SOUTHWEST
HEALTH & HUMAN
SERVICES

Southwest Health and Human Services
Board Agenda
Wednesday, March 21, 2018
Commissioners Room
Government Center, 2nd Floor
Marshall
9:00 a.m.

HUMAN SERVICES

A. Call to order

B. Pledge of Allegiance

C. Consent Agenda
1. Amend/Approval of Agenda
2. Identification of Conflict of Interest
3. Approval of 02/21/18 board minutes

D. Introduce New Staff: None

E. Employee Recognition:
- Nicole Slegers, 1 year, Office Support Specialist, Pipestone
- Monica Christianson, 5 years, Office Services Supervisor, Marshall
- Christine Forry-Tauer, 5 years, Public Health Nurse, Redwood
- Kami Parker, 5 years, Child Support Officer, Marshall
- Kara Miller, 10 years, Public Health Nurse, Marshall
- Jennifer Stratton, 10 years, Social Worker, Slayton
- Scott Gilsrud, 20 years, Social Worker, Redwood

HUMAN SERVICES (cont.)

F. Financial

G. Caseload

	02/18	01/18	12/17
Social Service	3,730	3,708	3,685
Licensing	453	457	457
Out-of-Home Placements	188	188	185
Income Maintenance	11,999	12,101	11,946
Child Support Cases	3,257	3,255	3,266
Child Support Collections	$728,961	$842,451	$729,511
Non IV-D Collections	$98,479	$112,797	$85,959

H. Discussion/Information
1. New Life Treatment Center- Scott Radloff
2. Care Coordination for Elderly Waiver and Alternative Care- Stacey Longtin

I. Decision Items
1. Social Services Policy 26- Fees for 24-Hour Out-Of-Home Care

COMMUNITY HEALTH

J. Call to order

K. Consent Agenda
1. Amend/Approval of Agenda
2. Identification of Conflict of Interest
3. Approval of 02/21/18 board minutes

COMMUNITY HEALTH (cont.)

L. Financial

M. Caseload

	02/18	01/18	12/17
WIC	N/A	2207	2187
Family Home Visiting	42	44	52
PCA Assessments	20	21	16
Managed Care	308	347	283
Dental Varnishing	6	46	24
Refugee Health	7	5	7
Latent TB Medication Distribution	15	17	18
Water Tests	96	106	n/a
FPL Inspections	46	45	n/a
Immunizations	70	56	n/a
Car Seats	13	22	n/a

N. Discussion/Information

1. FHV grant update- Carol Biren & Kristin Deacon
2. WIC Remodel- Kristin Deacon
3. SCHSAC Update- Carol Biren

O. Decision Items

1.

GOVERNING BOARD

P. Call to order

Q. Consent Agenda

1. Amend/Approval of Agenda
2. Identification of Conflict of Interest
3. Approval of 02/21/18 board minutes

GOVERNING BOARD (cont.)

R. Financial

S. Discussion/Information

1. Provide employment training and program updates- Carrie Bendex- Private Industry Council
2. Bill Toulouse- Quarnstrom & Doering PA
3. 2017 Financial Reporting- Sarah Kirchner

T. Decision Items

1. Letter of Support for RTCC Grant
1. Donations: Cedar Mountain School's "Blue Crue" donated 10 bags for children entering foster care. Bags contain basic toiletries, stuffed animals, books and a $10 Walmart Gift Card. Our Saviour's Lutheran Church donated approximately 20 Easter Baskets.
2. Contracts

U. Adjournment

Next Meeting Dates:

- **Wednesday, April 18, 2018 – Marshall**
- **Wednesday, May 16, 2018 – Marshall**
- **Wednesday, June 20, 2018 – Marshall**

SOUTHWEST HEALTH & HUMAN SERVICES

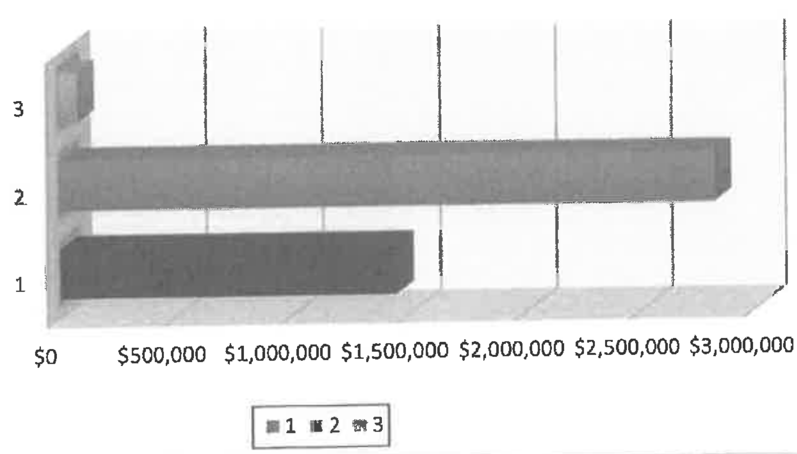
Ivanhoe, Marshall, Slayton, Pipestone, Redwood and Luverne Offices

SUMMARY OF FINANCIAL ACCOUNTS REPORT For the Month Ending: **February 28, 2018**

* Income Maintenance * Social Services * Information Technology * Health *

Description	Month	Running Balance
BEGINNING BALANCE		**$1,831,123**
RECEIPTS		
Monthly Receipts	2,357,398	
County Contribution	0	
Interest on Savings	2,659	
TOTAL MONTHLY RECEIPTS		2,360,057
DISBURSEMENTS		
Monthly Disbursements	2,749,822	
TOTAL MONTHLY DISBURSEMENTS		2,749,822
ENDING BALANCE		**$1,441,358**
REVENUE		
Checking/Money Market	***$1,441,358***	
Bremer Savings	***$2,817,192***	
Great Western Bank Savings	***$75,389.63***	
ENDING BALANCE		**$4,333,939**
DESIGNATED/RESTRICTED FUNDS		
Agency Health Insurance		**$661,779**
LCTS Lyon Murray Collaborative		**$115,264**
LCTS Rock Pipestone Collaborative		**$53,862**
LCTS Redwood Collaborative		**$73,747**
Local Advisory Council		**$1,389**
AVAILABLE CASH BALANCE		**$3,427,897**

