

Human Services budget focuses on immediate priorities

Overview

The Governor's supplemental FY 2024-25 budget addresses issues that can't wait until the 2025 session. One focus is improving options for people with complex needs who now spend long stretches in hospital emergency departments because there aren't enough appropriate care settings where they can go. Another is expanding treatment capacity where it's most needed in DHS-operated psychiatric hospitals over the next six to 12 months.

The budget includes the first phase of a Medicaid demonstration project to improve outcomes for people transitioning out of prisons and jails, when they face the highest risk of drug overdoses. It will ensure continued resources to respond to the opioid crisis and its impact on the child welfare system, and fund technology improvements aimed at reducing burnout and high turnover among child welfare workers. A small investment will draw federal funds to reduce childhood hunger for the families of school-age children during the summer.

Proposals

Removing systemic barriers for people with complex support needs in hospitals

Multiple recommendations in the Governor's budget will address systemic barriers that keep people with disabilities and complex support needs in hospitals, including in emergency departments. With the current acute-care backlog affecting both the acute and long-term care systems, the proposal will improve outcomes for children and adults who are stuck in hospitals and not getting the care they need to live and thrive at home or in their communities.

Reducing recidivism and preventing overdoses for people leaving incarceration

Transformative strategies will help Minnesotans reenter the community successfully after incarceration. The first phase of a Medicaid demonstration project will provide physical and behavioral health services to people in the 90 days before their release. Services will include assessments and treatment for substance use disorder and mental health conditions. Ongoing funding will support the successful Bridging Benefits project, which helps people at high risk of recidivism access supports when they are released from incarceration.

Ensuring continued resources to address the impact of opioids on the child welfare system

Minnesota will update the way it distributes child welfare funding from fees paid by opioid manufacturers and distributors, making funding available to cover prevention efforts that help families before they're involved in the child welfare system. The proposal will also eliminate the sunset on opioid fees, ensuring that efforts to address the opioid crisis will continue to mitigate the harmful impact of opioids on Minnesota's people and communities.

Supporting child welfare workers with system modernization

Critical work to transform outdated information technology systems will occur with a proposal to begin modernizing the Social Services Information System, or SSIS. The current system has problems with performance and stability, leading to high turnover among child welfare workers who use SSIS to track and manage casework. The upgrades will give workers more time to spend with children and families, helping ensure they get the support they need from the child welfare system.

Preparing comprehensively and carefully for a public health insurance option

The proposal continues to lay the groundwork for a MinnesotaCare public health insurance option, with resources for more planning, actuarial analyses and community engagement. Many Minnesotans still lack access to affordable health care, with an estimated 294,000 people lacking health insurance. State residents also have the nation's highest out-of-pocket health care costs.

Expanding treatment capacity and improving access to Direct Care and Treatment facilities

Immediate steps will add treatment capacity where most needed and increase admissions to DHS-operated psychiatric hospitals. The proposal will add 16 beds to the Forensic Mental Health Program in St. Peter, in turn freeing space for dozens more admissions at Anoka-Metro Regional Treatment Center each year. Increased funding will allow the Child and Adolescent Behavioral Health Hospital in Willmar to operate at its full 16-bed capacity. The plan includes repurposing a substance use disorder program and suspending services at another.

Improving child care licensing standards through a weighted risk system

A weighted risk system for licensed child care settings will prioritize resources for child care providers who most need technical assistance and support, while improving licensing consistency statewide. Developed through extensive engagement with child care providers, the new, quantifiable standard will replace the "Fix-it Ticket" system. Each licensing regulation will be weighted based on the level of risk a violation poses to children in care.

Increasing the state's ability to meet emergency needs

A new Human Services Response Fund will offer support to people and communities during emergencies. Building on lessons learned from the COVID-19 pandemic, the fund will enable the Commissioner of Human Services to respond to emergencies in a flexible and timely manner.

Reducing childhood hunger during the summer

Ongoing funding for state administrative costs will help the families of 400,000 Minnesota children buy food, starting this summer. The new federal Summer Electronic Benefit Transfer program, or Summer EBT, provides \$120 per eligible child for low-income families with school-aged children during the summer. Benefits come on pre-loaded cards that families can use to purchase groceries. The federal government covers 100% of the benefits and 50% of the state's administrative costs, shared by the Minnesota Department of Education and DHS. The DHS portion of Summer EBT will move to the new Department of Children, Youth, and Families.

For More Information

DHS Budget Pages: [2024 Supplemental Budget Book \(PDF\)](#)
2024 Governor's Supplemental Budget Recommendations: [Human Services \(PDF\)](#)