



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Community Corrections

Budget Committee of the Whole Meeting Date: 09/18/2023

Question: Request - budget and cost increases for out of home placement costs. What is the break-even number?

Answer: The budget impact of out of home placements has increased steadily since mid-2022. When we look at the attached spreadsheet, we see that 3 things have happened, The average number of days in placement has increased, the average number of youth in placement has increased and the average daily per diem rate has increased. The budget is \$2,530,000 in both 2024 and 2025, and the average daily budget will be \$6,932 per day.

In theory a break-even point for 24/25 would be approximately no more than 23 youth in placement on any given day. Placements are ordered by the court and are dynamic based on the seriousness of the offense and available treatment options. Community corrections is committed to more community and less confinement, but our mission is public safety and one factor that is considered when ordering placement is the risk the youth present to the community.



Placements
Projections thru Jul23

**"High" Projection of Placement Costs - Includes Actual Costs
through July 2023 service cycle projected thru YE2023
with Two Year History from 2021-2022**

2021

Month	Amount Paid	# of clients	Average # of Clients	# of days	Average daily rate	Budget		Annual Budget	Ave Daily Budget
Jan	137,972	24	19	589	234	209,311	31	\$2,464,464	\$6,752
Feb	117,340	20	18	494	238	189,055	28		
Mar	147,768	25	20	635	233	209,311	31		
Apr	129,785	25	20	597	217	202,559	30		
May	126,047	23	19	596	211	209,311	31		
Jun	124,482	21	18	549	227	202,559	30		
Jul	147,805	21	20	624	237	209,311	31		
Aug	133,930	20	19	578	232	209,311	31		
Sep	121,298	23	17	503	241	202,559	30	Budget	
Oct	160,295	22	20	626	256	209,311	31	Savings (Deficit)	
Nov	138,819	21	18	526	264	202,559	30	for Year	
Dec	118,265	22	18	546	217	209,311	31	\$860,658	
Total/Avg	1,603,806	22	19	572	234	2,464,464			

2022

Month	Amount Paid	# of clients	Average # of Clients	# of days	Average daily rate	Budget		Annual Budget	Ave Daily Budget
Jan	162,759	22	20	608	268	186,772	31	\$ 2,199,091	\$6,025
Feb	187,466	25	23	642	292	168,697	29		
Mar	219,824	27	25	763	288	186,772	31		
Apr	186,380	25	22	649	287	180,747	30		
May	204,420	26	23	724	282	186,772	31		
Jun	183,649	27	22	671	274	180,747	30		
Jul	195,215	26	22	672	290	186,772	31		
Aug	176,072	28	21	649	271	186,772	31		
Sep	215,353	34	25	751	287	180,747	30	Budget	
Oct	208,718	31	27	841	248	186,772	31	Savings (Deficit)	
Nov	250,823	31	27	819	306	180,747	30	for Year	
Dec	282,969	37	30	935	303	186,772	31	(\$274,559)	
Total/Avg	2,473,650	28	24	727	283	2,199,091			

2023

Month	Amount Paid	# of clients	Average # of Clients	# of days	Average daily rate	Budget		Annual Budget	Ave Daily Budget
Jan	333,571	36	33	1,029	324	186,772	31	\$2,199,091	\$6,025
Feb	260,948	39	31	874	299	168,697	28		
Mar	298,611	38	32	984	303	186,772	31		
Apr	261,960	33	28	847	309	180,747	30		
May	268,583	33	28	878	306	186,772	31		
Jun	239,528	34	28	833	288	180,747	30		
Jul	210,913	27	23	704	300	186,772	31		
Aug	271,498	N/A	29	N/A	302	186,772	31		
Sep	262,740	N/A	29	N/A	302	180,747	30	Projected Budget	
Oct	271,498	N/A	29	N/A	302	186,772	31	Savings (Deficit)	
Nov	262,740	N/A	29	N/A	302	180,747	30	for Year	
Dec	271,498	N/A	29	N/A	302	186,772	31	(\$1,014,998)	
Total/Avg	3,214,089	34	29	878	303	2,199,091			

- Projection based on an average number of clients of 29 for the rest of the year at an average rate of \$302 per day.

- The avg number of clients and average daily rate are based on those figures during June 2023 plus an inflator of 1 in the average number of clients and 2 in the average daily rate to reach a conservative estimate. In combination with the Low Projection, these two estimates give an estimated range for projected results.



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Health and Wellness Administration

Budget Committee of the Whole Meeting Date: 09/18/2023

Question: Systems Modernization: How does funding come from DHS to modernize systems, does RC get any money from DHS to improve technology? Does it benefit RC?

Answer: The state legislation for DHS modernization, or transformation as it is now called, does not provide any direct funding for counties. We do anticipate benefits to counties as DHS and MN-ITS will be redesigning many of the databases and systems we are required to use.

There are many potential benefits to counties.

