DEPARTMENT OF HUMAN SERVICES # Legislative Report

Transformation for Delivery of Human Services Programs

January 2025

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Minnesota Statutes, Chapter 3.197, requires the disclosure of the cost to prepare this report. The estimated cost of preparing this report is $9,590.

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I. Executive summary

The Department of Human Services (DHS) and Minnesota IT Services (MNIT) share a vision for transformation of service delivery:

> *Service Delivery Transformation reinvents human services delivery by responding to the needs of people, Tribes, and counties to create a better, easier experience for everyone.*

DHS and MNIT are pursuing a full transformation of service delivery to better meet the needs of Minnesotans. The people who apply for and receive services, and the staff at Tribal Nations, counties, and other providers who deliver services to communities, are the focus of this transformation work. Addressing people's needs and challenges, or "pain points", is the driver of all Service Delivery Transformation (SDT) efforts. To address these pain points, SDT aims to change outdated processes, improve service delivery and outcomes, and expand external data and visualizations to increase transparency.

Since October 2023, the teams from the five initiatives represented in this report have been working hard to improve the experiences of the people they serve through diverse efforts. Many teams have adopted a new approach to working that involves ongoing, iterative development of products that deliver value for the end user. Other initiatives are using more traditional project-based approaches, delivering defined scope through timebound temporary teams. Both product- and project-based SDT work contribute to developing and maintaining a person-centered human services system. All teams work in ways that thoughtfully address the needs of their user groups. The legislative funding received for SDT initiatives supports the work that continues, expands, or builds upon several of these teams' efforts. The five initiatives included in the SDT funding are:

1. **Transforming Service Delivery:** The state will simplify and streamline information technology (IT) delivery systems for clients, Tribes, counties, and providers. Much of the work of the Integrated Service Delivery (ISD) product line lives within this initiative area, which is working to make the path to benefits simple, welcoming, and quick for Minnesotans, while reducing administrative burdens for the Tribal Nations and county case workers who process benefits applications.

   This year, the ISD team launched a text messaging pilot to MNbenefits applicants, improved document routing, expanded fields for more complete applications, and began development of an application status tracker. Shared services teams have created tools, conducted community engagement work, and set up processes that support product teams in developing person-centered solutions to identified problems.

2. **Integrated Services for Children and Families:** DHS, in collaboration with the newly created Department of Children, Youth, and Families (DCYF), will stabilize legacy systems responsible for delivering more than $1.9 billion in benefits to hundreds of thousands of Minnesotans.

   Three separate efforts to identify issues and improve the Social Service Information System (SSIS) are underway, one of which is focused on reducing data entry burdens and has already yielded tangible action steps. The other two SSIS efforts aim to reduce unscheduled downtime, and assess usability, system performance, and federal compliance. A new system to improve the content and accessibility of a broad range of client notices generated by MAXIS, one of the State of Minnesota's eligibility

determination systems, has demonstrated a proof of concept that will significantly improve client experience by providing clear guidance and action steps in an easy-to-read format.

3. **Medicaid Management Information System (MMIS) modernization:** The state will enhance, modernize, and stabilize the functionality of the Medicaid Management Information System (MMIS), a system that ensures that more than 1.4 million people on the Medical Assistance and MinnesotaCare programs get necessary services and benefits when they need them.

   Over the past year, the state has contracted with a new vendor, Magellan Rx Management, to stand up a modernized pharmacy system that is set to go live in November 2024. The new pharmacy system will (1) ensure that Medical Assistance and MinnesotaCare enrollees will have consistent access to filled prescriptions as well as access to expanded call center support, and (2) facilitate compliance with federal and industry-wide standards. The MMIS initiative has also made progress towards procurement of an "interoperability solution," or a vendor/platform that will improve the exchange of health information between providers and trusted partners. This vendor/platform is scheduled to be in place by the end of 2025.

4. **Provider Licensing and Reporting Hub:** A new provider licensing and reporting hub will create a unified licensing experience for all human services licensed programs.

   This initiative has seen notable progress in the past year, including expansion into a full "product line," which allows the effort to encompass and align to a wider range of related processes and license types. There are now two license types fully available as electronic licensing applications (certified child care providers and licensed child care centers), with three additional license types and tools currently in progress toward electronic availability. The development and maintenance of current and future electronic license types is supported by a significantly expanded team of state staff that build and maintain the new online tools.

5. **Minnesota Eligibility Technology System (METS) functionality improvements:** Changes to the METS system will include short-term emergency fixes, ongoing sustainability efforts, and recommendations for improvement.

   Throughout the past year, state staff have prioritized ensuring that METS meets federal compliance requirements. A wide range of compliance needs have been addressed, with continued plans to respond to evolving requirements and guidance provided by the Centers for Medicare & Medicaid Services (CMS). Notably, compliance updates have resulted in positive outcomes for Minnesotans through improved Medicaid auto-renewals rates, which also has a positive impact on Tribal and county workers by saving time that would otherwise be spent on manual renewals. This work has included initial exploration into solutions to build system to allow Medical Assistance and MinnesotaCare applicants and enrollees to manage their health care profile and plan online.

This work will be ongoing. Measurements and outcomes will be adjusted periodically to reflect both external changes as well as changes in DHS's understanding of the needs of its partners and people being served. The performance indicators presented in this report represent the outcomes each initiative aims to achieve. For all five initiatives, the performance indicators, metrics, and goals will be further refined as the work takes shape.

Future reports may include new or revised performance indicators that are tailored to the efforts and intended outcomes for Minnesotans. All time-bound goals are dependent on DHS's success in attaining resources such as funding, contracts, consultants, vendors, and staff who can provide the deliverables needed to achieve the stated goals.

II. Legislation

Minnesota Session Laws 2023, Chapter 70, Article 15, Section 10.

Section 10. INFORMATION TECHNOLOGY PROJECTS FOR SERVICE DELIVERY TRANSFORMATION.

Subdivision 1. Uses of appropriations.

