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# Minnesota Department of Human Services

# **INFORMATION TECHNOLOGY**

# **2003 REPORT TO THE LEGISLATURE**

# **COVERING FY2002**

Minnesota Statute Chapter 256.014, Subdivision 3

alternative format such as Braille, large print, or audiotape.

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1

# FY 2002 REPORT TO THE LEGISLATURE Minnesota Department of Human Services Information and Technology Strategies January 29, 2003

Minnesota Statute Chapter 256.014 Subdivision 3 requires the Commissioner of the Minnesota Department of Human Services (DHS) to report each year to the chairs of the House Ways and Means Committee and the Senate Finance Committee on the expenditures and impact for each information technology system within the Department. This report fulfills that requirement.

TABLE OF CONTENTS

EXECUTIVE SUMMARY	2
SUMMARY ANALYSIS	4
MAXIS	7
MEDICAID MANAGEMENT INFORMATION SYSTEM (MMIS)	9
PRISM (CHILD SUPPORT ENFORCEMENT SYSTEM)	12
SOCIAL SERVICES INFORMATION SYSTEM (SSIS)	14
DHS INFORMATION AND TECHNOLOGY CHALLENGES	16
CONCLUSION	18

## **EXECUTIVE SUMMARY**

### Background

DHS manages a number of state and federal programs to provide health care, economic assistance, and social services for people who do not have the resources to meet their basic needs. The Department works with Minnesota's 87 counties to assist those on public assistance programs to meet basic needs and to become self-sufficient.

DHS serves as a program funding agent, a licensing agency and a direct service provider. The Department interprets and implements numerous state and federal assistance policies and regulatory programs, and automates these programs as directed by the federal government, the Minnesota Legislature or Department management. DHS also supports and supervises programs administered by Minnesota's 87 counties pertaining to medical care, social services and financial assistance to the poor, aged, abused, disabled, and other vulnerable Minnesotans.

DHS customers include: seniors who need help paying for hospital and nursing home bills or need home-delivered meals; families with children who need help during a financial crisis; parents who need child support enforcement or child care assistance; children who may be vulnerable or abused; and people with physical or developmental disabilities who need assistance to live independently. DHS has improved the accuracy and efficiency of delivery of these, and many other services, by automating many aspects of program delivery throughout the Department and in the counties. Technology is essential to our ability to deliver services.

### Scope

This report focuses on the following questions from the Legislature:

- 1. What has been the impact of each DHS system on consumers/clients, programs, and counties?
- 2. How have counties participated in systems design and operation over the past year?
- 3. What has been the financial expenditure for each system?

Automated systems at DHS offer significant benefits to Minnesota's citizens, counties, state government, stakeholders, and the Legislature. In FY 2002, DHS computer systems continued to play a key role in our ability to improve the efficiency, effectiveness and responsiveness of our delivery of services to Minnesotans.

This DHS Information Technology (IT) Report to the Legislature contains several recurring themes:

### DHS continues to improve the effectiveness of our service delivery approach by

lowering error rates, improving our ability to respond quickly and appropriately to Minnesotans in need, and improving our ability to measure results of our efforts.

DHS programs and technology improve the lives of Minnesota's children and families by providing for and ensuring uniform program rules and regulations (including child support and child welfare) throughout the state.

<u>DHS streamlines government processes at both the state and local levels</u>, making it easier for Minnesota's citizens to access human services and counties to deliver uniform programs statewide without excessive overhead and time-consuming paperwork.

DHS continues to strengthen the partnership with Minnesota's counties by enhancing existing partnerships with county personnel. Counties regularly partner with DHS to plan improvements, explore joint technology initiatives, and analyze DHS business processes which can streamline operations and help deliver services.

<u>DHS continues to provide high-quality services to Minnesota's providers</u> by maintaining quick and accurate reimbursement methods, consistent policies, and E-commerce solutions.

<u>DHS systems continue to respond quickly to changes</u> required by federal and state legislative and rules changes.