Improving METS functionality. METS is the system for most Medical Assistance eligibility. Reduced manual data entry, increased accuracy and timeliness of Medical Assistance applications, and the ability for residents to apply, renew, and make other changes online.

Medicaid Management Information System upgrades. MMIS handles Medical Assistance claims, billing, and provider information. Among other upgrades that will impact residents and medical providers, the biggest benefit to counties will be fewer billing mistakes resulting in fewer resident phone calls.

Childcare provider licensing and reporting. Electronic and online licensing that childcare providers can access will eliminate manual, paper-based processes.

Integrated services for children and families. This mainly impacts the Social Services Information System (SSIS) that is used by child protection, adult protection, aging and disability, and mental health case management. Potential benefits include decreased downtime (this happens several times a week currently), client portals resulting in less data entry, and elimination of many duplicative data fields. The legislation requires county collaboration and we have already been engaged in this area.

Electronic health records for direct care and treatment. This will have very little, if any, county benefit as this is regarding state operated mental health hospitals and the Sex Offender Treatment Program.

Service delivery transformation. This project is more of a planning project to assess how to create a more integrated, person-centered system approach. It has a lot of potential benefit but is in the planning and requirements gathering stage. We have been involved in this work through the Minnesota Association of County Social Services Administrators (MACSSA).



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

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Budget Committee of the Whole Meeting Date: 09/18/2023

Question: Systems Modernization: How is DHS spending/funding for state system improvements?

Answer: The most recent information on the project lists these elements:

- Improving METS functionality,
- Medicaid Management Information System upgrades,
- Childcare provider licensing and reporting,
- Integrated services for children and families,
- Electronic health records for direct care and treatment, and
- Service delivery transformation.

DHS and MN-ITS are in the planning stages and share information via their [website](#).

Question: Systems Modernization: Need more advocacy from Commissioners on technology modernization at DHS since the State runs these systems.

Answer: Yes, working through AMC and lobbying efforts can help ensure DHS stays on track and collaboratively works with counties. Counties will continue to have our own technology needs as our work is broader than just DHS services and there is space to lobby for more funding in that area.

Question: Systems Modernization: How do we make sure RC and the State are syncing systems as the systems are modernized?

Answer: Modernization Team members are not only attending Minnesota Association of County Social Services Administrators (MACSSA) and Minnesota County Computer Cooperative (MnCCC) meetings, and we have proposed white papers that have been adopted as official position papers for MACSSA. We are meeting with MN-ITS leadership directly, as well as have developed partnerships with Olmsted, Saint Louis, and Hennepin Counties to drive this work. We cannot guarantee the state will adopt our recommendations, but they are being seriously considered and we continue to propose solutions in line with our and other counties' needs.



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Health and Wellness Administration

Budget Committee of the Whole Meeting Date: 09/18/2023

Question: Systems Modernization: Request for board workshop on system modernization. Cover where we are at, where we need to go, and how RC system interacts with the state.

Answer: We will get this scheduled for February or March 2024.



RAMSEY COUNTY

2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Public Health

Budget Committee of the Whole Meeting Date: 09/18/2023

Question: Legislative Funding Summary Updates - Confirm the following are new or ongoing funding:

Answer: Please see attachment for additional information on new Public Health funds appropriated by the MN Legislature in 2023. Specific opportunities to access funding and allocation formulas for these have not yet been determined.

- Public Health System Transformation Grant - New
- Emergency Preparedness alignment with CDC capabilities – New
- Home Visiting to priority populations – New
- Healthy Beginnings for developmental and social-emotional screening – New
- Local Cannabis Education Funding - New and this is for Local Public Health and is separate from the revenue that comes from the State.



CHB_Leg_Funding_Overview_Table_2023.pdf

Question: Will send more information about the National Framework for Governmental Public Health Responsibilities adopted by Mn Dept. of Health and Saint Paul – Ramsey County Public Health.

Answer: In mid-2023, the Joint Leadership Team for Public Health System Transformation in Minnesota chose to adopt the national framework, shifting away from a Minnesota-specific framework. The Joint Leadership Team represents, in partnership, the Local Public Health Association of Minnesota (LPHA), the State Community Health Services Advisory Committee (SCHSAC), and the Minnesota Department of Health (MDH). More information can be found at:

<https://www.health.state.mn.us/communities/practice/systemtransformation/foundationalresponsibilities.html>

This framework was adopted to align with national efforts to transform the public health system, and to build on the work others are doing across the nation. It helps us to “speak the same language” as others doing this work, to better use national resources, and anticipate and respond to future national changes.

The newest national framework, shown below, more closely reflects Minnesota’s own work in a way previous versions had not, and now embeds equity in all areas and capabilities. It also elevates maternal, child, and family health, and chronic disease and injury prevention, previously embedded in “prevention and population health improvement” in the Minnesota-specific framework.