Amounts appropriated to the commissioner of human services for subdivisions 3 to 7 must be expended only to achieve the outcomes identified in each subdivision. The commissioner must allocate available appropriations to maximize federal funding and achieve the outcomes specified in subdivisions 3 to 7.

Subd. 2. Reports required.

(a) The commissioner of human services, in consultation with the commissioner of information technology services, must submit a report to the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services policy and finance by October 1, 2023, that identifies:

(1) a schedule of planned completion dates for the projects included in subdivisions 3 to 7;

(2) the projected budget amount for each project included in subdivisions 3 to 7; and

(3) baseline metrics and other performance indicators against which progress will be measured so that the outcomes identified in subdivisions 3 to 7 are achieved.

(b) To the extent practicable, the metrics and performance indicators required under paragraph (a) must be specific and expressed in easily understood terms; measurable; achievable; relevant; and time bound. Any changes to the outcomes, metrics, or other performance indicators under this subdivision must be developed in consultation with the commissioner of information technology services and reported to the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services policy and finance in the report submitted under paragraph (c).

(c) By October 1, 2024, and each October 1 thereafter, until all funds are expended or all outcomes are achieved, whichever occurs first, the commissioner must submit a report to the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services policy and finance that identifies the actual amounts expended for each project in subdivisions 3 to 7, including a description of the types and purposes of expenditures. The report must also describe progress toward achieving the outcomes for

each project based on the baseline metrics and performance indicators established in the report required under paragraph (a) during the previous fiscal year.

Subd. 3. Transforming service delivery.

Any amount appropriated for this subdivision is to advance efforts to develop and maintain a person-centered human services system by increasing the ease, speed, and simplicity of accessing human services for Minnesotans, and for county, Tribal, and state human services workers. Outcomes to be achieved include:

(1) funding foundational work and persistent cross-functional product teams of business and technology resources to support ongoing iterative development that:

(i) improves the experience of Minnesotans interacting with the human services system, including reducing the overall time from an application to the determination of eligibility and receiving of benefits;

(ii) improves information technology delivery times and efficiency of software development by increasing business agility to respond to new or shifting needs; and

(iii) improves the experience of county and Tribal human services workers;

(2) developing and hosting dashboards, visualizations, or analytics that can be shared with external partners and the public to foster data-driven decision making; and

(3) other outcomes identified by the commissioner under subdivision 2, paragraph (b).

Subd. 4. Integrated services for children and families.

(a) Any amount appropriated for this subdivision is to stabilize and update legacy information technology systems, modernize systems, and develop a plan for the future of information technology systems for the programs that serve children and families. Outcomes to be achieved include:

(1) reducing unscheduled downtime on Social Services Information System by at least 20 percent;

(2) completing the transition of automated child support systems from mainframe technology to a web-based environment;

(3) making information received regarding an individual's eligibility for benefits easier to understand;

(4) enhancing the child support participant portal to provide additional options for uploading and updating information, making payments, exchanging data securely, and providing other features requested by users of the portal; and

(5) other outcomes identified by the commissioner under subdivision 2, paragraph (b).

(b) The commissioner must contract with an independent consultant to perform a thorough evaluation of the SSIS, which supports the child protection system in Minnesota. The consultant must make recommendations for

improving the current system for usability, system performance, and federal Comprehensive Child Welfare Information System compliance and must address technical problems and identify any unnecessary or unduly burdensome data entry requirements that have contributed to system capacity issues. The consultant must assist the commissioner with selecting a platform for future development of an information technology system for child protection.

(c) The commissioner of human services must conduct a study and develop recommendations to streamline and reduce SSIS data entry requirements for child protection cases. The study must be completed in partnership with local social services agencies and others, as determined by the commissioner. The study must review all input fields required on current reporting forms and determine which input fields and information are required under state or federal law. By June 30, 2024, the commissioner must provide a status report and an implementation timeline to the chairs and ranking minority members of the legislative committees with jurisdiction over child protection. The status report must include information about procedures for soliciting ongoing user input from stakeholders, progress on solicitation and hiring of a consultant to conduct the system evaluation required under paragraph (a), and a report on the progress and completed efforts to streamline data entry requirements and improve user experience.

Subd. 5. Medicaid Management Information System modernization.

Any amount appropriated for this subdivision is to meet federal compliance requirements and enhance, modernize, and stabilize the functionality of Minnesota's Medicaid Management Information System. Outcomes to be achieved include:

(1) reducing disruptions and delays in filling prescriptions for medical assistance and MinnesotaCare enrollees, and improving call center support for pharmacies and enrollees to ensure prompt resolution of issues;

(2) improving the timeliness and accuracy of claims processing and approval of prior authorization requests;

(3) advancing the exchange of health information between providers and trusted partners so that enrollee care is timely, coordinated, proactive, and reflects the preferences and culture of the enrollee and their family; and

(4) other outcomes identified by the commissioner under subdivision 2, paragraph (b).

Subd. 6. Provider licensing and reporting hub.

Any amount appropriated for this subdivision is to develop, implement, and support ongoing maintenance and operations of an integrated human services provider licensing and reporting hub. Outcomes to be achieved include:

(1) creating and maintaining user personas for all provider licensing and reporting hub users that document the unique requirements for each user;

(2) creating an electronic licensing application within the provider licensing and reporting hub to ensure efficient data collection and analysis;

(3) creating a persistent, cross-functional product team of business and technology resources to support the ongoing iterative development of the provider licensing and reporting hub; and

(4) other outcomes identified by the commissioner under subdivision 2, paragraph (b).

Subd. 7. Improving the Minnesota Eligibility Technology System functionality.