REVENUE DESIGNATION



SOUTHWEST HEALTH AND HUMAN SERVICES CHECK REGISTER
FEBRUARY 2018

DATE	RECEIPT or CHECK #	DESCRIPTION	+ DEPOSITS	-DISBURSEMENTS	BALANCE
	BALANCE FORWARD				1,831,122.74
2/2/18	86122-86162	Disb		10,288.71	1,820,834.03
2/2/18	3752-3753 ACH	Disb		157.30	1,820,676.73
2/2/18	86163-86223	Disb		102,134.60	1,718,542.13
2/2/18	3754-3770 ACH	Disb		12,362.46	1,706,179.67
2/2/18	8182-8203	Payroll		140,771.82	1,565,407.85
2/2/18	48919-49179 ACH	Payroll		494,642.94	1,070,764.91
2/2/18	27913,27927-27974	Dep	216,902.52		1,287,667.43
2/5/18	9663	Disb		18,640.18	1,269,027.25
2/6/18	27975-28020	Dep	157,280.99		1,426,308.24
2/8/18	9664	Disb		2,246.12	1,424,062.12
2/8/18	9665	Disb		2,636.82	1,421,425.30
2/8/18	9666	Disb		10,344.09	1,411,081.21
2/9/18	83224-86264	Disb		16,209.34	1,394,871.87
2/9/18	86265-86368	Disb		212,561.73	1,182,310.14
2/9/18	3771-3824 ACH	Disb		55,800.10	1,126,510.04
2/9/18	28021-28071	Dep	762,397.56		1,888,907.60
2/12/18	9667	Disb		28,687.23	1,860,220.37
2/13/18	28072-28117	Dep	194,872.94		2,055,093.31
2/15/18	9668	Disb		43,604.55	2,011,488.76
2/16/18	86369-86412	Disb		5,759.21	2,005,729.55
2/16/18	3825-3827 ACH	Disb		453.86	2,005,275.69
2/16/18	86413-86480	Disb		432,369.15	1,572,906.54
2/16/18	3828-3846 ACH	Disb		7,383.22	1,565,523.32
2/16/18	8204-8221	Payroll		140,427.00	1,425,096.32
2/16/18	49180-49430 ACH	Payroll		502,556.41	922,539.91
2/16/18	28118-28169	Dep	469,168.00		1,391,707.91
2/20/18	28170-28198	Dep	101,228.89		1,492,936.80
2/20/18	9669	Disb		42,263.62	1,450,673.18
2/20/18	9670	Disb		9,962.30	1,440,710.88
2/20/18	86311 VOID	Disb		-449.00	1,441,159.88
2/22/18	9671	Disb		12,191.45	1,428,968.43
2/23/18	86481-86586	Disb		16,578.60	1,412,389.83
2/23/18	86587-86744	Disb		66,048.03	1,346,341.80
2/23/18	3847-3850 ACH	Disb		2,071.03	1,344,270.77
2/23/18	86745-86764	Disb		2,769.64	1,341,501.13
2/23/18	3851 ACH	Disb		261.00	1,341,240.13
2/23/18	86765-86819	Disb		218,531.52	1,122,708.61
2/23/18	3852-3858 ACH	Disb		1,308.99	1,121,399.62
2/23/18	28199-28273	Dep	383,904.64		1,505,304.26
2/23/18	86578 VOID	Disb		-263.00	1,505,567.26
2/26/18	9672	Disb		138,511.34	1,367,055.92
2/26/18	9673 (R 28130 returned)	Dep	-339.26		1,366,716.66
2/28/18	28274-28308, 28326, 28328, 28330, 28333, 28336-28344, 28346-28350	Dep	74,640.63		1,441,357.29
					1,441,357.29
	Balanced 03/01/18 LMD	TOTALS	2,360,056.91	2,749,822.36	
	Savings - Bremer				2,817,191.61
	Savings - Great Western				75,389.63
	TOTAL CASH BALANCE				4,333,938.53

SOUTHWEST HEALTH AND HUMAN SERVICES BREMER BANK SAVINGS REGISTER
FEBRUARY 2017

DATE	RECEIPT or CHECK #	DESCRIPTION	+ DEPOSITS	-DISBURSEMENTS	BALANCE
	BALANCE FORWARD				2,814,592.44
2/8/2018	33907	Interest	2,599.17		2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61
					2,817,191.61

SOUTHWEST HEALTH AND HUMAN SERVICES GREAT WESTERN BANK SAVINGS REGISTER

FEBRUARY 2018

DATE	RECEIPT or CHECK #	DESCRIPTION	+ DEPOSITS	-DISBURSEMENTS	BALANCE
	BALANCE FORWARD				75,329.70
2/8/2018	33908	Interest	59.93		75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63
					75,389.63

Southwest Health and Human Services

INTEGRATED FINANCIAL SYSTEMS

Treasurer's Cash Trial Balance

As of 02/2018

Fund		Beginning Balance	This Month	YTD	Current Balance
1	Health Services Fund				
		1,709,545.07			
	Receipts		242,131.48	830,654.34	
	Disbursements		35,680.24-	146,850.15-	
	Payroll		225,028.21-	449,711.51-	
	Fund Total		18,576.97-	234,092.68	1,943,637.75
5	Human Services Fund	410	General Administration		
		189,947.30			
	Receipts		51,942.81	104,468.46	
	Disbursements		51,328.23-	85,327.28-	
	Payroll		13,749.62-	30,445.81-	
	Dept Total		13,135.04-	11,304.63-	178,642.67
5	Human Services Fund	420	Income Maintenance		
		2,690,151.05-			
	Receipts		337,324.59	666,833.44	
	Disbursements		276,780.21-	521,519.92-	
	Payroll		349,539.80-	704,021.66-	
	Dept Total		288,995.42-	558,708.14-	3,248,859.19-
5	Human Services Fund	431	Social Services		
		8,275,091.90			
	Receipts		1,201,067.48	1,856,508.35	
	Disbursements		112,793.71-	249,475.03-	
	SSIS		644,437.55-	1,202,571.27-	
	Payroll		664,053.31-	1,333,211.58-	
	Dept Total		220,217.09-	928,749.53-	7,346,342.37
5	Human Services Fund	461	Information Systems		
		2,739,744.12-			
	Receipts		4,892.55	7,994.55	
	Disbursements		71.33-	106.34-	
	Payroll		26,027.23-	60,010.61-	
	Dept Total		21,206.01-	52,122.40-	2,791,866.52-

Southwest Health and Human Services

Treasurer's Cash Trial Balance

As of 02/2018

Fund		Beginning Balance	This Month	YTD	Current Balance
5	Human Services Fund	471	LCTS Collaborative Agency		
		0.00			
	Receipts		69,331.00	69,331.00	
	Disbursements		69,331.00-	69,331.00-	
	Dept Total		0.00	0.00	0.00
	Fund Total	3,035,144.03	543,553.56-	1,550,884.70-	1,484,259.33
61	Agency Health Insurance				
		753,857.36			
	Receipts		386,195.10	616,649.23	
	Disbursements		271,876.92-	708,727.33-	
	Fund Total		114,318.18	92,078.10-	661,779.26
71	LCTS Lyon Murray Collaborative Fund	471	LCTS Collaborative Agency		
		93,353.73			
	Receipts		31,035.00	31,035.00	
	Disbursements		9,125.00-	9,125.00-	
	Dept Total		21,910.00	21,910.00	115,263.73
	Fund Total	93,353.73	21,910.00	21,910.00	115,263.73
73	LCTS Rock Pipestone Collaborative Fund	471	LCTS Collaborative Agency		
		44,725.46			
	Receipts		11,771.00	11,771.00	
	Disbursements		0.00	2,634.00-	
	Dept Total		11,771.00	9,137.00	53,862.46
	Fund Total	44,725.46	11,771.00	9,137.00	53,862.46
75	Redwood LCTS Collaborative	471	LCTS Collaborative Agency		
		46,722.12			
	Receipts		27,025.00	27,025.00	
	Dept Total		27,025.00	27,025.00	73,747.12

Southwest Health and Human Services

Treasurer's Cash Trial Balance As of 02/2018

Fund		Beginning Balance		This Month	YTD	Current Balance
	Fund Total	46,722.12		27,025.00	27,025.00	73,747.12
77	Local Advisory Council		477	Local Advisory Council		
		1,398.86				
	Disbursements			0.00	9.98-	
	Dept Total			0.00	9.98-	1,388.88
	Fund Total	1,398.86		0.00	9.98-	1,388.88
All Funds		5,684,746.63				
	Receipts			2,362,716.01	4,222,270.37	
	Disbursements			826,986.64-	1,793,106.03-	
	SSIS			644,437.55-	1,202,571.27-	
	Payroll			1,278,398.17-	2,577,401.17-	
	Total			387,106.35-	1,350,808.10-	4,333,938.53

Southwest Health and Human Services

RM-Stmt of Revenues & Expenditures

As Of 02/2018 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2018 BUDGET	% OF BUDG	% OF YEAR
FUND 1 HEALTH SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	0.00	232,198.78-	928,795.00-	25	17
INTERGOVERNMENTAL REVENUES	14,925.38-	165,375.18-	187,300.00-	88	17
STATE REVENUES	26,171.22-	112,506.01-	855,647.00-	13	17
FEDERAL REVENUES	156,158.73-	240,836.60-	1,362,742.00-	18	17
FEES	39,985.96-	72,805.42-	454,980.00-	16	17
EARNINGS ON INVESTMENTS	425.45-	911.36-	1,600.00-	57	17
MISCELLANEOUS REVENUES	4,453.35-	5,978.33-	8,900.00-	67	17
TOTAL REVENUES	242,120.09-	830,611.68-	3,799,964.00-	22	17
EXPENDITURES					
PROGRAM EXPENDITURES	0.00	0.00	0.00	0	17
PAYROLL AND BENEFITS	225,028.21	449,711.51	2,907,719.00	15	17
OTHER EXPENDITURES	35,668.85	146,807.49	892,245.00	16	17
TOTAL EXPENDITURES	260,697.06	596,519.00	3,799,964.00	16	17