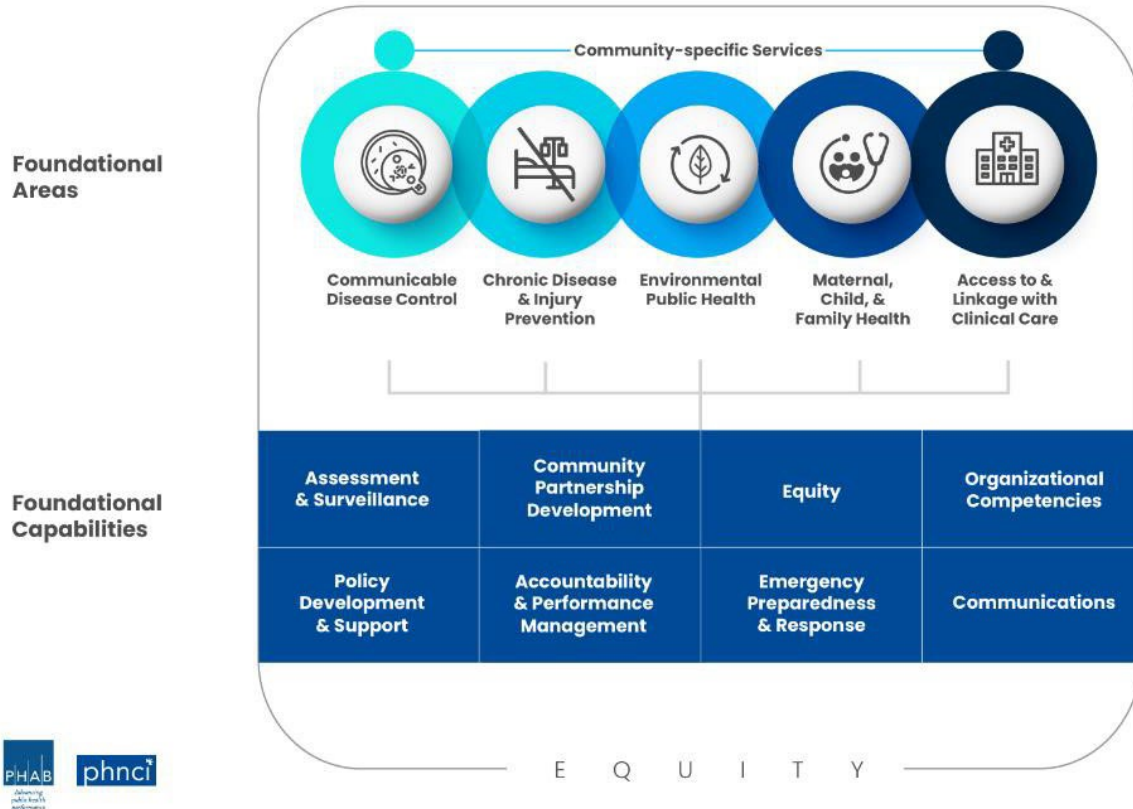
This shift to a new framework does not negate any work to date. Work continues to move forward with minimal changes, to assess what is and isn’t working well, testing new ways of doing business, and identifying change strategies. The Minnesota framework and national framework are arranged slightly

Service Team: Health and Wellness

Department: Public Health

Budget Committee of the Whole Meeting Date: 09/18/2023

differently, but the principles and elements remain the same.



Question: Finance: RBA for Lab and Drug Fee Schedule.

Answer: Fees for medications and laboratory supplies for client services in Public Health are primarily set based on the cost of these supplies and materials from outside vendors. External vendors may increase costs at any point throughout the year. When the cost of these items increases, we want to increase our fee accordingly, so that we can capture the highest reimbursement possible from insurance payers.

Additionally, when a new drug or lab test becomes available that would be beneficial for patient care, we are able to start using the new items, but are not able to bill for them until the fee is approved by the Board. Because new fees and the cost increases do not align with approval of the annual Ramsey County fee schedule, we need to obtain approval to change our fees periodically throughout the year. Currently, we submit an RBA for approval of fee changes as needed. Delays in approval of new or increased fees



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Public Health

Budget Committee of the Whole Meeting Date: 09/18/2023

through this process results in a loss of revenue. We will work with Finance to bring forth an RBA later this year which will authorize the County Manager to approve new and changed Public Health fees on an interim basis. The fees would then be approved by the Board later.