3

## SUMMARY ANALYSIS

DHS has invested in appropriate and efficient technologies to automate the delivery of services through health and human services programs in Minnesota. Counties and regional facilities deliver those benefits and services directly to citizens. In order to determine what their needs are and how to best serve them, DHS needs accurate, timely and complete information about its clients. DHS invests in technology to:

- Manage both administrative and benefit costs of the DHS services
- Improve the accuracy of the decisions made based on policy and ensure that policy is applied consistently throughout the state of Minnesota
- Automate routine functions allowing human capital to focus on quality service delivery
- Help our clients manage their own affairs and encourage self-sufficiency
- Improve services to our partners in service delivery, including health care providers, other state and federal agencies, and counties
- Improve our ability to be accountable for results

### DHS Core Systems

Four major information systems provide support to for the delivery the agency's benefits and services to Minnesota's counties and citizens:

- MAXIS, a federally certified system, determines eligibility and issues cash assistance and food benefits, and determines eligibility for some health care benefits. MAXIS issues notices to clients on changes in eligibility and benefits, supports monitoring for fraud and overpayment collections, and provides data for state and federal reporting. (Electronic Benefits Transfer (EBT) operates within the MAXIS environment.) MAXIS has critical interfaces to many other systems, especially MMIS and PRISM, which help the Department provide a full range of services to support self-sufficiency for our clients.
- 2. The **Medicaid Management Information System (MMIS)**, a federally certified system, reviews and insures correct payments for medical bills and managed care capitation payments for state and federal health care program enrollees. It also helps to assure quality care is being provided and providers are acting responsibly with regard to billing by assisting investigators in detecting medical fraud and maintaining critical data claims for Minnesota Health Care Program (MHCP) recipients.
- 3. **PRISM** (Child Support Enforcement System), which is also federally certified, supports Minnesota's child support enforcement program in efforts to establish paternity, locate missing non-custodial parents, implement automatic withholding of owed child support from employers, and establish and enforce child support orders. PRISM supports centralized collection, reporting and disbursing of child support

payments as required by federal law.

4. The **Social Services Information System (SSIS**), which is working on obtaining federal certification, tracks reports and investigations of child maltreatment and assists county social workers with all aspects of child protection, out-of-home placement, child welfare, children's mental health and other social services case management. SSIS also tracks child welfare performance indicators and collects data for required federal and state reporting.

DHS manages a major investment in technology to maintain these four core information systems which automate key elements of human services business operations and program policy. These systems operate in partnership with counties to coordinate efforts for program operations, and have proven capable of responding to constant program changes.

In addition to these operational support systems, DHS maintains a data warehouse that enables DHS and county staff to analyze and understand data gathered from these systems and identify trends in human services delivery.

Over the past fiscal year, these efforts stand out as highlights:

- To comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), DHS is finalizing a Web-based method of payment and inquiry for Minnesota Health Care Programs (MHCP) claims and working with providers to ensure that providers comply with HIPAA.
- Automation of Food Stamp Only cases within Minnesota Family Investment Program (MFIP) households reduced the error rate among these cases from 12% to 0.
- Information security policy development is underway which makes strides in meeting the HIPAA mandate as well as providing a secure environment for DHS systems.
- DHS implemented Web technologies for some aspects of our programs, including access to required forms and the new county website to improve efficiency and citizen access

DHS must keep up with requests from citizens and counties as well as with technological demands. To continue enhancing capabilities and improving services to counties and clients, DHS must maintain awareness of developments in human services technology, activities at the federal level which may affect technology efforts, and feedback mechanisms from clients and counties. Among the issues facing DHS in the future are:

- Moving towards compliance with HIPAA, which requires significant changes in health care business processes and the development of a more stringent security infrastructure at DHS.
- Improving client access to services and program information with automated health care eligibility determination throughout Minnesota, which ensures that policies are being consistently applied statewide. This automation will help prevent gaps in coverage as enrollees change programs or move from welfare to work.

- Upgrading older systems to Web-based technology where it is a sound business move
- Continuing to make data available to state and county users with the DHS data warehouse and providing program information to decision makers at both levels.
- Maintaining the integrity, accuracy and availability of the data we store and process.

