complete picture of county performance, the communities being served, nor systemic inequities. The Performance Management system is not currently using this data to assess a county's need for PIPs.

No Data Available

Counties with low numbers (fewer than 30) for all but one racial and ethnic group do not have a graph of performance for these groups available in this report.

Economic Supports

- Economic Supports training: <https://mn.gov/dhs/partners-and-providers/training-conferences/economic-supports-cash-food/>
- Economic Supports news, initiatives, and reports: <https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/economic-supports-cash-food/>
- Economic Supports policies and procedures: <https://mn.gov/dhs/partners-and-providers/policies-procedures/economic-supports-cash-food/>

SNAP

- Supplemental Nutrition Assistance Program (SNAP) Resources: <https://www.dhssir.cty.dhs.state.mn.us/MAXIS/Pages/SNAP-Resource-Page.aspx>

Contacts

- **Lori Bona**, Minnesota's SNAP payment accuracy coordinator, 651-431-3950, lori.bona@state.mn.us
- **Melissa Miller**, SNAP quality assurance specialist, 651-431-4538, Melissa.Miller@state.mn.us
- **Kinini Jegeno**, Webi (web intelligence) coordinator, 651-431-3979, kinini.jegeno@state.mn.us
- **Erika Martin**, research and operations manager, Economic Assistance and Employment Supports Division, 651-431-3978, erika.martin@state.mn.us

Percent of SNAP and Cash Assistance Applications Processed Timely

What is this measure?

This measure looks at the difference between the application date and the date of the first issuance made for each program approved on the application. The included programs are regular SNAP, Minnesota Family Investment Program, Diversionary Work Program, Refugee Cash Assistance, Minnesota Supplemental Aid, General Assistance, and Group Residential Housing. Applications made the day before a weekend or state-recognized holiday take into account the non-working days. Denials are not included.

Why is this measure important?

Cash and food assistance are a way to help people meet their basic needs. Timely processing of applications is one measure of how well counties are able to help people meet their basic needs.

What affects performance on this measure?

- Service factors that may influence this measure include the complexity of program rules and eligibility requirements, agency case management models, aging technology and systems that are not integrated (MAXIS, MMIS, etc.), the quality and timeliness of information sharing between service areas, such as employment services, child care assistance, child support and child welfare services, location of offices and number of offices
- Staff factors that may influence this measure include staff training, the number of staff, agency culture, staffing structure, availability of translators, and staff to participant ratios
- Participant factors that may influence this measure include literacy levels, availability to participate in an interview, access to a telephone, housing stability, ability to provide documentation, access to transportation, and complicated reporting requirements
- Environmental or external factors that may influence this measure include the local economy and increased applications during economic downturns

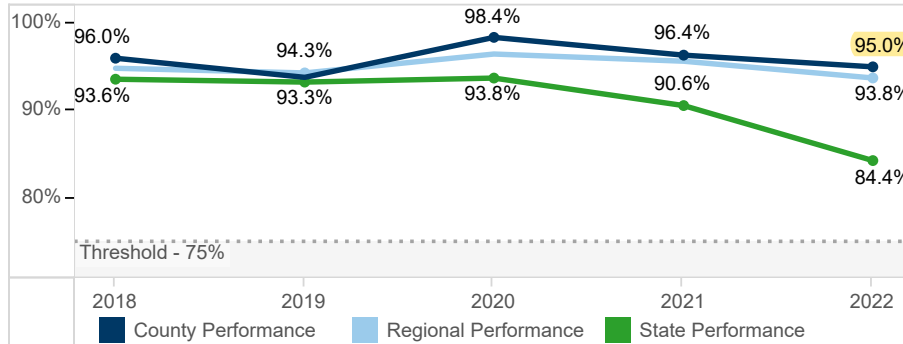
Percent of SNAP and Cash Assistance Applications Processed Timely