Legislative Funding Overview for Community Health Boards (2023)

Grant	Purpose	Funding Amount	Funding Formula	Timeline	References
Public Health System Transformation Grants	Funding to fulfill foundational public health responsibilities as defined by the commissioner in consultation with SCHSAC.	\$9,844,000 for CHBs, \$535,000 for Tribes	Per statute, the funding for foundational public health responsibilities must be distributed based on a formula determined by the commissioner in consultation with SCHSAC.	A new SCHSAC Foundational Public Health Responsibilities Funding Workgroup will be established this summer to determine the formula and reporting mechanisms for these funds. The workgroup's charge is to make decisions by early fall so CHBs can use the information to inform their 2024 budget planning.	Health and Human Services Omnibus Bill SF 2992 Statutory language: Line 238.1 to 239.26 Appropriation language: Line 812.19
Local And Tribal Public Health Emergency Preparedness and Response Grant Program	Local and Tribal public health emergency preparedness and response grant program that aligns with the CDC Public Health Preparedness Capabilities, as outlined in the <i>Public Health Emergency Preparedness and Response Capabilities: National Standards for State, Local, Tribal, and Territorial Public Health</i> publication.	\$8,400,000 for CHBs and Tribes	Per statute, the commissioner must distribute funding based on a formula determined by the commissioner, in consultation with the SCHSAC.	The SCHSAC PHEP Oversight Workgroup will make recommendations on the formula and reporting for these funds. It is anticipated the new funding will be distributed to CHBs in late 2023.	Health and Human Services Omnibus Bill SF 2992 Statutory language: Line 239.27-240.12 Appropriation language: Line 810.26
Home Visiting	For home visiting under Minn. Stat. § 145.87, to provide home visiting to priority populations under Minn. Stat. § 145.87, subdivision 1, paragraph (e). References promising practices.	\$1,800,000	Most likely noncompetitive for current grantees (CHBs, Tribes, nonprofits)	To be determined.	Health and Human Services Omnibus Bill SF 2992 Statutory language: Minnesota Stat. §, subdivision 1, paragraph (e) Appropriation language: Line 811.25

LEGISLATIVE FUNDING OVERVIEW FOR COMMUNITY HEALTH BOARDS (2023)

Grant	Purpose	Funding Amount	Funding Formula	Timeline	References
Healthy Beginnings/Healthy Families	Increase awareness of developmental screening and social-emotional screening with community and state partners.	FY24-25: \$975,000 each yr.; FY26-27: \$500,000 each yr.	There are likely some noncompetitive grant opportunities for CHBs in the developmental screening portion of that statute, but amount/grant is TBD and not formula.	To be determined.	Health and Human Services Omnibus Bill SF 2992 Statutory language: Line 233.15 (new Minn. Stat. § 145.9575) Appropriation language: 811.1
Local Cannabis Education Funding	Grants to local health departments and Tribal health departments to create and disseminate educational materials on cannabis flower, cannabis products, lower-potency hemp edibles, and hemp-derived consumer products and to provide safe use and prevention training, education, technical assistance, and community engagement regarding cannabis flower, cannabis products, lower-potency hemp edibles, and hemp-derived consumer products.	\$10,000,000 for CHBs and Tribes	To be determined.	To be determined. Funding starts in SFY 2025 (July 1, 2024)	HF 100A Cannabis Finance and Policy Bill Statutory language: Line 237.8-238.8 Appropriation language: 314.1

Online references:

- Health and Human Services Omnibus Bill SF 2992: https://www.revisor.mn.gov/bills/text.php?number=SF2995&version=0&session=ls93.0&session_year=2023&session_number=0&type=ccr
- Minn. Stat. § 145.87, subdivision 1, paragraph (e): <https://www.revisor.mn.gov/statutes/cite/145.87>
- HF 100A Cannabis Finance and Policy Bill: https://www.revisor.mn.gov/bills/text.php?number=HF100&version=A&session=ls93.0&session_year=2023&session_number=0&type=ccr

Minnesota Department of Health Community Health Division
 health.ophp@state.mn.us | www.health.state.mn.us
 June 2023. To obtain this information in a different format, call: 651-201-3880.



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Social Services

Budget Committee of the Whole Meeting Date: 09/18/2023

Question: Request for BOC meeting update or workshop on urgent care work and continuum of care and expanding from adult to youth and culturally specific treatment.

Answer: We will be happy to bring and update forward via a board presentation or workshop. This will allow for Q & A and give the team time to prepare a thorough timeline to present the entire body of work and allow us time to talk about what the continuum of care could look like for youth.

Question: MnChoices assessments, PCA and closing the disparity gap. Emailing the spreadsheet showing how the gap has been closed including percentage of people served from 2020-2022. (This was for Commissioner Xiong but did not catch whether she no longer needed the spreadsheet after Commissioner Reinhardt had asked her. Wanted to include this just in case).

Answer: As stated in our budget presentation, Aging & Disability Services-MnCHOICES has been successful in reducing disparities in who is approved for waiver services. This performance measure is on page 621 of the budget book. Over time, disparities between white residents and residents who identify as Black, Hispanic, Latino/a/x, and American Indian have decreased significantly. Disparities do persist, and we continue efforts to close them.

Waivers offer more services to an individual compared to what is available with personal care assistance (PCA) only. A waiver is a funding stream or pot of money that is used to pay for services that are needed to assist someone in living as independently as possible in the community. Some examples of services that are paid for by waiver include homemaking, chore service, home delivered meals, specialized equipment and/or supplies, environmental accessibility adaptations, employment services, and transportation. Personal Care Assistance (PCA) includes services such as bathing, dressing, grooming, eating, shopping, paying bills, and meal preparation.