Any amount appropriated for this subdivision is to meet federal compliance requirements and for necessary repairs to improve the core functionality of the Minnesota Eligibility Technology System to improve the speed and accuracy of eligibility determinations and reduce the administrative burden for state, county, and Tribal workers. Outcomes to be achieved include:

(1) implementing the capability for medical assistance and MinnesotaCare enrollees to apply, renew, and make changes to their eligibility and select health plans online;

(2) reducing manual data entry and other steps taken by county and Tribal eligibility workers to improve the accuracy and timeliness of eligibility determinations;

(3) completing necessary changes to comply with federal requirements; and

(4) other outcomes identified by the commissioner under subdivision 2, paragraph (b).

https://www.revisor.mn.gov/laws/2023/0/Session+Law/Chapter/70/

III. Introduction

Purpose of report

As outlined in Minnesota Session Laws 2023, Chapter 70, Article 15, Section 10, Subdivision 2, a report must be submitted on October 1 of every year until all funds are expended or all outcomes are reached. The report identifies the amounts, types, and purposes for expenditures, and progress towards achieving outcomes for each project. This report conveys this information for the period from October 2023 to August 2024.

This report also aims to share relevant information about the new ways DCYF, DHS, and MNIT are approaching its work through Service Delivery Transformation. As these projects take an iterative approach to reaching the needs of the people served, this report shares many of the successes and lessons learned from the past year.

Report preparation

This report was prepared by DHS Office of Strategy and Performance staff members, in collaboration with DHS, DCYF, and MNIT staff.

IV. Background

Service Delivery Transformation reinvents human services delivery by responding to the needs of people, Tribes, and counties to create a better, easier experience for everyone.

This is the vision for Service Delivery Transformation (SDT), a multi-year effort to implement the full paradigm shift in the approach to connect Minnesotans to critical human services.

Historically, the Minnesota Department of Human Services (DHS) has developed information technology (IT) solutions slowly and without continuous input or involvement of the people most impacted by IT system changes – clients, Tribal Nations, counties, and service providers. Operating this way creates frustration for impacted communities, because they experience pain points that are unresolved or exacerbated, and improvements take too long to implement. Further, DHS programs have operated separately from one another, forcing Minnesotans to complete separate applications and provide the same information to multiple program areas. Tribal Nations, counties, and service providers are put in a similar position, where they may be working with the same client but need to navigate multiple DHS IT systems, processes, and points of contact to manage the person's situation.

DHS is addressing these issues by transforming the way it delivers services to Minnesotans, from business processes to policies, as well as digital services. DHS is building toward integrated service delivery, where program areas work together with clients, Tribal Nations, counties, and service providers, to center their experience and address their needs through a single interaction. SDT moves toward a more holistic, person-centered model that addresses clients' and partners' pain points while breaking down unnecessary separation between human services programs and systems. This initiative also transforms how DHS approaches policy, allocates legislative and other forms of funding, and conducts performance measurement. DHS has received legislative approval for strategic funding to enhance infrastructure, bring in expertise, and adjust the approach to managing services to move the human services system toward this new shared vision.

The overarching goals of SDT are to:

- Collaborate across teams and agencies to collectively deliver for the people DHS serves and meet the needs of all Minnesotans.
- Improve measurement and tracking of public outcomes through ongoing system and service enhancements.
- Support innovation and efficiency by providing partners with more access to DHS systems and data.
- Support equity initiatives by listening to and acting on the needs expressed by impacted populations during the decision-making process.
- Investigate operational practices and digital service options to reduce administrative burden on all partners and customers.

The key transformation is a shift in DHS mindset to focus on the end users' experiences and needs. These efforts involve ongoing iterative development of products—including IT tools, functionality, and applications—intended to develop and maintain a person-centered human services system. The product approach is designed to increase the ease, speed, and simplicity of accessing human services, by providing continuous improvements that are identified and prioritized by the systems' users. However, this shift to person-centered thinking is not

limited to product teams; SDT's project teams are transforming their work to focus on value to people served and the workers that provide those services.

The initial work to transform service delivery using product teams started prior to receiving funding during the 2023 session; the results of those efforts showed promise of even greater outcomes with additional investments. The legislative funding received support SDT initiatives to continue, expand, or build upon several of these teams' efforts. This work will be ongoing, and measurements and outcomes for that work will be adjusted to reflect changes in understanding of the needs of partners and the people DHS serves. SDT is a full-scale shift in the way DHS operates and will have ongoing costs. One-time funding is essential for launching the initial work, and transformation efforts will require sustained funding.

V. Service Delivery Transformation and product lines of focus for FY2024-2025

This report focuses on the allotted funding for Service Delivery Transformation efforts across five initiative areas. These initiatives focus on developing infrastructure improvements, stabilizing and modernizing legacy systems, improving client experiences, supporting adoption and implementation of new methodologies, and addressing urgent issues to meet federal compliance. Across all five initiatives, the goal is to improve systems and processes to better work with and meet the needs of DHS's clients and partners. Throughout the year, teams have been working iteratively to produce ongoing value for the people DHS serves. The approach taken has been thoughtful and strategic, to ensure what is being produced meets partners' and clients' needs. It has also provided opportunities for learning and growth within teams as they identify possible ways to solve challenges, partner with others, and collect data to show results.

Each of the initiative sections below provides an overview of the initiative, information on budget and expenditures, a description of the identified outcomes and their importance, achievements since the last report, a chart outlining milestones within a given outcome, and a table of outcomes and performance indicators.

In July 2024, the Department of Children, Youth, and Families (DCYF) was launched as a new state agency in Minnesota, which brought together several youth and family serving programs to better serve Minnesotans. Several initiatives included in this report have or will be moving from DHS to DCYF or shared between the two agencies. Sections discussing these initiatives now mention both DHS and DCYF in their narratives.

Timeline

Appropriations for service delivery transformation have been approved for FY2024 and FY2025. Each of the five funded initiatives described below have their own outcomes, deliverables, and timelines. A milestone graphic is included for each initiative area in their respective sections.