Goodhue County Performance by Year

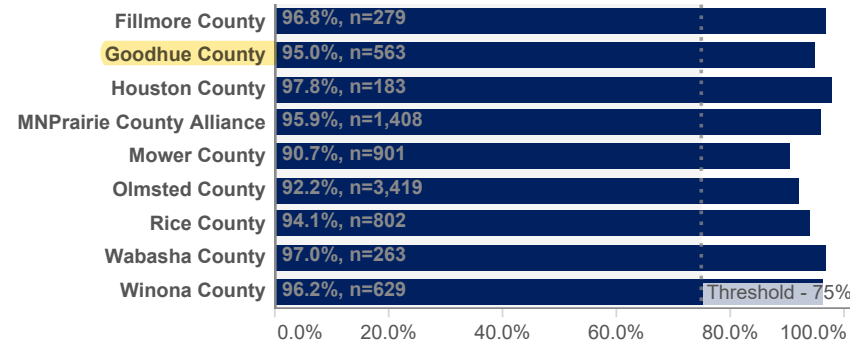
	2018	2019	2020	2021	2022
County Performance	96.0%	93.8%	98.4%	96.4%	95.0%
Denominator	426	454	493	494	563

Goodhue County PIP Decision
No PIP Required - Performance is equal to or above the threshold of 75%.

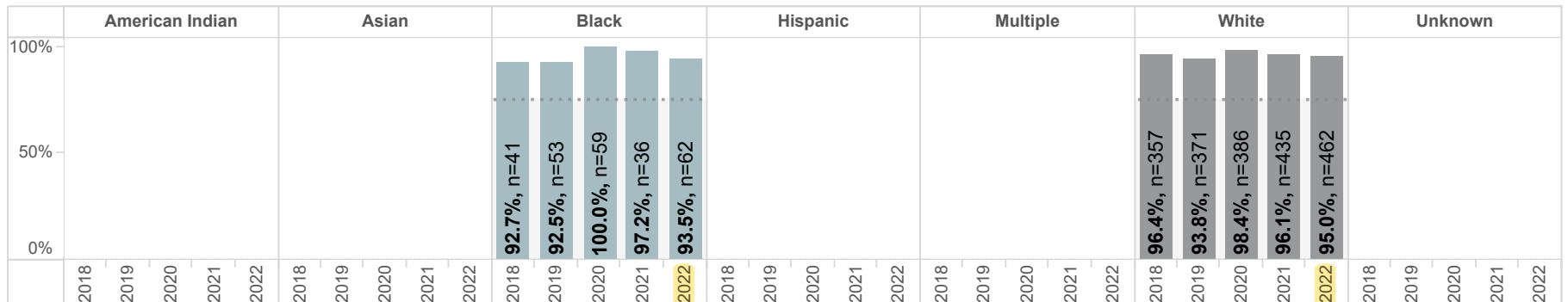
County, State and Regional Performance Trends



2022 Performance for MACSAA Region 10



County Performance by Race and Ethnicity



*The dotted line on each graph indicates the measure threshold of 75%.

Percent of Expedited SNAP Applications Processed within One Business Day

What is this measure?

The difference between the application date and the date the first benefit payment is issued for expedited SNAP applications. It compares total approved expedited SNAP applications in a month to those processed within one business day. Applications submitted on a Friday or the day before a state-recognized holiday are considered timely if payment was issued on the first working day following the weekend or holiday. The measure does not include denied applications.

Why is this measure important?

SNAP applicants are given expedited service when they have little to no other resources available to pay for food and, therefore, need basic safety net programs to overcome a crisis. Efficient and timely processing of these applications help ensure that people's basic need for food is met.

What affects performance on this measure?