### The Role of ITS

Information and Technology Strategies (ITS) provides the resources to manage the agency's infrastructure while facilitating the Department's goal of developing an information environment that is secure, stable and technologically sound. Under the leadership of the Department's Chief Information Officer, ITS ensures that IT initiatives are coordinated within the Department and with other agencies, including the Department of Administration's Office of Technology and InterTechnologies Group.

ITS provides centralized technology direction for the Department to assure that economies of scale are realized around technology efforts. This direction helps to keep the information infrastructure reliable and responsive to program and customer needs. This work is critical to good strategic systems planning and provides a framework for design, enhancement, security, access, and replacement of technology that will continue to meet the needs of those whom the Department serves in the future.

### DHS Core Computer System Overall Expenses

(The Costs of Human Service Technology-FY 02)

Fiscal Year 2002 Expenditures by System		
(in thousands)		
MAXIS	\$31,494	
MMIS*	35,997	
PRISM	26,246	
SSIS	5,215	
Total <sup>^</sup>	\$98,952	

Source: DHS Major Systems Projected Financial Status dated December 2002

\* Includes HealthMatch and HIPAA

^ Includes \$56,403 (57%) in federal financial participation

### MAXIS

### Purpose

MAXIS determines eligibility for public assistance and the benefit amount for which clients are eligible. MAXIS automates eligibility determinations for economic assistance and health care programs at both the county and state levels.

### Impact on Consumers/Clients

MAXIS links all 87 Minnesota counties and one tribal agency, ensuring that benefits are uniform throughout the state. More than 500,000 Minnesotans are affected by MAXIS eligibility determinations. Each month, more than \$12 million in Food Stamps and \$32 million in General Assistance (GA), Refugee Cash Assistance (RCA), Minnesota Supplemental Aid (MSA), and Minnesota Family Investment Program (MFIP) benefits are calculated by MAXIS. Among the year's highlights were:

- Automation of Food Stamp Only cases within MFIP reduced the error rate among these cases from 12% to 0%, further reducing Minnesota's already low Food Stamp error rate.
- Automation of health care eligibility provided needed support to counties coping with the Personal Responsibility and Work Opportunities Reconciliation Act (PRWORA)mandated separation of Medicaid and Temporary Assistance to Needy Families (TANF) eligibility. This automation relieved counties from the chore of manually determining health care eligibility for more than 100,000 additional people and laid the groundwork for a smoother transition to the planned HealthMatch system.
- Clients receive timely notification of benefit changes, the energy assistance program, time remaining on MFIP, and annual tax statements.
- County staff receives access to hundreds of on-line reports on topics such as case activity by program, MFIP sanctions, benefits issuance, and claims collection.
- Eligibility for the School Lunch program can easily be verified, limiting the need for involving the county worker.
- County staff can easily verify Social Security Administration benefits and cost of living adjustments (COLA) increases; Social Security Administration staff can easily verify receipt of TANF benefits.
- Client benefits and vendor payments can be deposited directly.
- MAXIS meets reporting requirements for TANF funding, high performance bonuses, and county program evaluation.

### **County Participation**

The primary users of MAXIS are 2500 county and tribal financial workers who are frequently involved in ongoing system training and testing of MAXIS software changes to ensure end-user satisfaction. DHS MAXIS staff meet monthly with county staff to get their feedback and recommendations for improvements, and incorporate user recommendations in their planning. The MAXIS Help Desk provides ongoing technical

and program support to county workers. Recent enhancements include:

- Automation of Health Care program eligibility.
- A tool to aid county staff in completing and recording asset assessments for persons in need of long term care assistance.
- A limited web-enabled "front end" or graphic user interface (GUI) to accommodate increasing demands for access to MAXIS data from remote locations outside county offices, and to facilitate the quick and secure flow of information and determinations of eligibility for economic assistance.
- Automation of food stamp only eligibility for persons living in MFIP households.
- A successful proof of concept for the Ramsey County project to provide a common access front end (CAFÉ) to provide better coordination of services to the public.