The work will be achieved in phases. This funding is for the initial phase. In many cases, that means getting the products off the ground before measuring towards outcomes. Sustained funding will be needed for the transformation to be successful. The initial spending toward these efforts has started slowly, largely due to the need for planning and engagement to ensure the work meets the needs of end users. Additionally, DHS had

significant capacity constraints over the past year. These constraints included Centers for Medicare and Medicaid Services (CMS) unexpectedly tightening timelines for all states to comply with new eligibility and enrollment requirements; this resulted in timely and important improvements for clients, Tribal Nations, and counties but also pulled some of DHS's capacity away from other SDT-funded work. Staff time and energy were also constrained by the work required as DHS prepared to split into three agencies: the Department of Human Services; Department of Children, Youth, and Families (DCYF); and Department of Direct Care and Treatment (DCT). Despite competing demands on DHS and MNIT resources, measurable progress was made in the first year. Lower than expected spending resulted from the use of other funding for work on eligibility and enrollment requirements if the work did not qualify for SDT funding under current law or if alternative sources of funding were available. Significant investments in the five initiatives of SDT are on the horizon.

Budgets & Expenditures

Across initiatives, teams significantly underspent compared to their annual budgets. Underspending was due to many factors including the timeline considerations referenced above. Notably, the creation of two new agencies and the need to meet those deadlines required significant capacity. Additionally, there was a significant number of new efforts that were part of the 2023 legislative session that require IT development. The personnel required to complete both the agency transition and legislative implementation far exceeded the capacity that DHS, DCYF, and MNIT had on staff to meet the needs. The time it takes to hire state staff or bring in staff augmentation contractors delayed start dates. However, some work requires a level of expertise that cannot be filled with contractors, and DHS/DCYF/MNIT must wait until state staff become available to do the work. For example, business subject matter experts are not a role that can be filled by new or contracted staff without significant onboarding and training. This has caused internal prioritization that is delaying the start of some efforts.

Specific budget and expenditure information is included within each of the initiative subsections below.

A. Transforming Service Delivery

Description

The state will simplify and streamline IT delivery systems for clients, Tribes, counties, and providers. DHS and its partners will adopt evolving best practices and uphold program integrity during system modernization efforts. Operational funding will enable planning and implementation of an integrated, person-centered experience for individuals and families who access programs, allowing systems to adapt to ever-changing client needs. A sustained, long-term budget will establish foundational infrastructure improvements to stabilize and replace 20-year-old systems and ensure timely, data-driven decision making.

DHS is building toward integrated service delivery where multiple program areas work together to center the client and address their needs through a single interaction. MNbenefits is a key example of this, as an online solution where Minnesotans can complete one application for several support programs, including food assistance, cash benefits, childcare support, emergency assistance, and some types of housing support. DHS will continue to use and improve MNbenefits' person-centered service delivery application. The Integrated Service Delivery (ISD) product line, which includes the MNbenefits, Client Experience and Worker Experience product teams, and a Data product team in development, are working to improve Tribal and county workers' experience

by reducing pain points that take up precious time that could be spent working with clients. The future direction of the ISD product line aims to expand the variety of benefits and services that Minnesotans can apply for in one application through a universal eligibility and enrollment (UEE) model.

The shared vision for universal eligibility and enrollment (UEE) is to provide a simple, welcoming, and quick path to medical, food, cash and other services that support children, youth, adults, and family well-being. The UEE model brings this vision to life so people can thrive. It will provide an easy place for residents to find, apply, and receive benefits for multiple programs, providing an accessible and equitable experience, whether its online, by phone, or in-person at a Tribal Nation or county location. Putting the person at the center means integrating DHS services, resident information, and client support to create a universal experience for the people we serve.

Strategic internal changes are key to the success of Service Delivery Transformation. As this transformation grows, DHS continues to implement and mature its foundational frameworks. Those frameworks include the following:

- Community and partner engagement supports equity initiatives by listening to and acting on the needs of impacted populations, including residents, providers, Tribal Nations, counties, and DHS staff.
- User experience (UX) conducts research and tests new software layouts, language, and workflows to ensure that products are person-centered, easy to understand, and accessible to audiences.
- Change management resources and tools guide the agency through the transformation that will lead to person-centered, equitable decision making, and desired agency outcomes.
- Evaluation and performance measurement resources measure the outcomes and benefits that are delivered to achieve a more efficient and effective experience for clients, Tribal Nations, counties, providers, and DHS.
- Enterprise architecture guides and provides organizational structure to ensure products and projects align with the overall vision of integrated services.
- Some existing systems will be maintained while larger transformation efforts are taking place; this allows DHS to address security vulnerabilities that are found and prevent them from being exploited.

Meaningful change is only possible by establishing an agency culture that prioritizes improving with and for people and communities directly impacted by the human services system.

Budget & Expenditures

In addition to the overarching trends in budgetary spending for SDT (described earlier in this report), spending related to the Transforming Service Delivery initiative has been impacted by changes in 2024. In the past year, DHS's Chief Service Transformation Officer (CSTO) position became vacant. In the absence of this role that is a key driver of SDT, several aspects of the transformation slowed down, which impacted spending. As this position is anticipated to be filled in early 2025, transformation activities are expected to ramp up and expenditures will match this rate of change.

Fiscal Year 2024 Budget & Expenditures

Outcomes: The funding for Transforming Service Delivery contributes to all five outcomes: (A1) improve the experience of Minnesotans interacting with the human services system; (A2) increase business agility to respond

to new or shifting needs, in order to (A3) improve delivery times for digital services and solutions; (A4) improve the experience of Tribal and county human services workers, and (A5) develop and host dashboards, visualizations, or analytics that can be shared with external partners and the public to foster data-driven decision making. These five outcomes are intertwined within the work; the funding cannot be separated by outcome.