Southwest Health and Human Services

RM-Stmt of Revenues & Expenditures

As Of 02/2018 Report Basis: Cash

DESCRIPTION	CURRENT MONTH	YEAR TO-DATE	2018 BUDGET	% OF BUDG	% OF YEAR
FUND 5 HUMAN SERVICES FUND					
REVENUES					
CONTRIBUTIONS FROM COUNTIES	0.00	221,307.35-	10,127,818.00-	2	17
INTERGOVERNMENTAL REVENUES	0.00	5,000.00-	109,907.00-	5	17
STATE REVENUES	414,711.74-	551,986.66-	5,343,608.00-	10	17
FEDERAL REVENUES	892,587.76-	1,208,727.13-	7,756,313.00-	16	17
FEES	200,830.64-	350,224.02-	2,191,354.00-	16	17
EARNINGS ON INVESTMENTS	2,233.65-	4,543.18-	8,400.00-	54	17
MISCELLANEOUS REVENUES	101,710.59-	256,740.59-	993,200.00-	26	17
TOTAL REVENUES	1,612,074.38-	2,598,528.93-	26,530,600.00-	10	17
EXPENDITURES					
PROGRAM EXPENDITURES	880,191.14	1,604,077.45	10,064,471.00	16	17
PAYROLL AND BENEFITS	1,052,513.87	2,124,499.82	13,733,885.00	15	17
OTHER EXPENDITURES	222,681.42	436,787.70	2,732,244.00	16	17
TOTAL EXPENDITURES	2,155,386.43	4,165,364.97	26,530,600.00	16	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
1 FUND	Health Services Fund							
410 DEPT	General Administration							
0 PROGRAM	...		Revenue					17
			Expend.	3,163.31	9,325.81	160.00	5,829	17
			Net	3,163.31	9,325.81	160.00	5,829	17
930 PROGRAM	Administration		Revenue	4,962.33-	238,622.48-	939,995.00-	25	17
			Expend.	48,876.33	98,160.31	614,515.00	16	17
			Net	43,914.00	140,462.17-	325,480.00-	43	17
410 DEPT	General Administration	Totals:	Revenue	4,962.33-	238,622.48-	939,995.00-	25	17
			Expend.	52,039.64	107,486.12	614,675.00	17	17
			Net	47,077.31	131,136.36-	325,320.00-	40	17
481 DEPT	Nursing							
100 PROGRAM	Family Health		Revenue	210.00-	2,270.00-	18,160.00-	13	17
			Expend.	1,378.88	4,464.55	14,764.00	30	17
			Net	1,168.88	2,194.55	3,396.00-	65-	17
103 PROGRAM	Follow Along Program		Revenue	0.00	2,899.50-	26,966.00-	11	17
			Expend.	2,843.11	5,810.17	35,676.00	16	17
			Net	2,843.11	2,910.67	8,710.00	33	17
110 PROGRAM	TANF		Revenue	0.00	0.00	127,876.00-	0	17
			Expend.	0.00	36,675.41	127,876.00	29	17
			Net	0.00	36,675.41	0.00	0	17
130 PROGRAM	WIC		Revenue	103,727.00-	141,700.00-	435,696.00-	33	17
			Expend.	38,609.62	78,956.96	467,435.00	17	17
			Net	65,117.38-	62,743.04-	31,739.00	198-	17
140 PROGRAM	Peer Breastfeeding Support Program		Revenue	0.00	0.00	78,244.00-	0	17
			Expend.	3,717.92	8,789.94	78,244.00	11	17
			Net	3,717.92	8,789.94	0.00	0	17
210 PROGRAM	CTC Outreach		Revenue	23,878.90-	43,353.41-	271,412.00-	16	17
			Expend.	17,602.08	34,719.53	271,412.00	13	17
			Net	6,276.82-	8,633.88-	0.00	0	17
270 PROGRAM	Maternal Child Health		Revenue	5,711.32-	10,135.62-	334,648.00-	3	17
			Expend.	20,340.94	49,263.45	315,553.00	16	17
			Net	14,629.62	39,127.83	19,095.00-	205-	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
280 PROGRAM	MCH Dental Health		Revenue	704.95-	21,161.85-	70,300.00-	30	17
			Expend.	2,144.93	4,397.62	48,549.00	9	17
			Net	1,439.98	16,764.23-	21,751.00-	77	17
285 PROGRAM	MCH Blood Lead		Revenue	0.00	0.00	1,000.00-	0	17
			Expend.	293.71	478.00	0.00	0	17
			Net	293.71	478.00	1,000.00-	48-	17
295 PROGRAM	MCH Car Seat Program		Revenue	873.81-	2,685.41-	33,200.00-	8	17
			Expend.	2,828.35	4,944.40	41,745.00	12	17
			Net	1,954.54	2,258.99	8,545.00	26	17
300 PROGRAM	Case Management		Revenue	30,226.75-	53,892.47-	368,800.00-	15	17
			Expend.	29,362.45	72,448.28	361,007.00	20	17
			Net	864.30-	18,555.81	7,793.00-	238-	17
330 PROGRAM	MNChoices		Revenue	30,105.00-	30,105.00-	171,500.00-	18	17
			Expend.	20,273.48	43,556.85	293,918.00	15	17
			Net	9,831.52-	13,451.85	122,418.00	11	17
603 PROGRAM	Disease Prevention And Control		Revenue	1,206.86-	1,912.68-	157,292.00-	1	17
			Expend.	14,991.51	30,578.63	240,454.00	13	17
			Net	13,784.65	28,665.95	83,162.00	34	17
660 PROGRAM	MIIC		Revenue	0.00	0.00	1,500.00-	0	17
			Expend.	228.16	276.82	0.00	0	17
			Net	228.16	276.82	1,500.00-	18-	17
481 DEPT	Nursing	Totals:	Revenue	196,644.59-	310,115.94-	2,096,594.00-	15	17
			Expend.	154,615.14	375,360.61	2,296,633.00	16	17
			Net	42,029.45-	65,244.67	200,039.00	33	17
483 DEPT	Health Education							
500 PROGRAM	Direct Client Services		Revenue	291.32-	336.98-	2,770.00-	12	17
			Expend.	938.33	2,384.34	61,613.00	4	17
			Net	647.01	2,047.36	58,843.00	3	17
510 PROGRAM	SHIP		Revenue	0.00	75,242.03-	224,631.00-	33	17
			Expend.	13,053.16	28,849.60	220,396.00	13	17
			Net	13,053.16	46,392.43-	4,235.00-	1,095	17
550 PROGRAM	P&I Grant		Revenue	0.00	33,184.00-	188,679.00-	18	17
			Expend.	8,534.21	18,771.92	186,869.00	10	17
			Net	8,534.21	14,412.08-	1,810.00-	796	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund

INTEGRATED FINANCIAL SYSTEMS

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
900 PROGRAM	Emergency Preparedness		Revenue	20,695.47-	20,695.47-	98,295.00-	21	17
			Expend.	8,627.19	16,923.86	124,290.00	14	17
			Net	12,068.28-	3,771.61-	25,995.00	15-	17
901 PROGRAM	Med Reserve Corps		Revenue					17
			Expend.	1,036.57	1,039.58	0.00	0	17
			Net	1,036.57	1,039.58	0.00	0	17
483 DEPT	Health Education	Totals:	Revenue	20,986.79-	129,458.48-	514,375.00-	25	17
			Expend.	32,189.46	67,969.30	593,168.00	11	17
			Net	11,202.67	61,489.18-	78,793.00	78-	17
485 DEPT	Environmental Health							
800 PROGRAM	Environmental		Revenue	16,526.38-	149,436.18-	229,000.00-	65	17
			Expend.	21,848.84	45,691.09	275,682.00	17	17
			Net	5,322.46	103,745.09-	46,682.00	222-	17
820 PROGRAM	Healthy Homes Grant		Revenue	0.00	0.00	20,000.00-	0	17
			Expend.	0.00	0.00	19,806.00	0	17
			Net	0.00	0.00	194.00-	0	17
830 PROGRAM	FDA Standardization Grant		Revenue	3,000.00-	2,978.60-	0.00	0	17
			Expend.	3.98	11.88	0.00	0	17
			Net	2,996.02-	2,966.72-	0.00	0	17
485 DEPT	Environmental Health	Totals:	Revenue	19,526.38-	152,414.78-	249,000.00-	61	17
			Expend.	21,852.82	45,702.97	295,488.00	15	17
			Net	2,326.44	106,711.81-	46,488.00	230-	17
1 FUND	Health Services Fund	Totals:	Revenue	242,120.09-	830,611.68-	3,799,964.00-	22	17
			Expend.	260,697.06	596,519.00	3,799,964.00	16	17
			Net	18,576.97	234,092.68-	0.00	0	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund

INTEGRATED FINANCIAL SYSTEMS

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
5 FUND	Human Services Fund							
410 DEPT	General Administration							
0 PROGRAM	---		**Revenue**					17
			Expend.	12,893.53	27,255.97	83,935.00	32	17
			Net	12,893.53	27,255.97	83,935.00	32	17
410 DEPT	General Administration	**Totals:**	**Revenue**					17
			Expend.	12,893.53	27,255.97	83,935.00	32	17
			Net	12,893.53	27,255.97	83,935.00	32	17
420 DEPT	Income Maintenance							
600 PROGRAM	Income Maint Administrative/Overhea		**Revenue**	6,811.27-	72,228.99-	3,246,752.00-	2	17
			Expend.	122,064.64	258,883.12	1,666,654.00	16	17
			Net	115,253.37	186,654.13	1,580,098.00-	12-	17
601 PROGRAM	Income Maint/Random Moment Payro		**Revenue**					17
			Expend.	194,429.48	388,895.49	2,562,216.00	15	17
			Net	194,429.48	388,895.49	2,562,216.00	15	17
602 PROGRAM	Income Maint FPI Investigator		**Revenue**	11,610.00-	11,610.00-	50,000.00-	23	17
			Expend.	4,592.60	9,345.92	61,111.00	15	17
			Net	7,017.40-	2,264.08-	11,111.00	20-	17
605 PROGRAM	MN Supplemental Aid (MSA)/GRH		**Revenue**	3,355.01-	8,192.47-	28,000.00-	29	17
			Expend.	6,149.17	6,149.17	18,750.00	33	17
			Net	2,794.16	2,043.30-	9,250.00-	22	17
610 PROGRAM	TANF(AFDC/MFIP/DWP)		**Revenue**	1,441.39-	1,837.39-	25,000.00-	7	17
			Expend.	114.75	114.75	19,550.00	1	17
			Net	1,326.64-	1,722.64-	5,450.00-	32	17
620 PROGRAM	General Asst (GA)/General Relief/Buri		**Revenue**	5,486.98-	6,293.48-	25,000.00-	25	17
			Expend.	39,632.50	62,489.49	251,250.00	25	17
			Net	34,145.52	56,196.01	226,250.00	25	17
630 PROGRAM	Food Support (FS)		**Revenue**	11,724.00-	23,458.00-	516,000.00-	5	17
			Expend.	258.45	258.45	7,500.00	3	17
			Net	11,465.55-	23,199.55-	508,500.00-	5	17
640 PROGRAM	Child Support (IVD)		**Revenue**	52,588.53-	113,000.86-	1,653,893.00-	7	17
			Expend.	89,580.92	185,376.92	1,153,303.00	16	17
			Net	36,992.39	72,376.06	500,590.00-	14-	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
650 PROGRAM	Medical Assistance (MA)		Revenue	244,284.91-	429,962.58-	3,350,000.00-	13	17
			Expend.	169,475.00	313,778.60	2,476,000.00	13	17
			Net	74,809.91-	116,183.98-	874,000.00-	13	17
680 PROGRAM	Refugee Cash Assistance (RCA)		Revenue	0.00	0.00	1,000.00-	0	17
			Expend.					17
			Net	0.00	0.00	1,000.00-	0	17
420 DEPT	Income Maintenance	Totals:	Revenue	337,302.09-	666,583.77-	8,895,645.00-	7	17
			Expend.	626,297.51	1,225,291.91	8,216,334.00	15	17
			Net	288,995.42	558,708.14	679,311.00-	82-	17
431 DEPT	Social Services							
700 PROGRAM	Social Service Administrative/Overhea		Revenue	508,006.51-	664,459.95-	9,991,780.00-	7	17
			Expend.	203,811.08	437,346.48	2,754,328.00	16	17
			Net	304,195.43-	227,113.47-	7,237,452.00-	3	17
701 PROGRAM	Social Services/SSTS		Revenue					17
			Expend.	565,313.53	1,131,456.28	7,149,115.00	16	17
			Net	565,313.53	1,131,456.28	7,149,115.00	16	17
710 PROGRAM	Children's Social Services Programs		Revenue	225,188.68-	282,007.58-	1,946,098.00-	14	17
			Expend.	279,644.07	599,960.14	3,619,941.00	17	17
			Net	54,455.39	317,952.56	1,673,843.00	19	17
712 PROGRAM	CIRCLE Program		Revenue	0.00	5,000.00-	5,000.00-	100	17
			Expend.	493.43	737.85	8,000.00	9	17
			Net	493.43	4,262.15-	3.000.00	142-	17
713 PROGRAM	"SELF Program" Grant		Revenue	0.00	0.00	54,100.00-	0	17
			Expend.	1,909.52	2,278.82	54,100.00	4	17
			Net	1,909.52	2,278.82	0.00	0	17
715 PROGRAM	Childrens Waivers		Revenue	10,693.39-	19,321.07-	105,000.00-	18	17
			Expend.	0.00	0.00	10,000.00	0	17
			Net	10,693.39-	19,321.07-	95,000.00-	20	17
716 PROGRAM	FGDM/Family Group Decision Making		Revenue	0.00	15,575.71-	56,914.00-	27	17
			Expend.	2,084.17	3,381.32	56,914.00	6	17
			Net	2,084.17	12,194.39-	0.00	0	17
717 PROGRAM	AR/Alternative Response Discretion F		Revenue	0.00	0.00	55,175.00-	0	17
			Expend.	1,161.53	1,971.73	55,175.00	4	17
			Net	1,161.53	1,971.73	0.00	0	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
718 PROGRAM	PSOP/Parent Support Outreach Progra		Revenue	0.00	0.00	40,446.00-	0	17
			Expend.	194.73	2,273.06	40,446.00	6	17
			Net	194.73	2,273.06	0.00	0	17
720 PROGRAM	Ch Care/Ch Prot		Revenue	2,250.00-	5,000.00-	30,000.00-	17	17
			Expend.	0.00	0.00	4,500.00	0	17
			Net	2,250.00-	5,000.00-	25,500.00-	20	17
721 PROGRAM	CC-Basic Slide Fee/Cty Match to DHS		Revenue	914.45-	2,465.45-	40,035.00-	6	17
			Expend.	0.00	3,613.75	40,035.00	9	17
			Net	914.45-	1,148.30	0.00	0	17
722 PROGRAM	Child Care/MFIP		Revenue	0.00	0.00	1,500.00-	0	17
			Expend.					17
			Net	0.00	0.00	1,500.00-	0	17
726 PROGRAM	MFIP/SW MN PIC		Revenue	0.00	962.00-	13,000.00-	7	17
			Expend.					17
			Net	0.00	962.00-	13,000.00-	7	17
730 PROGRAM	Chemical Dependency		Revenue	50,300.87-	62,330.10-	293,000.00-	21	17
			Expend.	53,413.11	96,184.39	434,000.00	22	17
			Net	3,112.24	33,854.29	141,000.00	24	17
740 PROGRAM	Mental Health (Both Adults/Children)		Revenue	3.10-	3.10-	0.00	0	17
			Expend.					17
			Net	3.10-	3.10-	0.00	0	17
741 PROGRAM	Mental Health/Adults Only		Revenue	107,805.72-	173,549.84-	1,210,635.00-	14	17
			Expend.	142,814.47	221,512.50	1,598,082.00	14	17
			Net	35,008.75	47,962.66	387,447.00	12	17
742 PROGRAM	Mental Health/Children Only		Revenue	57,266.43-	157,267.40-	864,383.00-	18	17
			Expend.	137,244.42	212,749.60	1,405,984.00	15	17
			Net	79,977.99	55,482.20	541,601.00	10	17
750 PROGRAM	Developmental Disabilities		Revenue	79,752.28-	134,110.54-	856,835.00-	16	17
			Expend.	27,939.99	56,961.06	428,185.00	13	17
			Net	51,812.29-	77,149.48-	428,650.00-	18	17
760 PROGRAM	Adult Services		Revenue	94,703.92-	200,696.63-	1,355,500.00-	15	17
			Expend.	1,422.20	3,444.57	88,800.00	4	17
			Net	93,281.72-	197,252.06-	1,266,700.00-	16	17