### Pending Issues for MAXIS

- System stability and performance: As the MAXIS database grows and the type of users and users' needs change, the system must continue to meet users' business needs without degradation in performance.
- Issuance costs: Issuance methods must continue to ensure that client needs can be met cost-effectively, and need to continually monitor banking industry trends, such as Automatic Teller Machine (ATM) surcharge fees which have a financial impact on clients using EBT.
- MAXIS must continue to renovate and incorporate new technology to meet the increasing need for data exchanges among systems and flexibility in service delivery.

Expenditures by Category (in thousands)		
Personnel	\$9,554	
Professional/Technical Services	4,796	
Computer & System Services	9,141	
Communications	5,510	
Equipment & Supplies	68	
Other	2,425	
TOTAL	\$31,494	

### MAXIS Expenses for FY 02

Source: DHS Major Systems Projected Financial Status dated December 2002

## **MEDICAID MANAGEMENT INFORMATION SYSTEM (MMIS)**

### Purpose

Minnesota's Medicaid Management Information System (MMIS) is a federally certified information system used to administer Minnesota Health Care Programs (MHCP). MMIS processes 35 million claims and transactions annually, which are submitted by health care providers who serve nearly 600,000 recipients of MHCP. Programs administered by DHS include MinnesotaCare, Medical Assistance (MA), General Assistance Medical Care (GAMC), the Prescription Drug Program and the Alternative Care Grants Program. MHCP provides health care services to low-income families and children, low-income elderly people and individuals that have physical disabilities, developmental disabilities, mental illness and/or chronic illness. MMIS is the tool county workers and DHS staff currently use to enroll eligible recipients and store enrollee data. MMIS also calculates, bills, and records payment information.

MMIS facilitates Benefit Recovery activities that include the coordination of benefits and recouping monies owed to the state. In FY 2002, Benefit Recovery saved the state more than \$103,000,000.

In addition, MMIS facilitates enrollment and premium payment for special programs like Medical Assistance for Employed Persons with Disabilities. The most recent quarter's premium collections totaled approximately \$600,000. To provide for efficient premium payment, the system has been modified to permit enrollees to have their payments automatically withdrawn from their banks and sent to the state.

### Impact on Consumers/Clients

Consumers of MMIS include Minnesota's counties and over 36,000 health care providers that serve MHCP enrollees. Providers include: individual and group practitioners, pharmacies, dentists, health maintenance organizations, hospitals, nursing homes, and treatment facilities.

- DHS encourages electronic claims submission because paper billings take longer to process and are more expensive. Over 95 percent of all MMIS fee-for-service transactions are electronic. The remaining claims (approximately 1 million annually) are submitted on paper. The majority of electronic claims process within 2 days; paper claims take an average of more than 25 days to process. DHS meets legislative requirements for prompt payment. In FY 2002, only \$831 interest was paid on 58 claims (out of more than 18 million fee-for-service claims).
- Eligibility Verification System (EVS) is available via telephone or Web 24 hours a day, seven days a week. EVS allows providers to check recipient eligibility before they provide services.
- Electronic Fund Transfers (EFT) are now available for all providers. If they choose to

enroll in EFT, their payments will be electronically deposited in their bank accounts.

 MMIS is currently doing data exchanges with Centers for Medicare and Medicaid Services (CMS) via the Medicare Enrollment Database that allow the state electronically use recipients' Medicare funds.

### **County Participation**

Counties act as MHCP providers. They verify eligibility through MMIS and bill DHS for services. MMIS staff hold regular meetings with county workers to foster a partnership approach and improve the effectiveness of MMIS services. For example:

- DHS managed care staff meet quarterly with counties to review and recommend changes to MMIS.
- DHS provides information and organizational guidance to counties on HIPAA compliance issues.
- The State-County Data Unit meets regularly. This unit explores extracting MMIS or other DHS systems' data safely and securely. The goal is to assist counties to access client information and payment data. This data partnership facilitates federal reports, state evaluations, county performance requirements and county needs to target services.