Purpose of the Expenditure	Type of Expenditure	FY24 Amount Budgeted	FY24 Amount Expended
ISD Product Line resources	DHS State Personnel	1,877,250	681,212
ISD Product Line resources	MNIT State Personnel	3,027,039	2,465,059
ISD Product Line resources	MNIT Staff Augmentation	788,750	627,090
ISD Product Line resources	Hardware/Software/Licenses	25,500	31,128
ISD Product Line resources	MNIT Enterprise Services	9,750	2,422
ISD Product Line resources	General Administration	88,500	20,431
Existing SDT operational positions without a permanent funding source	DHS State Personnel	6,107,544	2,978,294
Foundational work needed to support SDT	DHS Service Contracts	554,000	554,000
Business Technology Management	DHS State Personnel	45,000	39,226
State Staff - MNIT	MNIT State Personnel	86,000	-

Outcomes / Key Deliverables

Over FY2024 and FY2025, DHS will fund foundational work and persistent cross-functional product teams of business and technology resources to support ongoing iterative development that: (A1) improves the experience of Minnesotans interacting with the human services system; (A2) increases business agility to respond to new or shifting needs, in order to (A3) improve delivery times for digital services and solutions; and (A4) improve the experience of Tribal and county human services workers. This effort will also (A5) develop and host dashboards, visualizations, or analytics that can be shared with external partners and the public to foster data-driven decision making.

Outcome A1: Improve the experience of Minnesotans interacting with the human services system, including reducing the overall time from an application to the determination of eligibility and receiving of benefits.

Why it's important

- All products and projects in the Service Delivery Transformation portfolio are working to improve the experience of Minnesotans interacting with the human services system. Ultimately, the goal of all SDT's work is to better serve Minnesotans.
- A prime example of how this outcome is operationalized sits within the Integrated Service Delivery (ISD) product line, which includes the MNbenefits, Client Experience, and Worker Experience product teams. In the past year, ISD has revised their vision to articulate this orientation: **Clear the path to benefits, because so much is riding on it.** *The fate of a family depends on getting the right support at the right moment. The path to benefits needs to be simple, welcoming, and quick. For everybody, every time.*
- ISD has focused their combined work towards the objective of reducing the overall time from benefits application to determination. Through their product teams focus on the MNbenefits application, client experience, and worker experience, the ISD team tackles the most pressing pain points in applying for and processing benefits applications, as identified by applicants and service providers at Tribal Nations and counties providing benefits in the state of Minnesota.

What happened since the last report

- The Client Experience product team is piloting their client texting capabilities to 2 Tribal Nations and 12 counties, reaching 68,901 applicants as of June 18, 2024. Receiving timely texts confirming that the application has been routed to the appropriate Tribal Nation or county, and an estimated wait time of when they should hear back from an enrollment worker not only provides transparency to the applicant, but also intends to reduce case workers' time spent fielding phone calls for application status updates.
- The Client Experience product team is now in the discovery phase of expanding the client notification process to include email confirmations.
- In the spirit of ongoing, iterative improvement, the MNbenefits team has made many enhancements to the MNbenefits application system that improves the process for applicants and case workers processing applications. This includes improving the routing of uploaded documents to reduce the volume of documents incorrectly routed to a Tribal Nation. They are also adding fields to collect Child Care Assistance Program (CCAP) information to speed up the eligibility determination process.
- The User experience (UX) team is conducting research and testing new application layouts, language, and workflows, to make the application experience friendlier and easier. As part of standard practice, user testing is leveraged to improve the layout and flow of MNbenefits pages. The MNbenefits team is intentional about how pages are designed so people can find what they need.
- The ISD Community Engagement team held community outreach events with members of the Latino/a and Somali communities. These sessions have provided the ISD product teams with valuable insights on the pain points and opportunities for making MNbenefits work better for the communities we serve.
- A challenge the ISD team has worked to overcome this year involves accessing the data to track their progress towards their goal of reducing the time it takes a qualified applicant to receive benefits. Due to several factors, including multiple determinations steps, limitations to previous timeliness measures, and

the identification of new objectives without existing data sources, there have been challenges in identifying and tracking progress. The team is tackling this by analyzing data that they currently have available, while developing new methods to increase data quality for future reporting.

Texting Pilot Launched
[JUL 2023]

Email Capabilities Pilot Launch

12 Counties and 2 Tribal Nations
Participating in Text Pilot
[JUL 2024]

Figure 1: Improve the experience of Minnesotans interacting with the human services system Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome A2: Increase business agility to respond to new or shifting needs.

Why it's important

- Business agility, or the ability to pivot and respond to new or shifting needs, is important because it allows product teams to keep their users at the center of the work.
- Open and ongoing communication with Tribal Nations, counties, and Minnesotans applying for/receiving services is critical to agility, as it provides product teams with insights on what needs are priority.
- Sprint reviews[1] are an effective method to engage with partners, share current priorities and efforts, gain feedback on new features, and gauge whether to course-correct to other urgent priorities. Sprint reviews are held online and are open to all DHS and MNIT staff, and partners at Tribal Nations and counties.
- Tribal Nations and counties benefit from sprint reviews by learning about and giving input on new product features before they are released. By opening the space to all involved in or impacted by the work, product teams can increase their agility by shifting their work to the needs of the end users.
- In addition to sprint reviews, product teams create close feedback loops with their end users in Tribal Nations and counties as they identify needs and build solutions.

What happened since the last report

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[1] Sprint reviews are informal meetings held at the end of a work iteration, where the product team, users and others can ask questions, demonstrate and review developed features, and give feedback to guide the direction forward (Source: https://www.atlassian.com/agile/scrum/sprint-reviews)

- As of June 2024, 12[2] of 14 of DHS's product teams hold regular sprint reviews, providing Tribal Nations and counties the opportunity to provide feedback on new product features before they are released to ensure they meet the end users' needs.

- The ISD Product Line and the Provider & Agency Solutions (PAS) Product Line hold bi-weekly sprint reviews; these spaces are used to share and get feedback on the product line's collective news and direction, as well as specific showcases from each of their respective product teams.
- The eDocs and APD Product Teams also hold regular bi-weekly sprint reviews.