- Service factors that may influence this measure include program complexity and changing policy, a complicated application, and challenges associated with online ApplyMN applications
- Staff factors that may influence this measure include staff training levels, staff-to-participant ratios, staff knowledge of policies, high turnover, and competition for resources between programs
- Participant factors that may influence this measure include participant completion of the mandatory interview, the number of migrant and seasonal farm workers making applications, delays due to incomplete applications, availability of advocates to assist with completing applications, and difficulty obtaining required documentation
- Environmental or external factors that may influence this measure include balancing error reduction with timeliness, emphasis on fraud that may result in conflicts between access and timeliness of service, increased applications during economic downturns, and availability of community resources such as food shelves, and natural disasters that result in increased applications

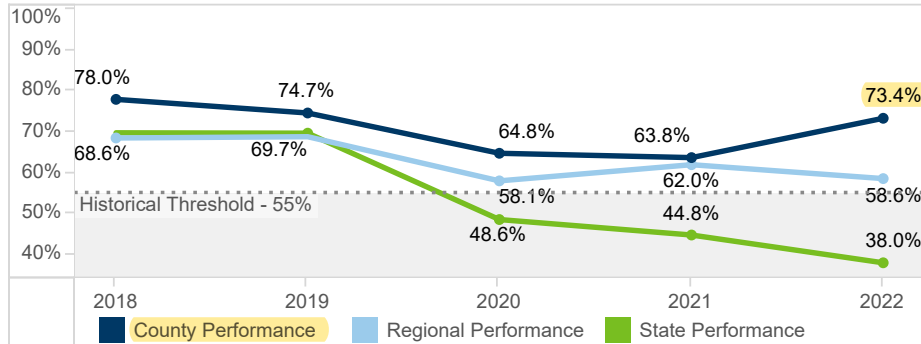
Percent of Expedited SNAP Applications Processed within One Business Day

Goodhue County Performance by Year

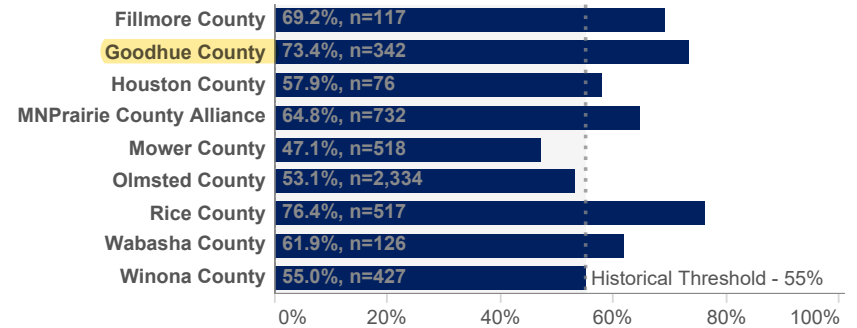
	2018	2019	2020	2021	2022
County Performance	78.0%	74.7%	64.8%	63.8%	73.4%
Denominator	273	316	253	218	342

Goodhue County PIP Decision
No PIP Required – Performance is equal to or above the threshold of 55%.

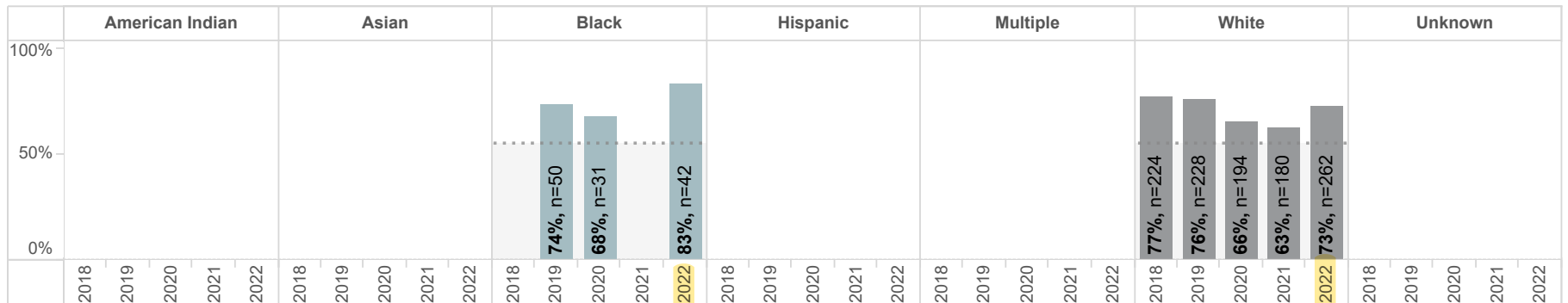
County, State and Regional Performance Trends