Southwest Health and Human Services

Revenues & Expend by Prog,Dept,Fund

Report Basis: Cash

Element	Description	Account Number		Current Month	Year-To-Date	Budget	% of Bdgt	% of Year
765 PROGRAM	Adults Waivers		Revenue	63,734.72-	131,941.57-	680,000.00-	19	17
			Expend.	3,390.91	9,568.92	81,250.00	12	17
			Net	60,343.81-	122,372.65-	598,750.00-	20	17
431 DEPT	Social Services	Totals:	Revenue	1,200,620.07-	1,854,690.94-	17,599,401.00-	11	17
			Expend.	1,420,837.16	2,783,440.47	17,828,855.00	16	17
			Net	220,217.09	928,749.53	229,454.00	405	17
461 DEPT	Information Systems							
0 PROGRAM	...		Revenue	4,821.22-	7,923.22-	35,554.00-	22	17
			Expend.	26,027.23	60,045.62	401,476.00	15	17
			Net	21,206.01	52,122.40	365,922.00	14	17
461 DEPT	Information Systems	Totals:	Revenue	4,821.22-	7,923.22-	35,554.00-	22	17
			Expend.	26,027.23	60,045.62	401,476.00	15	17
			Net	21,206.01	52,122.40	365,922.00	14	17
471 DEPT	LCTS Collaborative Agency							
702 PROGRAM	LCTS		Revenue	69,331.00-	69,331.00-	0.00	0	17
			Expend.	69,331.00	69,331.00	0.00	0	17
			Net	0.00	0.00	0.00	0	17
471 DEPT	LCTS Collaborative Agency	Totals:	Revenue	69,331.00-	69,331.00-	0.00	0	17
			Expend.	69,331.00	69,331.00	0.00	0	17
			Net	0.00	0.00	0.00	0	17
5 FUND	Human Services Fund	Totals:	Revenue	1,612,074.38-	2,598,528.93-	26,530,600.00-	10	17
			Expend.	2,155,386.43	4,165,364.97	26,530,600.00	16	17
			Net	543,312.05	1,566,836.04	0.00	0	17
FINAL TOTALS	957 Accounts		Revenue	1,854,194.47-	3,429,140.61-	30,330,564.00-	11	17
			Expend.	2,416,083.49	4,761,883.97	30,330,564.00	16	17
			Net	561,889.02	1,332,743.36	0.00	0	17

Social Services Caseload:

Yearly Averages	Adult Services	Children's Services	Total Programs
2015	2648	481	3129
2016	2669	518	3187
2017	2705	604	3308
2018			

2018	Adult Services	Children's Services	Total Programs
January	2647	604	3251
February	2650	627	3277
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			
	5297	**1231**	**3264**

Adult - Social Services Caseload

Average	Adult Brain Injury (BI)	Adult Community Alternative Care (CAC)	Adult Community Access for Disability Inclusion (CADI)	Adult Essential Community Supports	Adult Mental Health (AMH)	Adult Protective Services (APS)	Adult Services (AS)	Alternative Care (AC)	Chemical Dependency (CD)	Developmental Disabilities (DD)	Elderly Waiver (EW)	Total Programs
2015	12	227	13		306	34	817	23	403	460	352	2652
2016	13	240	12	0	298	50	829	18	396	452	362	2669
2017	12	266	12	0	315	45	828	16	422	444	343	2705
2018												

*Note: CADI name change and there is a new category (Adult Essential Community Supports)

2018	Adult Brain Injury (BI)	Adult Community Access for Disability Inclusion (CADI)	Adult Community Alternative Care (CAC)	Adult Essential Community Supports	Adult Mental Health (AMH)	Adult Protective Services (APS)	Adult Services (AS)	Alternative Care (AC)	Chemical Dependency (CD)	Developmental Disabilities (DD)	Elderly Waiver (EW)	Total Programs
January	12	270	13	0	293	59	862	17	338	453	330	2647
February	12	268	13	0	293	49	856	17	366	453	323	2650
March												
April												
May												
June												
July												
August												
September												
October												
November												
December												
	12	269	13	0	293	54	859	17	352	453	327	2649

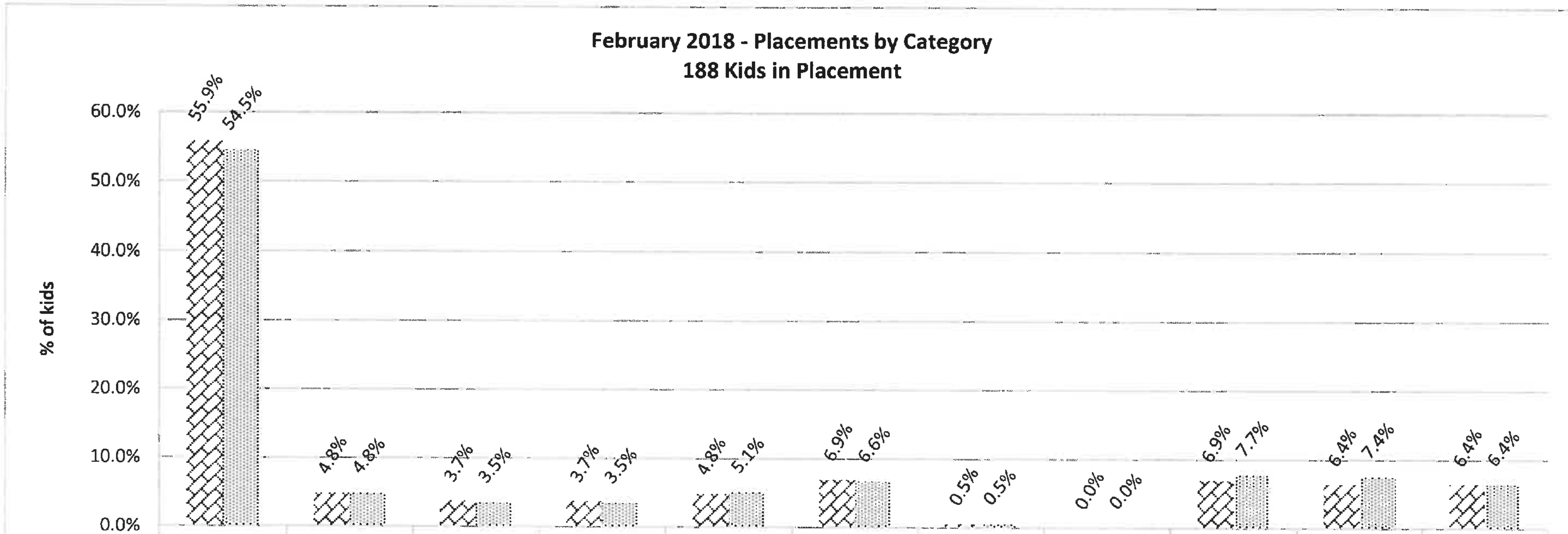
Children's - Social Services Caseload

Average	Adolescent Independent Living (ALS)	Adoption	Child Brain Injury (BI)	Child Community Alternative Care (CAC)	Child Community Alternatives for Disabled Individuals (CADI)	Child Protection (CP)	Child Welfare (CW)	Children's Mental Health (CMH)	Early Inter vention: Infants & Toddlers with Disabilities	Minor Parents (MP)	Parent Support Outreach Program (PSOP)	Total Programs
2015	38	15	1	3	30	153	127	96	0	1	18	482
2016	41	17	2	5	35	175	145	86	0	0	13	518
2017	49	21	0	10	35	195	174	103	0	0	17	604
2018												