Figure 2: Increase business agility to respond to new or shifting needs Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome A3: Improve delivery times for digital services and solutions [3]

Why it's important

- By adopting an agile, product-focused approach to information technology development, Service Delivery Transformation produces solutions in iterative cycles. Instead of taking years to develop a full-scale change to a process or system, SDT works to produce smaller, useable products that can be deployed quickly to clients, Tribal Nations, counties, and partners. This approach allows solutions to be immediately helpful to impacted populations.
- By delivering value in increments, partners can test and provide feedback on new technology features, allowing product teams to adjust their work to create products that truly meet the needs of users.

What happened since the last report

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[2] The 12 product teams that hold regular sprint reviews are: MNbenefits, Worker Experience, and Client Experience (ISD Product Line); Licensing Provider Hub, Licensing Agency Hub, Program Integrity Hub, Wayfinder/Grants Management, Attendance and Enrollment, CCAP Provider Registration, and Early Learning Scholarships (PAS Product Line); and the eDocs and APD product teams.

[3] This outcome was rewritten as the previous version did not include the work of the full product team, which encompasses program, policy and IT efforts. The revised outcome addresses this by expanding the scope to include digital services and solutions.

- Product teams operate in sprints, where the work is broken into smaller sets of accomplishments added in two-week cadences.
- SDT is currently exploring tools and methods to effectively measure progress toward delivering value to the customer. Burndown metrics that describe which prioritized items a team took on in each sprint, and whether the items were completed in a timely manner hold much promise as performance indicators toward delivering value to customers.
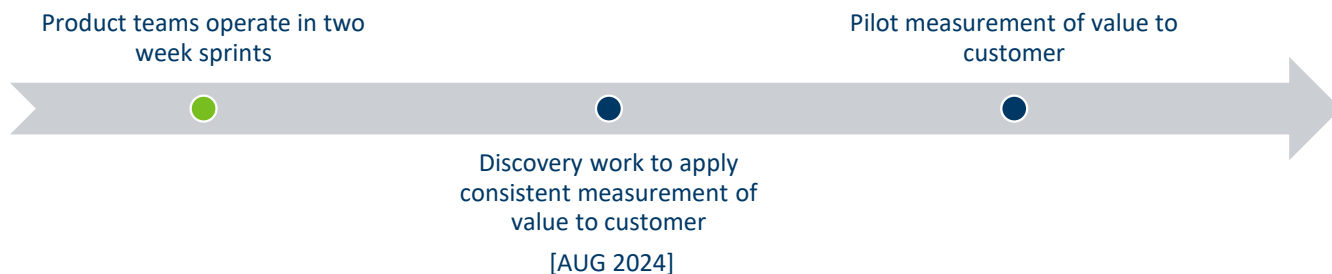
Product teams operate in two week sprints

Pilot measurement of value to customer

Discovery work to apply consistent measurement of value to customer

[AUG 2024]

Figure 3: Improve information technology delivery times and efficiency of software development Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome A4: Improve the experience of Tribal and county human services workers.

Why it's important

- Service Delivery Transformation aims to make it quicker and simpler for Tribal and county workers to interact with DHS, allowing more time to focus on providing services to Minnesotans.
- SDT engages with Tribal Nations and county workers to learn more about the pain points they experience while providing services and then quickly address them.
- Within the ISD product line, Client Experience and Worker Experience are tackling pain points that Tribal Nations and county workers identified as barriers to their work. Early user experience research indicated that case workers spend a lot of time fielding calls from applicants checking on their case status. This takes case workers' time away from processing the applications, which slows down the benefits determination process.

What happened since the last report

- The ISD team engages with Tribal Nations and county workers in multiple ways to gain feedback on current features and ongoing pain points the product teams can address. Engagement methods include focus groups, user experience research, sprint reviews, individual conversations between product teams and partner entities, and engagement with existing groups such as the Human Services/County IT alignment group.
- One specific example of effective collaboration can be seen through the Application Status Tracker Advisory workgroup, a cross-section of small, medium, and large Tribal Nations and county partners who process SNAP and Cash Assistance Applications and DHS program partners. This workgroup provides insights and guidance to the Worker Experience team as they develop an application status tracker that will allow benefit applicants to check their application status virtually.

- The Application Status Tracker mentioned above is currently in development. It will enhance application status transparency and provide clear instructions to applicants regarding next steps to keep their application on track. One of the pain points Tribal Nations and county case workers have raised is not receiving the required verifications in time, causing applications to be closed or denied. The Application Status Tracker displays the required verifications needed, providing applicants information faster and more efficiently than through mail communication. This tool will not only improve the experience of applicants by providing their application status and next steps in real-time, but it will also reduce the number of calls Tribal Nations and counties receive asking for status updates.
- The performance indicator for this outcome has shifted from "Average amount of time needed for a Tribal or county worker to process a MNbenefits application" to a focus on reducing call volume for Tribal Nations and county workers. Reducing call volume, particularly calls about application status, is within the ISD product line's wheelhouse. Many factors contribute to the time it takes to process benefits applications; the ISD product line is positioned to alleviate administrative burdens that can slow down processing time. UX researchers found that fielding incoming calls was a major limitation on workers' time. Client Experience and Worker Experience teams have been working to alleviate this issue by providing information and tools to applicants that address application status. This improves communication to applicants, while reducing call volume for workers, and ultimately supports reducing the time it takes to get eligible applicants enrolled in benefits.
- This year, the ISD team has been working to identify tools to measure progress towards reducing the time and burden of fielding status update calls, which are generally not helpful in moving case progress forward. The ISD Data Team is working with Client Experience and Worker Experience teams to identify the best way to track change going forward.
- Product teams evaluate and prioritize work with partners where appropriate. For example, the MNbenefits team is working with counties implementing CCAP program to learn about how the new questions and features are working so far and prioritizing any needed improvements in these features.

Application Status Tracker in Discovery & Delivery [ONGOING]

Application Status Tracker Full Launch [SPRING 2025]

Application Status Tracker Pilot [WINTER 2025]

Figure 4: Improve the experience of Tribal Nations and county human services workers Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome A5: Develop and host dashboards, visualizations, or analytics that can be shared with external partners and the public to foster data-driven decision making.