We have taken several steps to reduce the disparity who is able to access waiver services. We revamped our hiring and training process, moving from ad hoc hiring, and training to hiring and training new staff in cohorts. To be more successful in hiring more diverse staff, we reviewed interview questions to make sure we value lived experience and transferable skills. We worked to avoid overvaluing technical expertise. (Technical aspects of the job can be taught.) Recruiting diverse staff with experience and knowledge will help us continue to combat those disparities. Staff with lived experience and/or cultural expertise will be better able to connect with Asian, Black, Latino/a/x, and American Indian communities to better understand their true needs and may be better able to build trust. Some communities don't know what to say during an assessment to communicate their needs clearly and don't know about appeal rights or want to appeal and get involved in the courts. By having



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Social Services

Budget Committee of the Whole Meeting Date: 09/18/2023

assessors from diverse backgrounds, we hope to cultivate understanding about those barriers in our assessment teams and generate enough competence to help people overcome them.

Our new cohort training program ensures that all staff in our division receive consistent training that emphasizes the importance of reducing disparate outcomes for our residents. Race equity is highlighted throughout the training program, and there is a training session dedicated to examining our performance measures, understanding the root causes of race-based disparities, and thinking about strategies for continuing to reduce them.

We also overhauled our process for Rule 185 Case Management determination for people with developmental disabilities or related conditions. Previously, those determinations were made unilaterally by a small number of staff. Now, initial developmental disability determinations are made by a larger group of Qualified Intellectual Disability Professional staff and are subsequently reviewed by a committee, which ensures race equity is a focus during the determination process.

Over time we are also working to combat overly restrictive mentalities about waiver services and have connected an increasing proportion of people to waiver services across all groups. Those overly restrictive mentalities contributed to disparate outcomes and fighting against it is helping people in all racial and ethnic groups get connected to services, with gains for Black, Asian, American Indian, and Latino/a/x outpacing gains for white residents generally.

The spreadsheet information is below:

% of People with a MNCHOICES assessment who receive MA waivers rather than PCA only	2020	2020 disparity ratio	2022	2022 disparity ratio	% reduction in disparity ratio
White	86%	1	95%	1	0.00%
African American	43%	2	55%	1.727272727	13.64%
American Indian	59%	1.45762712	75%	1.266666667	13.10%
Asian	23%	3.73913043	30%	3.166666667	15.31%
Latin/x	63%	1.36507937	80%	1.1875	13.01%
Average disparity ratio between Whites and People of Color		2.14045923		1.837026515	14.18%



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Social Services

Budget Committee of the Whole Meeting Date: 09/18/2023

Question: Commissioner McGuire: I would look forward to a future opportunity on how our county work will align with the state's changes at the Department of Human Services and subsequent new functions. I believe Ramsey County can be a leader in this space and would like to hear more how we are aligning this in the 2024/2025 budget.

Answer: We will follow up directly with Commissioner McGuire to get clarity on her question.



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Veterans Services

Budget Committee of the Whole Meeting Date:

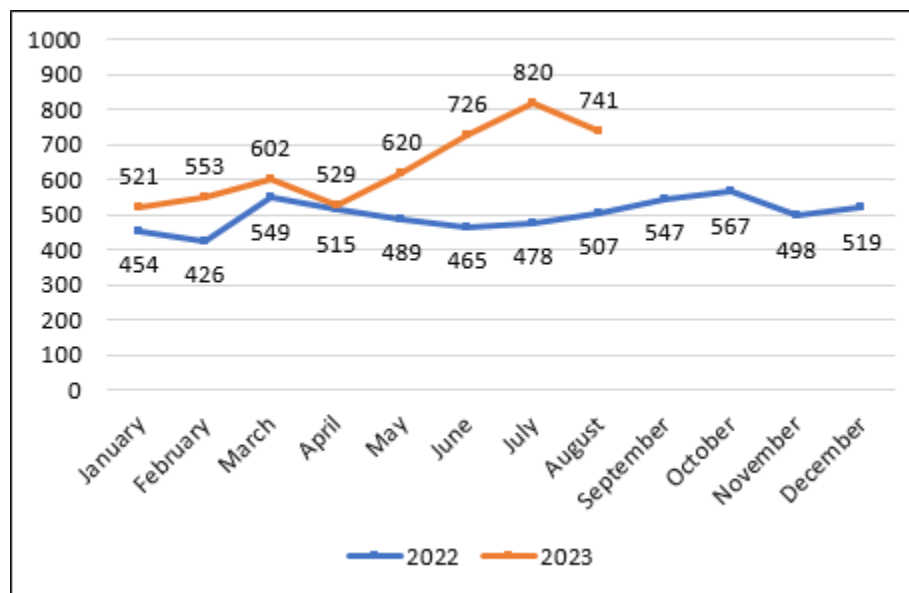
Question: How many total veterans are served by the Veterans Services Department?