2018	Adolescent Independent Living (ALS)	Adoption	Child Brain Injury (BI)	Child Community Alternative Care (CAC)	Child Community Alternatives for Disabled Individuals (CADI)	Child Protection (CP)	Child Welfare (CW)	Children's Mental Health (CMH)	Early Inter vention: Infants & Toddlers with Disabilities	Minor Parents (MP)	Parent Support Outreach Program (PSOP)	Total Programs
January	46	20	0	10	34	188	184	104	0	0	18	604
February	46	20	0	10	36	194	196	109	0	0	16	627
March												
April												
May												
June												
July												
August												
September												
October												
November												
December												
	46	**20**	**0**	**10**	**35**	**191**	**190**	**107**	**0**	**0**	**17**	**616**

2018 KIDS IN OUT OF HOME PLACEMENT - BY COUNTY

	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	YTD Average	2017 Average
Lincoln	6	7											7	7
Lyon	46	44											45	38
Murray	11	14											13	10
Pipestone	15	15											15	19
Redwood	96	92											94	95
Rock	14	16											15	16
Monthly Totals	188	188	0	0	0	0	0	0	0	0	0	0		



	Foster home: 105	Foster home - corporate: 9	Group Home: 7	Residential treatment center: 7	Supervised independent living: 9	Pre-adoptive home: 13	Juvenile correctional facility (non-secure): 1	Non-custodial parent's home: 0	Child's reunification home: 13	Other: Pre-kinship home: 12	Probation Placement: 12
Month %	55.9%	4.8%	3.7%	3.7%	4.8%	6.9%	0.5%	0.0%	6.9%	6.4%	6.4%
Yearly Avg	54.5%	4.8%	3.5%	3.5%	5.1%	6.6%	0.5%	0.0%	7.7%	7.4%	6.4%

February 2018: Total kids in placement = 188

Total of 12 Children entered placement

1	Lincoln	Probation
1	Lyon	Foster Home
3	Murray	Foster Home
5	Redwood	Foster Home
2	Rock	Foster Home

Total of 12 Children were discharged from placement (discharges from previous month)

2	Lyon	Adopted
1	Lyon	Supervised Independent Living
5	Redwood	Pre-Kinship Home
3	Redwood	Foster Home
1	Redwood	Child's Reunification Home

NON IVD COLLECTIONS

FEBRUARY 2018

PROGRAM		ACCOUNT	TOTAL
MSA/GRH		05-420-605.5802	3,355
TANF (MFIP/DWP/AFDC)		05-420-610.5803	1,375
GA		05-420-620.5803	112
FS		05-420-630.5803	424
CS	(PI Fee, App Fee, etc)	05-420-640.5501	205
MA	Recoveries & Estate Collections (25% retained by agency)	05-420-650.5803	36,600
REFUGEE		05-420-680.5803	0
CHILDRENS			
	Court Visitor Fee	05-431-700.5514	0
	Parental Fees, Holds	05-431-710.5501	1,836
	OOH/FC Recovery	05-431-710.5803	28,088
CHILDCARE			
	Licensing	05-431-720.5502	650
	Corp FC Licensing	05-431-710.5505	1,600
	Over Payments	05-431-721&722.5803	914
CHEMICAL DEPENDENCY			
	CD Assessments	05-431-730.5519	8,761
	Detox Fees	05-431-730.5520	5,286
	Over Payments	05-431-730.5803	0
MENTAL HEALTH			
	Insurance Copay	05-431-740.5803	3
	Over Payments	05-431-741 or 742.5803	9,270
DEVELOPMENTAL DISABILITIES			
	Insurance Copay/Overpayments	05-431-750.5803	0
ADULT			
	Court Visitor Fee	05-431-760.5803	0
	Insurance Copay/Overpayments	05-431-760.5803	0

TOTAL NON-IVD COLLECTIONS **98,479**

SOUTHWEST
HEALTH & HUMAN
SERVICES

2018 Public Health Statistics

	WIC	Family Home Visiting	PCA Assessments	Managed Care	Dental Varnish	Refugee Health	Latent TB/DOT Medication Distribution
'12 Avg	1857	48	15	187	81		
'13 Avg	2302	37	21	211	90		
'14 Avg	2228	60	25	225	112	6	30
'15 Avg	2259	86	23	238	112	12	36
'16 Avg	2313	52	22	265	97	12	27
'17 Avg	2217	47	22	290	56	9	25

	WIC	Family Home Visiting	MnChoices PCA Assessments	Managed Care	Dental Varnish	Refugee Health	LTBI Medication Distribution	Water Tests	FPL Inspections	Immunizations	Car Seats
12/17	2187	52	16	283	24	7	18	n/a	n/a	n/a	n/a
1/18	2207	44	21	347	46	5	17	106	45	56	22
2/18		42	20	308	6	7	15	96	46	70	13
3/18											
4/18											
5/18											
6/18											
7/18											
8/18											
9/18											
10/18											
11/18											
12/18											

SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 26

EFFECTIVE DATE: 05/16/12
REVISION DATE: 06/17/15; 11/16/16, 3/21~~???~~/2018
AUTHORITY: Southwest Health and Human Services – Human Services Board
MN Statute 260B.331/MN Statute 260C.331
MN Statute 252.27
MN Rules Parts 9550.6200 to 9550.6240

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--- FEES: 24-HOUR OUT-OF-HOME CARE ---
--- COLLECTION AND WAIVE OR REDUCE FEES ---

Section 1 - Purpose

a. This policy governs the assessment and collection of fees from children and parents/guardians of children in 24-hour out-of-home care. ~~A child is defined as an individual under the age of 18.~~

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Section 2 - Dependent/neglected children or delinquent youth with no long-term disability

a. <u>Income Determination</u>

- The out-of-home placement fee shall be based on the net income of either birth or adoptive parents (if child is not on adoption subsidy) as well as the child's monthly net income. Net income shall be determined by the Income Maintenance Unit using the income computation section of form Elig #102.

- When it is determined that a fee is needed, the minimum fee charged shall be $10.00 per month. No fee shall be imposed when computations result in a net fee less than this amount.

- Removal homes receiving MFIP, GA, or MSA will not be charged a fee. A child's SSI payment is considered monthly income. Those removal homes receiving only Food Support or MA will be charged a fee based on income.

- Fees are in addition to insurance collections; however, the insurance coverage, the child fee, and the parent/guardian fee combined cannot exceed the total cost that Southwest Health and Human Services (SWHHS) incurs for placement.

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- The payment of fees does not exclude the parent's/guardian's responsibility for medical coverage of the child.

- All fees shall begin on the date of placement. The placing worker shall refer to the Placement Checklist for additional steps related to the referring of the case for fee determination.

- Wage verification is requested from the removal home parent(s) and if not provided, the agency will charge the family the total cost of placement for the child. Also, the family will be notified that the agency will not go back more than 90 days to reassess a parental fee when information is not provided in a timely manner as requested.