2022 Performance for MACSSA Region 10



County Performance by Race and Ethnicity



*The dotted line on each graph indicates the historical measure threshold of 55%. The threshold has been suspended, see page 2 for details.



April 24, 2023

Dear County and Tribal partners:

As you know, the Legislature and Governor recognized that counties and tribes who process Medical Assistance (MA) eligibility need additional support as renewals resume with a \$36 million appropriation dedicated to this purpose. (See [Laws of Minnesota 2023, Regular Session, Chapter 22, Section 4, Subd. 1\(e\).](#))

As directed in the law, funds will be distributed in a one-time payment in proportion to each county or Tribe's March 2023 share of statewide enrollment in Minnesota Health Care Programs other than MinnesotaCare. The attached file shows the allocations that will be made by county and to White Earth Nation, currently the only Tribe that processes MA eligibility.

These funds can only be used for expenses that support MA renewals including implementation of renewal mitigation strategies. Some examples of how funds can be used are for addressing disparities, planning activities, hiring and training staff, overtime pay, supplies, equipment, enrollee outreach and communications, printing, postage and technology.

The Department of Human Services is set to receive the funding July 1, 2023, and will then disburse it to you in the form of a one-time payment within the first two weeks of July. The funding may be used to reimburse you for expenses incurred prior to July 1 as well as for future expenses related to resuming MA renewals. There is no deadline to spend the funds.

Counties and Tribal Nations receiving these funds must keep track of their expenditures and maintain any supporting documentation. DHS will work with you to develop a user-friendly process to report on spending to ensure funds have been used according to the law. Every effort will be made to streamline reporting so staff can remain focused on the renewal process.

Some of the activities identified above and their associated costs are also eligible for federal Medicaid reimbursement through our Income Maintenance Random Moment Time Study (IMRMS). [Find more information about this time study at CountyLink.](#)

We appreciate your partnership and the efforts of your county or tribal staff in this important work for enrollees whose coverage is so crucial to their health and well-being.

Sincerely,

A handwritten signature in black ink that reads 'Julie Marquardt'.

Julie Marquardt
Interim Assistant Commissioner and State Medicaid Director
Health Care Administration
Minnesota Department of Human Services

A handwritten signature in black ink that reads 'David Greeman'.

David Greeman
Chief Financial Officer
Minnesota Department of Human Services

Medical Assistance enrollment counts by servicing entity

March 2023

Servicing Entity	Recipients	Percentage	Amount
Aitkin	4,419	0.320%	\$115,246
Anoka	82,446	5.973%	\$2,150,154
Becker	9,973	0.722%	\$260,091
Beltrami	13,248	0.960%	\$345,502
Benton	11,262	0.816%	\$293,708
Big Stone	1,510	0.109%	\$39,380
Blue Earth	15,461	1.120%	\$403,216
Brown	5,365	0.389%	\$139,917
Carlton	8,701	0.630%	\$226,918
Carver	12,990	0.941%	\$338,773
Cass	10,786	0.781%	\$281,294
Chippewa	4,014	0.291%	\$104,683
Chisago	10,750	0.779%	\$280,355
Clay	17,682	1.281%	\$461,139
Clearwater	2,704	0.196%	\$70,519
Cook	1,243	0.090%	\$32,417
Cottonwood	3,858	0.279%	\$100,615
Crow Wing	18,039	1.307%	\$470,449
Dakota	92,394	6.693%	\$2,409,594
Dodge	3,366	0.244%	\$87,784
Douglas	7,832	0.567%	\$204,255