### Pending Issues for MMIS

The following MMIS-related projects are being developed and implemented with between 50 and 90 percent federal financial participation (FFP) to provide needed services and comply with federal mandates or industry initiatives:

- As the state's Medicaid agency, DHS is working to comply with the federal HIPAA mandate. HIPAA mandates significant change in the way all health care payers and providers conduct business. HIPAA's Administrative Simplification Act provisions create new standards for electronic data interchange (EDI). The new standards protect and secure the confidentiality of personally identifiable health care data. All Medicaid agencies, payers and providers must redesign their systems to receive and process new transactions.
- MMIS staff are managing the technology for the DHS HealthMatch project. HealthMatch will combine health care program information with flexible technology, which will result in improved access to public health care coverage in Minnesota. HealthMatch will automate the eligibility process for county and state workers. This system will ensure that policies are implemented consistently across Minnesota, and help prevent gaps in insurance coverage as enrollees change programs or move from welfare to work.

# MMIS\* Expenses for FY 02

Expenditures by Category		
(in thousands)		
Personnel	\$16,694	
Professional/Technical Services	2,327	
Computer & System Services	6,072	
Communications	2,769	
Equipment & Supplies	2,849	
Other	5,286	
TOTAL	\$35,997	

Source: DHS Major Systems Projected Financial Status dated December 2002

\* Includes HealthMatch and HIPAA

# PRISM (Child Support Enforcement System)

### Purpose

PRISM is the automated tool used by state and county child support workers to help establish paternities, establish child support and medical support court orders, enforce court orders, and collect and disburse child support funds. PRISM helps DHS and the counties manage the child support program statewide with consistency, uniformity, and efficiency. PRISM supports the mission of the Child Support Program: "to benefit children through establishing paternity, establishing and modifying support orders, collecting support, and promoting the means to do so."

### Impact on Consumers/Clients

PRISM supports service to 662,580 non-custodial parents, custodial parents and children within Minnesota and across the nation. All 87 counties and state staff are direct users of PRISM. PRISM receives data entered by workers or as a result of 15 interfaces with other state and federal. The use of PRISM has automated many routine functions to locate missing non-custodial parents, implement income withholding with employers, and enforce child support orders. Among the highlights for the year are:

- Child support collections for families and government agencies totaled more than \$553 million in state fiscal year 2002.
- An integrated voice response system (IVR) averages 192,000 calls per month making case and financial information available for child support clients 24 hours a day, 365 days per year.
- PRISM directly deposited \$110,146,400 in child support payments to authorized custodial parent bank accounts, saving custodial parents' time at the bank and getting funds to children sooner.
- Received New Hire Reporting matches each month averaging 181,028. Cases that match are updated with new information. This begins income withholding sooner and helps child support continue without interruption when parents change jobs.

### **County Participation**

The child support enforcement division has a long history of county participation in the development of a vision and work plan for automating child support policies and procedures.

- The Child Support Advisory Board meets bi-monthly and plays an active role in high level planning and implementation of PRISM changes.
- County workgroups, representing the functional areas of PRISM, meet with state staff as needed to discuss ideas and proposals for policy and system changes. Members of the workgroups consist of volunteer line staff and management staff from county child support offices. This staff brings the perspective of real life into the change process. They also play a role in helping the state determine the priority of changes.

The Child Support Enforcement Division and County child support enforcement agencies established a five year strategic plan through a series of meetings during June and July 2002 in order to develop a new, more focused mission for the future of Minnesota's child support program. Under this mission, the Child Support Program is implementing strategies to promote more responsive policies and services, increased program effectiveness, and greater community access and support.

### Pending Issues for PRISM

- PRISM may face a loss of federal IV-D program funding, estimated to be over \$21 million dollars per year in SFY 2004 and 2005, if the Legislature does not pass legislation requiring drivers' and recreational license applicants to provide their Social Security Numbers (SSNs) on license applications. The Department sought a waiver of the federal mandate to collect SSNs (required under PRWORA), but the request was denied. The federal Office of Child Support Enforcement will be monitoring the Department's efforts to pass this legislation.
- PRISM is an asset to be further leveraged in exploring approaches and techniques that allow for rapid development and delivery of new, Web-based applications that meet the demands for quicker and more direct access to data and services. These demands must be met within data privacy restrictions and the work prioritized along with any new federal or state requirements.