Why it's important

- Service Delivery Transformation has a goal of sharing its journey with external partners and the public for increased transparency, partnership, and using data to make programmatic decisions.
- By creating dashboards, visualizations, or other analytic tools, SDT aims to share accurate and easy to understand results about its progress toward outcomes.

What happened since the last report

- Visuals and tools are regularly shared with partners in product line and SDT sprint reviews, and on the SharePoint Product Hub. An example of information sharing in the ISD product line can be seen in the Client Experience product team, where analytics from the texting pilot are shared regularly during sprint reviews that are open to DHS/MNIT staff and partners at Tribal Nations and counties.
- A new product team under the ISD product line that focuses on data is currently being stood up. As capacity is built, this team will likely do work to advance dashboards, visualizations, and/or analytics.
- Next steps include improving access to data visualizations for partners, and identifying additional data that would be helpful to partners and the public to ensure that any analytics or visualizations created provide value to those audiences.

Identifying available and newly collected data [Ongoing]

Identify helpful data for public audiences

Sharing existing data and analytics with partners [2024]

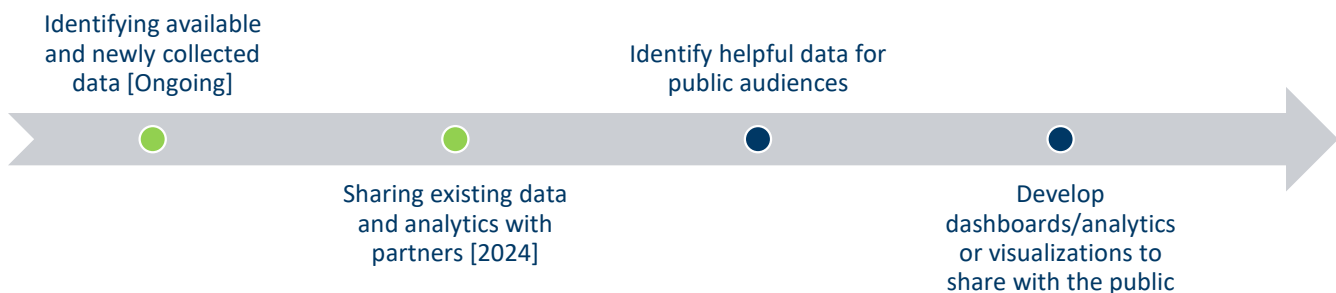Develop dashboards/analytics or visualizations to share with the public

Figure 5: Develop and host dashboards, visualizations, or analytics that can be shared with external partners and the public to foster data-driven decision-making Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome A6: Fund foundational work by providing business and technology resources to persistent cross-functional product teams to support ongoing iterative development.

Why it's important

- This is the budget for the work that supports all the preceding outcomes. To do the work of developing solutions that respond to the needs of Minnesotans, Tribal Nations, counties, and other partners, persistent cross-functional product teams need to be implemented, staffed, and resourced.
- Consistently funding these teams is necessary to keep the work flowing; while this report presents the number of product teams as a performance indicator to represent this work's breadth, there is also a depth to funding product teams to ensure continued growth and performance. This includes resourcing the foundational frameworks that support product teams, including community engagement, change management, evaluation, enterprise architecture, and system security.

What happened since the last report

- The Provider Licensing & Reporting Hub has expanded from one product team to the Provider & Agency Solutions (PAS) product line. This change supports the expansion of the Provider Licensing & Reporting Hub platforms to encompass a wider range of processes and license types. The new PAS product line is made up of seven teams, including three OIG Enterprise teams (Licensing Provider Hub, Licensing Agency Hub, and the Program Integrity Hub) and four additional teams that are managed outside of DHS's Office of the Inspector General's (OIG) office (Wayfinder/Grants Management, Attendance and Enrollment, CCAP Provider Registration, and Early Learning Scholarships).
- Community and partner engagement supports equity initiatives by listening to and acting on the wants and needs of impacted populations, including residents, providers, Tribal Nations, counties, and DHS staff. The Business Solutions Office (BSO), the ISD product line, as well as DHS and MNIT Shared Services (Tribal and Community Engagement, Evaluation and Measurement, and Digital Experience) have been working together to gather feedback from clients and caseworkers. Two events have been held to date with Latino/a and Somali communities; four additional events will be held before September 30, 2024, with African American communities, rural communities, and urban American Indian communities respectively. Through community engagement events, ISD has learned from the lived experiences of participants and communities applying for services through DHS, collecting information about pain points and areas for improvement in the application process.
- Evaluation and performance measurement resources identify the outcomes and benefits that are delivered to achieve a more efficient and effective experience for clients, Tribal Nations, counties, providers, and DHS. Since October 2023, the evaluation team has supported several SDT teams with identifying their goals, outcomes, and strategies through the development of logic models. These models help teams identify and communicate what they hope to achieve and how they will get there, setting a foundation for measuring progress toward those goals. The evaluation has also supported partnerships with counties by conducting a case study of a successful county-SDT leader partnership, and the study's findings are actively being shared and promoted within DHS to improve partnership processes.
- Enterprise and Business Architecture guide and provide organizational structure to ensure products and projects align with the overall vision of integrated services. Since October 2023, the business architecture team has established and published templates for the Mission Model Canvas (MMC) to help define the overall mission and goals of the organization, and the Value Proposition Canvas (VPC) to identify how the organization delivers value to its customers. They have created a working document that cross maps the organizational map to the functions each job serves, highlighting capabilities across the organization. They have conducted a business scenario overview and mapping with the Integrated Service Delivery (ISD) team to identify problems, opportunities, and value streams for participants impacted by ISD's initiatives. Finally, the Business Architecture team has started work on developing an SDT taxonomy which provides a framework for organizing and identifying SDT products.
- A pilot tool has been launched that houses the major systems metadata. This allows staff to better understand what data we have currently, but it holds all the inconsistencies of the dictionaries in their current state. For new systems or forms being stood up, the interim enterprise data dictionary allows teams to confirm whether their data design for any element aligns with other systems.
- A team of data scientists and shared services connect bi-monthly to share updates on the ISD objectives and key results (OKRs), to confirm alignment with the overall goals of SDT for analytics and reporting. Quarterly progress is shared with ISD leadership, product leads, and additional relevant partners. The