Answer:

- All data elements are unduplicated by month.
- Added the 2022 totals for comparison.
- You'll see all the 2022 and January - August 2023 total clients served in **bold** in the chart descriptions.

Figure 1 shows the 2022 and 2023 comparison totals of veterans, dependents, and survivors served by Ramsey County Veterans Services. In 2022, staff served **6014** veterans, dependents, and survivors. Between January and August 2023, staff have served **5112** veterans, dependents, and survivors. The department is on track to exceed the 2022 total.

Figure 1: Veterans, Dependents, and Survivors Served by Month 2022-2023





2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Veterans Services

Budget Committee of the Whole Meeting Date:

Figure 2 shows the 2022 and 2023 comparison totals of veterans served by Ramsey County Veterans Services. In 2022, staff served **5397** veterans. Between January and August 2023, staff have served **4729** veterans.

Figure 2: Veterans Served by Month 2022-2023

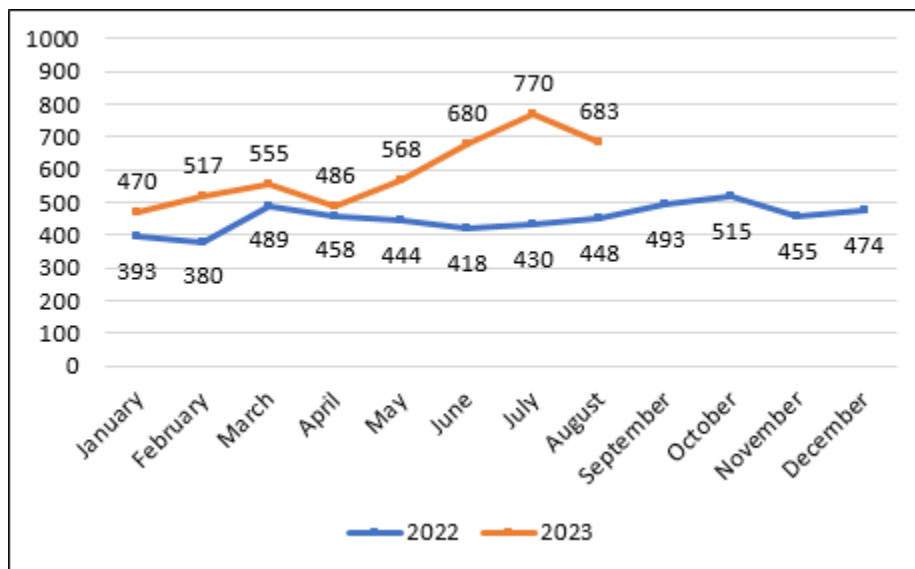
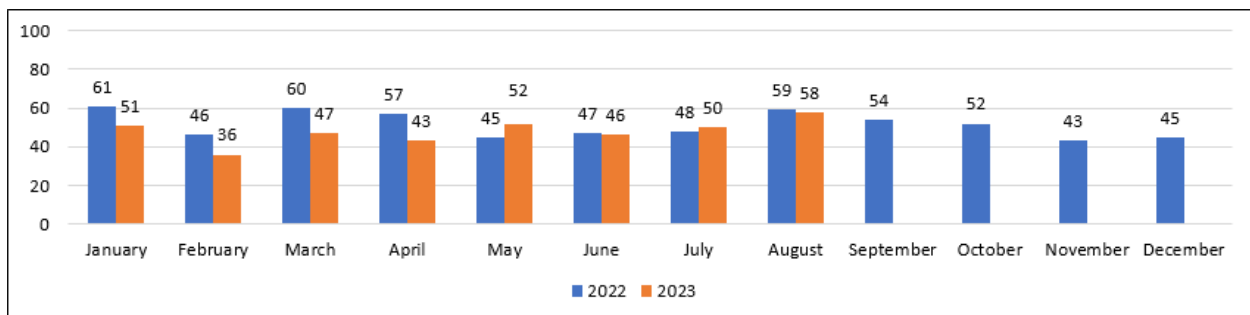


Figure 3 shows the 2022 and 2023 comparison totals of spouses and dependents served by Ramsey County Veterans Services. In 2022, staff served **617** totals of spouses and dependents. Between January and August 2023, staff have served **383** totals of spouses and dependents.

Figure 3: Spouses and Dependents Served by Month 2022-2023





2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Veterans Services

Budget Committee of the Whole Meeting Date:

Question: Where are other places where coordination/integration of services between Veterans Services and other county, departments, programs, and services?

Answer: Veterans Services coordinates with all Service Teams, departments, and programs within Ramsey County. We often reach out to programs and services to share information on what the Veterans Services Department does and how we can support each other collectively throughout the county systems. Below are some examples on how we are integrating our services.