Expenditures by Category			
(in thousands)			
Personnel	\$10,553		
Professional/Technical	3,427		
Services			
Computer & System Services	6,273		
Communications	3,072		
Equipment & Supplies	318		
Other	2,603		
TOTAL	\$26,246		

### PRISM Expenses for FY 02

Source: DHS Major Systems Projected Financial Status dated December 2002

## SOCIAL SERVICES INFORMATION SYSTEM (SSIS)

### Purpose

SSIS tracks reports and investigations of child maltreatment and assists social workers with all aspects of child protection, out-of-home placement, adoption, child welfare, children's mental health, and other social services case management. It also tracks child welfare performance indicators and collects data for required federal and state reporting.

### Impact on Consumers/Clients

- For children who are abused or neglected, SSIS provides a quick automated way to refer cases for investigation.
- For children in need of protection who require a number of services, SSIS provides simultaneous information in different parts of the county agency.
- County social workers have a comprehensive case management system.
- County social services agency administrators have expanded availability of information for managing programs.
- SSIS has reports that monitor child placements so children do not drift in foster care.
- DHS has more accurate/timely statewide data on child welfare programs than before, and improved reporting capabilities to the Legislature and federal agencies.

### **County Participation**

SSIS improves client documentation and county communication, and streamlines county social services operations. SSIS also serves as a valuable source of data to help Minnesota's counties (as well as the state and federal government) plan and manage social service programs and dollars. The system is designed to be expandable to other human services program areas and be flexible in various county settings.

- Focus groups and work groups, consisting of county workers and SSIS staff, meet to address issues that arise in system implementation and operation. SSIS also receives, on a regular basis, county input and guidance on three formal levels: strategic, county operations, and technical/network feedback.
- For the next two years (2003-2004), county representatives will be active in design and acceptance testing of the integration of the Community Services Information System (CSIS) functions of payments, MA claiming and state reporting into SSIS
- Counties have invested significant financial resources in the development, implementation and ongoing operations of SSIS, and are responsible for training 3000 individual workers statewide.
- SSIS allows county workers to manage their case work, helping them with assessment and eligibility, case assignment and plans, requests for service, reviews, resource management, provider information, and tracking licensing status/issues. SSIS will also connect county workers (in accordance with data privacy laws) to state-level client and offender indexes.

### Pending Issues for SSIS

- In order to meet federal Statewide Automated Child Welfare Information System (SACWIS) and HIPAA requirements, the CSIS functions will have to be integrated into SSIS as soon as possible.
- The recent federal review of SSIS identified the need for counties to be able to access more statewide data. SSIS must find ways to open its architecture to facilitate data exchange while maintaining security. Other review findings require further system software development to enable interfaces with PRISM, MAXIS, MMIS and HealthMatch.
- SSIS will need to work cooperatively with MAXIS, PRISM, MMIS and HealthMatch to develop and implement the Share Master Index (SMI) which will create standardized identification numbers.
- Because the remainder of the social services program areas are not fully developed in SSIS, county workers have to use multiple systems to manage their work and the state does not have a complete picture of services, costs, and outcomes for all family members and programs.

Expenditures by Category		
(in thousands)		
Personnel	\$2,520	
Professional/Technical Services	1,621	
Computer & System Services	101	
Communications	34	
Equipment & Supplies	375	
Other	564	
TOTAL	\$5,215	

### SSIS Expenses for FY 02

Source: DHS Major Systems Projected Financial Status dated December 2002

## **DHS INFORMATION and TECHNOLOGY CHALLENGES**

DHS demonstrates its continued commitment to use technology to provide better services for Minnesotans by:

- Improving direct citizen access to information and services needed;
- Supporting client efforts to be more directly active in achieving self-sufficiency; and
- Providing support for business process redesign that take advantage of enabling technologies;
- Integrating IT goals with business goals.