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b. Children under Adoption Assistance

- For children receiving Northstar or Adoption Assistance, no parental fee based on the parental income will be charged. If during placement the adoptive family continues to receive the Adoption Assistance. SWHHS will charge the family the total amount of Adoption Assistance which is being received. Any reductions from the Adoption Assistance for personal needs must be approved by the social worker.

c. The Child's or Dependent Adult's Fee

- The child's fee is the full amount of his/her unearned income, such as social security, SSI, trusts, investments, veteran's benefits, child support, insurance, adoption subsidy, etc. Parents/guardians will be responsible for forwarding these benefits to SWHHS, even if DHS determines the fee. If the above payments are not kept current, then redirection to SWHHS will be required. When the child turns 18 and is still in placement, that dependent adult's fee continues to be the full amount of his/her unearned income. An 18 year-old in placement needs to meet the MFIP definition of a dependent child for the out-of-home placement fee to continue. For dependent adults, a 30 day break in placement will result in the ending of the parental fee.

d. The Custodial Parent's Fee (in addition to any child fee)

- The custodial parental/removal home's fee shall be determined using the SWHHS Procedures for Determining Parent Fees for Out-of-Home Placements of Juveniles. (Procedure #39)

SOUTHWEST HEALTH AND HUMAN SERVICES
SOCIAL SERVICE POLICY NUMBER 26

PARENTAL FEE TABLE

	Number of Children in the Home						
Monthly Net Income	1	2	3	4	5	6	7
$550 and below	---	---	No	Fee	---	---	---
$551 to $600	16%	19%	22%	25%	28%	30%	32%
$601 to $650	17%	21%	24%	27%	29%	32%	34%
$651 to $700	18%	22%	25%	28%	31%	34%	36%
$701 to $750	19%	23%	27%	30%	33%	36%	38%
$751 to $800	20%	24%	28%	31%	35%	38%	40%
$801 to $850	21%	25%	29%	33%	36%	40%	42%
$851 to $900	22%	27%	31%	34%	38%	41%	44%
$901 to $950	23%	28%	32%	36%	40%	43%	46%
$951 to $1000	24%	29%	34%	38%	41%	45%	48%
$1001 to $5000	25%	30%	35%	39%	43%	47%	50%

~~*The parent/guardian will be notified in writing of the fee. If non-cooperative a full fee will be charged and the family will be notified of such. After 90 days, SWHHS will not go back retroactive to re-determine a fee.~~

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e. The Non-Custodial Parent's Fee

- The amount of child support assigned to the non-custodial parent shall be the non-custodial parent's fee when the child is in an out-of-home placement. If it is determined that the non-custodial parent's assigned child support does not follow Minnesota State Statute Chapter 518A and the custodial parent is receiving public assistance, the case may be referred to the Child Support Enforcement Unit for modification of child support. It is the custodial parent's responsibility to see that the child support payments are passed through to SWHHS.

- When the child(ren) did not live with a parent during the eligibility month or at any time during the six months previous to the eligibility month, do not determine a parental fee against either parent. In these circumstances child support will be established for each parent.

f. Placements Under 72 Hour Holds

- When a child is placed on a 72 hour hold in a hospital setting the cost of such hold shall be billed to the parent's/guardian's medical insurance whenever possible. If there is no insurance or medical assistance, the family should apply for medical assistance. If there is no insurance or medical assistance, the family will be billed for 100% of the cost of the care. The family can appeal to have their fee reduced.

- When the ~~placement, (~~hold ~~or voluntary)~~ ~~is in~~ involves a shelter, foster care home, or juvenile detention center, SWHHS shall pay for placement costs and bill the parents/guardian 100% of the cost of care ~~at a minimum of $25.00 per day~~. The fee will be waived for removal homes on MFIP, GA, SSI, or MSA and families have the right to appeal the fee.~~.~~

- When a child remains in placement in foster care after a 72 hour hold and~~/or~~ has a placement under 30 days, there will be a ~~minimum~~ charge of $10 a day for up to 30 days plus the full 72 hour cost of care. ~~(including the 72 hour hold days)~~.

- When a child remains in placement such as shelter care, group home, correctional facilty, residential treatment, or crisis stabilization, after a 72 hour hold and/or has a placmenet under 30 days, there will be a charge of $25 per day up to 30 days.

- After placement for 30 days, a parental fee will be determined based on the Procedures for Determining Parental Fees for Out of Home Placement of Juveniles. (Procedure #39)

g. Voluntary Placement for Crisis Stabilization

- *If a family voluntarily places a child for crisis stabilization, the family will be assessed a fee of 100% of the cost of care. The family can request that the fee be reduced.

h. Hardship

- The parents/guardians have the option of paying a minimum of 50% of the assessed monthly fee on an extended term, if it can be demonstrated that the fee would create a hardship for the family.

- SWHHS has the authority to waive fees for social services. If a client requests a reconsideration, the Eligibility Worker or Social Worker shall obtain a written request from the client with the reason for the waiver request, including household expenses and why the fees pose a hardship. The assigned Social Worker shall convene the Fee Review Committee, which shall be comprised of that worker's direct supervisor, the

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involved Eligibility Worker, that worker's direct supervisor, Collections Officer, that worker's direct supervisor, and the Social Service Division Director. The panel shall review the written request and other collateral information possessed by the Social Worker and Eligibility Worker. The panel shall issue a finding on the client's request and the Social Services Supervisor will notify the client in writing, with a copy to the Collections Officer. The record of this meeting shall be placed in the Income Maintenance case record and Social Services case record. The client may appeal the panel's findings to the DHS Appeals Office, or, if the fee is for the placement of a child under a CHIPS, the client may appeal to the court of jurisdiction. If a client is allowed a hardship waiver, the waiver shall be reviewed annually.

~~h~~~~H~~i. Respite Care (private pay or care provided outside of a CP/CW need or risk)

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- When a child is placed in 24-hour out-of-home respite care, the parent/guardian fee will be the monthly cost divided by 30 and multiplied by the number of days per month the child is in care. Any part of a day will be counted as a full day. Income will be determined based on the declared income and expenses as set out by SWHHS. No expenses are to be used to reduce the fee.

~~i~~. Parental Fee Reviews

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- The parental/guardian fee amount must be reviewed at least every 12 months; when there is a change in household size; and when there is a change in income from one month to another in excess of ten percent. ~~This amount may be retroactive if the parent/guardian does not report the income change within 10 days.~~

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- SWHHS shall mail a written notice 30 days in advance of the effective date of a change in the parental/guardian fee amount. A reduction in the parental/guardian fee amount is effective in the month that the parent/guardian verifies a reduction in income or change in household size.

Section 3 - Children who are receiving other case management services through SWHHS who require out of home placement

a. Referrals to DHS for Parental Fee

- DHS collects parental fees for children with certain types of MA eligibility or living arrangements. Refer cases to DHS for children who are eligible for MA and meet any of the following:
  - o Eligible through the TEFRA option.

- o Children who receive services under one or more of the following waiver programs:
  - ➢ Community Alternatives for Chronically Ill Individuals (CAC).
  - ➢ Community Alternatives for Disabled Individuals (CADI).
  - ➢ Developmental Disabilities (DD).
  - ➢ Brain Injury (BI).
- o Are in 24-hour out-of-home placement: ICF/DDs and Rule 5 facilities.

b. Procedure

- Notify parents that their liability for parental fees begin the first full month in which MA is effective or waiver services are received. ~~*This may be correct if it is just referring to the DHS fees??*~~
- Give them a copy of the *Important Notice and Parental Fee Worksheet* (DHS-2977). Note: Parents may be liable for fees through the month of the child's 18th birthday.
- MMIS must be updated in order for the State to bill and collect a parental fee. Update RLVA as follows:
  - o For DD, CAC and CADI waivers - the 'U' code should be ended with a date of the day before services are needed. The SWKR provides the *Request for Payment of Long Term Care Services* (DHS 3543A) before the 'U' code can be changed.
  - o RULE 5 - end the 'Living Arrangement' code '80' the day of placement and enter a new span with the same date. The 'Living Arrangement' code will be '54' then enter the corresponding NPI number of the facility in the 'Out of Home' column. This code is provided by the SWKR.
  - o Submit a completed *County Parental Fee Referral* form to DHS (DHS-2982).