County Wide: Worked with Communications Department to develop a county wide Veterans Services Referral Form so staff from around the county can refer Veterans/clients to our office (<https://ramseynet.us/service-teams-departments/health-and-wellness/veterans-services/veterans-services-referral-form>)

Public Health – Working collaboratively on Food Insecurity Initiative for Veterans by attending and partnering with the Ramsey County Sexual Assault Protocol Team (RCSAPT) and have introduced our services to the Sexual Violence Services (SOS) team and developed a referral form (see attached).

Social Services – Have met and shared our services with Aging and Disability Services and MNChoices programs. There is now a shared awareness of each other's services and can refer to each other's programs. We have a Social Worker from Adult Services/Mental Health Services embedded in the Veterans Services Department.

Financial Assistance Services (FAS) – Both departments are aware of each other services. We assist Veterans and their families with completing General Assistance (GA), and Supplemental Nutrition Assistance Program (SNAP) applications and connect with FAS on a regular basis. We receive Long Term Care (LTC), and Medical Assistance (MA) referral-verification forms from FAS. Ramsey County's Food Security program (SNAP) hands out postcards at community events, the postcards include the Veterans Services contact information (see attached).

Community Corrections – Veterans Services is working with Carissa Dillon, Food Security Coordinator, on a Basic Needs Assessment and Referral workflow between Veterans Services, Community Corrections and Social Services – this could be adopted countywide.

Adult Detention Center – Meeting with Program Officers at the Adult Detention Center (ADC) to create a Veterans Services Resource group at the ADC that meets once a month to have Veterans connect to benefits they may be entitled to, or to see if there is anything else Veterans Services can do to assist Veterans who are in or passing through the ADC.



2024-25 Biennial Budget Follow Up Information

Service Team: Health and Wellness

Department: Veterans Services

Budget Committee of the Whole Meeting Date:

Housing Stability – we have a Joint Powers Agreement (JPA) position, a Veteran Homeless Outreach Social Worker, within the Housing Stability Department who works directly with Homeless or at-risk Homeless Veterans. The work is done collaboratively to assist Veterans who are experiencing homelessness and have them connect to Veteran specific benefits and county benefits. We are also connected with the Ramsey Continuum of Care.

County Attorney Office – We manage the Veterans Treatment Court Mentor program for Veterans Treatment Court. Assisting justice involved Veterans going through the Veterans Treatment Court.

Information and Public Records – We often connect with and have point of contacts within Property Tax and Homestead offices as it relates to Property Tax Exclusion benefits for Veterans and Surviving Spouses. We connect with Vital Records regarding birth, death, and marriage records for Veterans.

Enterprise Services – We will be present in the lobby area with a table of information with our Veterans Services programs at each of the Ramsey County Service Centers one day a week, for approximately two (2) hours, beginning with the Metro Square location. This will bring awareness to our Veterans Services Department to both the community and to Ramsey County staff and navigators at each of the Service Center locations.



RC Food Security
Handout (SNAP) Non-



Generic Referral to
Ramsey County Veteri



Generic Referral to
SOS Form - 12.6.2022

Get help finding or affording



Ramsey County helps people determine if they are eligible and apply for food assistance programs.



Veterans: Call 651-266-2545
for specialized assistance.

Need help? Scan to find a list of
food resources in Ramsey County.



Find healthy, affordable food near you.

Call the **Minnesota Food HelpLine** to find food shelves, free meal sites, mobile grocery stores, farmers markets, and more. Call **888-711-1151**.

You may be eligible for SNAP benefits!

The Supplemental Nutrition Assistance Program (SNAP) can be used to get nutritious food from many stores, farmers markets, and senior dining sites.

To get help, call **651-266-4444**. To apply, visit mnbenefits.mn.gov.

WIC

If you live with a child up to five years old, you may qualify for WIC food benefits. Call **651-226-1300**.

Local Food Programs

Fare for All provides high-quality, discounted food bundles. **Twin Cities**

Mobile Market provides affordable groceries throughout Saint Paul.

Call **763-450-3880** or visit thefoodgroupmn.org/groceries.



Free Meals for Kids App

Search your mobile phone app store for Free Meals for Kids and download to find free food for kids under the age of 18.



Key Questions:

Have you ever served in the military?

Have you heard of VA services and/or benefits?

Referral to Ramsey County Veteran Services

I have received information about Ramsey County Veteran Services and I: _____,
 authorize **Ramsey County SOS** (*referring agency*) to share the following specific information with Ramsey County
 Veteran Services so they may follow up with me to offer supportive services.