During FY2002, DHS has worked on numerous, cross-Department technology efforts and faced a number of challenges that will have an impact on the future of the Department's systems and how they affect both citizens and county partners. Among these are:

### Maintaining System Viability

The Department's top IT priority is to maintain the viability of its service delivery systems and infrastructure. Citizen demand for improved access to services along with new regulations and technology continue to test the viability of DHS systems. DHS must make sure that the systems are maintained to continue to provide the necessary services to their customers.

### Health Insurance Portability and Accountability Act (HIPAA)

The state of Minnesota, including DHS, along with all other public and private health organizations with access to individually identifiable health data must comply with the federal HIPAA mandate. The compliance dates to meet these requirements come in three phases: mid-2003 for data privacy practices, late 2003 for transaction codes, and at least mid-2004 for security regulations (the final rules for which have not been issued.).

While HIPAA holds great promise for ensuring that public and private health care systems will properly protect data, it has significant implications for all DHS computer networks and information systems. Security levels for access, storage, utilization and transmission of data within Minnesota's health-care community must be increased to meet legitimate concerns that future users of Internet-based communications could be susceptible to a security breach.

For DHS and other agencies, this means extensive implementation of security and access control/authorization/authentication procedures, hardware, and software. The major outcomes of HIPAA are:

- Appropriate protections for personal data on individuals
- Accessible information to providers and payers to help ensure effective and efficient

service delivery to Minnesota consumers

- Compliance with federal and state law
- Protection of private health information for all citizens
- Continued ability to do electronic business with health care providers

This work is underway and near completion in order to meet the compliance dates.

#### HealthMatch

DHS is working to automate health care eligibility determination to make it more efficient and accurate. HealthMatch will provide improved and easier access for citizens, assist in sorting through the variety of possible programs to determine the best fit, and shorten a long and often duplicative health care application process. DHS is working closely with tribal governments and counties to ensure their participation in the project. In FY02 the scope of the project has been defined, requirements documentation completed and the RFP issued. The project is scheduled for completion in 2005.

### Shared Master Index/Common Access Protocols (SMI/CAP)

The Shared Master Index is a priority system development project that brings together each client's basic identifying information from DHS' major systems into a single client view, using a common identification number. By doing this, DHS and county human service agencies can streamline operations, integrate services, and track client services against outcomes and results.

The SMI has been high on the list of county needs from DHS systems for many years. Integration of services and outcomes measurement have become a standard way of doing business in the counties, so the need is greater now than ever. Together with the SMI's Common Access Protocols (standards for cross-system and cross-agency data definitions and communications), the SMI will:

- bring efficiencies to DHS system operations
- improve effectiveness to by increasing coordination of services, and
- establish ways of communicating data so that DHS does not need to continue building unique interfaces and data extracts on a county-by-county and system-by-system basis.

DHS has included the Ramsey County CAFE project and similar projects in other counties in meetings and user-oriented design sessions, and will continue to do so as the SMI begins the pilot process during calendar year 2003.

### Electronic Government Services (EGS)

DHS has refocused its processes, services, and communications to support and make

the most of the opportunities that technology presents. Expanding electronic transaction capabilities have provided economical and timely means of distributing, receiving and processing printed materials and forms, applications and program information available in multiple languages for easy downloading.

### CONCLUSION

The Department's major information systems are operating and providing the expected services to state, county and citizen clients. DHS remains committed to operating information systems that promote client and county partners access to state government.

Partnership has been vital in both the design and implementation of the major systems. Through its base of information systems, the Department is better equipped to manage fiscal resources and maintain a workforce that is professionally competent and technologically literate. Together with county participation and feedback, DHS has developed and maintained systems that are integrated and coordinated to maintain communication, improve the delivery of programs and services, and ultimately improve the lives of Minnesotans whom the Department serves.

Information technology is an instrument for coordination, collaboration, and communication across the Department's business functions, with other state and federal agencies, and with the counties and clients it serves.