Section 4 - Collections

a. After the case has been referred to the~~opened by~~ Ceollections Officer, ~~the accounting unit will begin~~ the parent/guardian will be ~~billing the responsible payer~~billed on a monthly basis through the Agency's Collections System.

b. ~~The Collections Officer will review a monthly printout from the County Collection System (CCS) which will show the status of the payer's account. If the payer is delinquent 60 or more days, the Collections Officer will contact the Social Worker in an effort to determine the reason for non-payment.~~If an account is over 90 days delinquent, with no agreed upon payment plan, the Collections Officer may initiate additional collection efforts.
~~non-payment.~~

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c. ~~If the Social Worker is unaware of a reason for non-payment, the Collections Officer will proceed with appropriate collection efforts. If the collection efforts are unsuccessful and the case is open and the service is not mandatory, the Social Worker will notify the parents/guardians in writing that the case is being closed within 15 days. If the service is mandatory without regard to income, i.e., child and/or adult protection, the Social Worker should discuss requesting that the fee be waived or reduced with the unit supervisor. *Angie, what are you proposing here? You commented you aren't doing this because the case closes*~~Quarterly Parental Fee Meetings are held with all key stakeholders within the agency and a review of accounts is completed to confirm billing amount, delinquency and other necessary details surrounding the billing of fees.~~?~~

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~~d. At no time should a case remain on the Agency's Collections System that is over 60 days delinquent without the Collections Officer and the Social Worker initiating some action; both will communicate about strategies and next steps. *Angie, what would you like to say here? Or you just want it removed?*~~

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~~e. Collections Officer will proceed with additional collection efforts for all delinquent accounts. *Angie, is this what you want it to say?*~~

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df. When a family receiving Adoption Assistance fails to transfer the Adoption Assistance to SWHHS, the agency will contact the Minnesota Department of Human Services Adoption Assistance Unit for further assistance for collection.

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Agency Forms Regarding This Policy:
IM#102 – Foster Care Fee Calc-Parental Fee Determination: Children in Out-of-Home Placement

Procedure for Determining parental Fees for out of Home Placement of Juveniles

SOUTHWEST
HEALTH & HUMAN
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Family Home Visiting Grant – Family Connects

In February 2018, SWHHS submitted a nearly 5-year Family Home Visiting Implementation Start-up grant proposal in partnership with Kandiyohi-Renville CHB, Horizon Public Health and Meeker-McLeod-Sibley CHB. This grant is for starting and implementing the evidence-based family home visiting model, Family Connects within the 16 counties. The Family Connects model focuses on newborn infants, families, and communities to reduce child maltreatment, improve the quality and safety of the home environment, and increase family connections in the community. Rigorous evaluation of the model has demonstrated improvement in community-wide outcomes for families. The overall goal of this proposal is to implement and sustain a community-wide nurse home visiting program, providing resources for families of newborns across 16 Counties in Minnesota.

Our Objectives:

- Complete the Family Connects implementation timeline and become a certified provider for the Family Connects model by January 31, 2020.
- Complete nurse home visits in at least 60% of homes with newborns by June 30, 2021.
- Build internal capacity to provide Reflective Practice within home visiting programs by December 31, 2021.

The Family Connects model is based on the assumption that all families with newborns are vulnerable. Family Connects is a universal program serving families regardless of their income or status. This removes the stigma that often accompanies this type of program or service. This level of prevention will also aide in earlier identification of the need for more intensive, targeted services. With collaboration between Public Health, Healthcare Systems and other community services, we are hopeful that this program will become an automatic part of the services provided for all families.

SWHHS, in the year 2016 had approximately 980 births. Through community and healthcare outreach and education, we anticipate increasing the number of families served each year. In year one, our goal is to reach 20% of families with newborns, and by the third year, the goal is 60%. We will specifically focus on collaborating with delivering hospitals and clinics, but will also provide additional community group presentations. Our community outreach efforts will lead to more positive community norms around postpartum care in our region.

SWHHS included a total grant budget of $1,165,737 ($354,513 year 1). This would start May 1, 2018 and conclude December 31, 2022. Our budgeted amount includes time for nurse family home visitors (2 PHNs), supervision, evaluation, accounting and reflective supervision. We will be following the strict implementation guidelines, seeking training and technical assistance from Family Connects. In addition, once we are a certified evidence based model we will be able to capture the higher reimbursement rate from Medical Assistance. We have included budgeted revenue in our proposal. The grant proposal is budget neutral from day 1.

This is an exciting time in the world of family home visiting and an incredible opportunity for SWHHS to collaborate with other CHBs, our Healthcare systems, families and additional community partners. We are excited to be able to deliver this evidence based home visiting program to our area. We look forward to realizing the proven return on investment to our communities through improved family outcomes.

DEPARTMENT OF HUMAN SERVICES

COPY

Minnesota Department of Human Services
Elmer L. Andersen Building
Commissioner Emily Piper
Post Office Box 64998
St. Paul, Minnesota 55164-0998

February 23, 2018

Mr. Gerald Magnus
Chair, South West Health & Human Services County Board of Commissioners
3001 Maple Road
Slayton, MN 56172

Re: Calendar year 2017 financial reporting

Dear Commissioner Magnus:

It is my pleasure to commend you and your staff for perfect performance in meeting the Department of Human Services (DHS) financial reporting requirements for calendar year 2017. All key quarterly fiscal reports for programs your county participates in were submitted to our Financial Operations Division on or before the report deadlines and in perfect order. This effort required submission of 32 major reports covering the four calendar quarters of 2017. These reports are:

Local Collaborative Time Study (LCTS)*	Income Maintenance Expense
MFIP Consolidated Fund	Social Service Fund
Client Statistics	Title IV-E
SEAGR	BRASS-Based Grant Fiscal Report

*If your county participates in a "local collaborative," submission of this report may require the collection of multiple local partner reports for consolidated submission to DHS.

I know this accomplishment requires planning, an efficient operation, and teamwork within your county Human Services Department. The result is timely revenue for your county and compliance with federal reporting for us at the State. Please congratulate your management and staff on this superb effort.

Sincerely,

Emily Piper

Emily Piper
Commissioner

Cc: Beth Wilms, South West Health & Human Services County Director

MARCH 2018

GRANTS ~ AGREEMENTS ~ CONTRACTS

for Board review and approval

- ☐ **Prairie Support Services (Walnut Grove, MN)** – 01/01/18 to 12/31/18; client guardianship services, $20/hour plus mileage (no increase) (renewal).
Fiscal Note: 2017 - $8,848.80

- ☐ **Service Enterprises Inc (Redwood Falls, MN) -** 01/01/18 – 12/31/18; Paper shredding services, $.43/pound and pickup (no increase) (renewal).
Fiscal Note: 2017 - $9,741.04

- ☐ **Service Enterprises Inc (Redwood & Marshall locations) –** 01/01/18 to 12/31/18; provide extended employment services for clients, Tier I clients $122.27/mo and Tier II clients $21.76/day for actual days worked (no increase) (renewal).
Fiscal Note: 2017 - $23,771.24

- ☐ **Service Enterprises Inc (Redwood, MN)** – 01/01/18 to 12/31/18; provide DT&H services for non-waivered clients, daily rate $57.86, partial day $44.19, and transportation $3.21 (6% increase) (renewal).
Fiscal Note: 2017 - $37,697.38

- ☐ **William Toulouse, Quarnstrom & Doering PA (Marshall, MN)** - 01/01/18 – 12/31/18; Legal services, $2,400/month or $28,800 annually (no increase) (renewal).
Fiscal Note: 2017 – $28,800