Who I want to receive this form	Veteran Services, Saint Paul – Ramsey County Fax: 651-266-2546 Phone: 651-266-2545 Email: AskVeteransService@CO.RAMSEY.MN.US
How may Veteran Services contact you? <i>Check all that apply.</i>	<div style="display: flex; align-items: flex-start;"> <div style="flex: 1;"> <input type="checkbox"/> Phone: _____ Okay to leave voicemail? Okay to text? Okay to identify ourselves as “Veteran Services” when leaving a message or text? <input type="checkbox"/> Email: _____ </div> <div style="flex: 1; padding-left: 10px;"> This phone belongs to: _____ <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> </div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Any safety instructions when contacting by phone or email? </div>
Authorized information	Name and contact information.
Reason for disclosure	To facilitate crisis support, information, referrals, and education. <i>Veteran Services will not share information to referring agency without your permission.</i>
<i>Optional Information</i>	Preferred Language: _____ Race/Ethnicity: _____ Age or DOB: _____ Gender: _____ Pronouns: _____

By signing below, I confirm that I understand:

- ✓ That I do not have to sign a release form. I do not have to allow the referring agency to share my information with Veteran Services. Signing a release is completely voluntary.
- ✓ That releasing information about me could give another agency or person information about my location and would confirm that I am receiving services from the referring agency.
- ✓ That the referring agency will not be able to control what happens to my information once it has been released to the above person or agency, and that the agency or person getting my information may be required by law to share it with others.

I understand that this release is valid when I sign it. I may withdraw my consent to this release at any time, orally or in writing by contacting: _____

(Referring Agency Contact Name, Phone, Email)

Signature	Date
Printed Name (Please print clearly)	If you are signing on behalf of the person, please identify your relationship

For office use only - Veteran Services
Date received: _____ Client ID: _____

Referral to SOS Sexual Violence Services

I have received information about SOS Sexual Violence Services and I: _____
 authorize **Ramsey County Veteran Services** (referring agency) to share the following specific information with SOS Sexual Violence Services so they may follow up with me to offer **FREE & CONFIDENTIAL** advocacy services.

Who I want to receive this form	SOS Sexual Violence Services, Saint Paul – Ramsey County Public Health Fax: 651-266-1274 Phone: 651-266-1000 Email: askSOS@ramseycounty.us
How may SOS contact you? <i>Check all that apply.</i>	<input type="checkbox"/> Phone: _____ This phone belongs to: _____ Okay to leave voicemail? <input type="checkbox"/> Yes <input type="checkbox"/> No Okay to text? <input type="checkbox"/> Yes <input type="checkbox"/> No Okay to identify ourselves as “SOS” <input type="checkbox"/> Yes <input type="checkbox"/> No when leaving a message or text? <input type="checkbox"/> Email: _____ Any safety instructions when contacting by phone or email?
Authorized information	Name and contact information.
Reason for disclosure	To facilitate crisis support, information, referrals, and education at no cost. <i>SOS will not share information to referring agency without your permission.</i>
<i>Optional Information</i>	Preferred Language: _____ Race/Ethnicity: _____ Age or DOB: _____ Gender: _____ Pronouns: _____

By signing below, I confirm that I understand:

- ✓ That I do not have to sign a release form. I do not have to allow the referring agency to share my information with SOS Sexual Violence Services. Signing a release is completely voluntary.
- ✓ That releasing information about me could give another agency or person information about my location and would confirm that I am receiving services from the referring agency.
- ✓ That the referring agency will not be able to control what happens to my information once it has been released to the above person or agency, and that the agency or person getting my information may be required by law to share it with others.

I understand that this release is valid when I sign it. I may withdraw my consent to this release at any time, orally or in writing by contacting: _____

(Referring Agency Contact Name, Phone, Email)

_____ Signature	_____ Date
_____ Printed Name (Please print clearly)	_____ If you are signing on behalf of the person, please identify your relationship

For office use only - SOS
Date received: _____
SOS Client ID: _____

Health and Wellness Service Team
New Revenues for the 2024/2025 Proposed Budget
As of 09/18/2023

Department	Dollar Amount	Description	Allowed or Potential Uses	Recurring or One Time Funding	Included in 2024/2025 Proposed Budget	Board Action - Addendum or RBA	Impact on Residents
Office of H&W	N/A						
H&W Administration	N/A						
Financial Assistance Services	4,659,268	Medical Assistance Renewals (MA Unwinding)	Costs directly related to the documentation requirement for Medical Assistance Renewals	One Time	Yes	In Budget	If a resident does not complete their annual Medical Assistance renewal with all necessary documentation they may lose health insurance.
Social Services	N/A						
Lake Owasso Residence	N/A						
Public Health	N/A						
Veterans Services	N/A						
Community Corrections	3,079,678	2023 Legislative Session authorized additional funds for community supervision (CCA) subsidy.	Community Supervision	Recurring	Yes	In Budget	Department will use funds to continue the goal of more community less confinement.
	25,461	Justice Assistance Grant - G404007	Used to cover some electronic home monitoring expenses.	Recurring but Sporadic	Yes	In Budget	Rather than residents being in a facility they are able to be in the community.