Servicing Entity	Recipients	Percentage	Amount
Faribault	4,186	0.303%	\$109,169
Fillmore	4,864	0.352%	\$126,851
Freeborn	5,651	0.409%	\$147,376
Goodhue	8,804	0.638%	\$229,604
Grant	12	0.001%	\$ 313
Hennepin	319,850	23.171%	\$8,341,544
Houston	3,367	0.244%	\$87,810
Hubbard	6,369	0.461%	\$166,101
Isanti	8,121	0.588%	\$211,792
Itasca	12,861	0.932%	\$335,409
Jackson	2,391	0.173%	\$62,356
Kanabec	4,836	0.350%	\$126,121
Kandiyohi	13,957	1.011%	\$363,992
Kittson	1,032	0.075%	\$26,914
Koochiching	3,179	0.230%	\$82,907
Lac qui Parle	1,728	0.125%	\$45,065
Lake	2,439	0.177%	\$63,608
Lake of the Woods	1,056	0.077%	\$27,540
Le Sueur	5,562	0.403%	\$145,054
Lincoln	1,308	0.095%	\$34,112
Lyon	7,430	0.538%	\$193,771

Servicing Entity	Recipients	Percentage	Amount
Mahnomen	2,690	0.195%	\$70,154
Marshall	1,940	0.141%	\$50,594
Martin	5,026	0.364%	\$131,076
McLeod	7,870	0.570%	\$205,246
Meeker	5,607	0.406%	\$146,228
Mille Lacs	8,722	0.632%	\$227,466
Morrison	8,843	0.641%	\$230,621
Mower	13,130	0.951%	\$342,424
Murray	2,039	0.148%	\$53,176
Nicollet	6,843	0.496%	\$178,462
Nobles	6,891	0.499%	\$179,714
Norman	1,865	0.135%	\$48,638
Olmsted	34,401	2.492%	\$897,163
Otter Tail	15,141	1.097%	\$394,870
Pennington	2,857	0.207%	\$74,509
Pine	8,639	0.626%	\$225,301
Pipestone	2,531	0.183%	\$66,007
Polk	8,995	0.652%	\$234,586
Pope	4,313	0.312%	\$112,481
Ramsey	178,656	12.942%	\$4,659,268
Red Lake	915	0.066%	\$23,863
Redwood	4,227	0.306%	\$110,238
Renville	4,145	0.300%	\$108,100
Rice	15,009	1.087%	\$391,428
Rock	2,009	0.146%	\$52,394
Roseau	3,313	0.240%	\$86,402
Scott	27,310	1.978%	\$712,232

Servicing Entity	Recipients	Percentage	Amount
Sherburne	20,745	1.503%	\$541,020
Sibley	3,644	0.264%	\$95,034
St. Louis	49,359	3.576%	\$1,287,260
Stearns	42,676	3.092%	\$1,112,971
Steele	10,698	0.775%	\$278,999
Stevens	2,068	0.150%	\$53,933
Swift	2,671	0.193%	\$69,658
Todd	5,776	0.418%	\$150,635
Traverse	1,059	0.077%	\$27,618
Wabasha	4,151	0.301%	\$108,256
Wadena	5,210	0.377%	\$135,874
Waseca	4,200	0.304%	\$109,534
Washington	43,753	3.170%	\$1,141,058
Watsonwan	2,995	0.217%	\$78,108
White Earth Nation	1,036	0.075%	\$27,018
Wilkin	1,667	0.121%	\$43,475
Winona	9,764	0.707%	\$254,641
Wright	25,410	1.841%	\$662,681
Yellow Medicine	2,537	0.184%	\$66,164
Totals	1,380,392	100.000%	36,000,000

MN DHS HRQ R&DA
Data Warehouse Request #1980