analytics time of data scientists and shared services also connects and resolves discrepancies in existing measures that are seeking to solve the same policy questions with different methodologies.
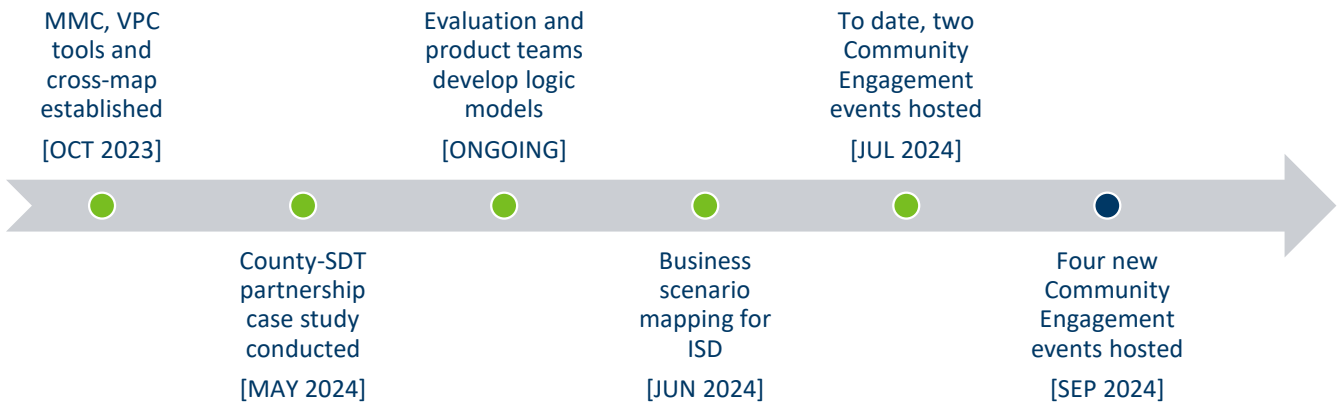

Figure 6: Fund foundational work by providing business and technology resources to persistent cross-functional product teams to support ongoing iterative development Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Transforming Service Delivery Outcomes Table

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
A1. Improve the experience of Minnesotans interacting with the human services system It will be quicker and easier for Minnesotans to interact with the human services system	1. Overall time from an application to eligibility determination (MNbenefits) 2. Overall time from an application to receiving benefits for eligible applicants (MNbenefits)	By the end of this funding cycle: 1. Overall reduction in the number of days from MNbenefits application submission to eligibility determination 2. Overall reduction in the number of days from MNbenefits application to receiving benefits for eligible applicants	1. In 2022, 84.37% of approved SNAP and Cash Assistance Applications to two Tribal Nations and 77 MN counties/service delivery areas were processed within 30 days of application submission.[4] 2. Not yet available. The ISD team is working toward measuring this.	1. In 2023, 82.77% of approved SNAP and Cash Assistance Applications to two Tribal Nations and 77 MN counties/service delivery areas were processed within 30 days of application submission.[5]

[4] These measures come from the state of Minnesota's Human Services Performance Management System. While it provides a good indicator of statewide trends in timeliness to approval of SNAP and Cash Assistance, this information is not limited to applications submitted through MNbenefits. This information also does not include applications that resulted in a denial of services. While the MNbenefits application includes other benefits programs, SNAP and Cash Assistance are the primary applications received through MNbenefits.

[5] Many factors have contributed to the slight drop in state-level performance of this measure between 2022 and 2023, including an increase in the number of applications, staffing challenges across counties and programs, agencies' need to focus on the health care unwinding, and changes to SNAP policy that affect use of state technology systems.

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
A2. Improve delivery times for digital services and solutions. By adopting agile practices, product teams will consistently deliver value to their users.	1. Use of backlog to prioritize work. 2. Burndown rates for backlog work.	1. All product teams will use a backlog to prioritize work. 2. Burndown rates will show consistency or increase in productivity across sprints.	1. As of October 2023, 100% of product teams were using a backlog to prioritize their work. 2. Burndown rates are not yet being calculated across teams.	1. As of September 2024, 100% of product teams use backlogs to prioritize their work. 2. Will be shared in future reports.
A3. Increase business agility to respond to new or shifting needs. Improving DHS' ability to pivot its work focus allows it to consistently prioritize user needs.	Sprint reviews are regularly held for each product team.	By the end of this funding cycle, all product teams hold regular sprint review meetings to review efforts and get feedback to guide future work.	As of October 1, 2023, 7 of 9 product teams (77%) were holding regular sprint reviews.	As of July 2024, 12 of 14[6] Product Teams (85%) hold regular sprint reviews.

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[6] The Provider Licensing and Reporting Hub expanded into a full product line of multiple teams, accounting for 56% increase in the number of Service Delivery Transformation product teams.

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
A4. Improve the experience of Tribal human services and county workers. It is quicker and simpler for Tribal and county workers to handle administrative tasks, allowing more time to focus on providing services to Minnesotans.	Overall call volume for application status updates received by Tribal and county workers.	By the end of this funding cycle, there will be an overall reduction in the call volume received by Tribal and county workers for application status updates, providing more time for Tribal or county workers to process applications.	Initial qualitative data from user experience interviews indicated a high call volume to county workers.	As of August 2024, a survey to Tribal Nations and county workers is in development to gauge call volume regarding status updates.
A5. Develop and host dashboards, visualizations, or analytics that can be shared with external partners and the public to foster data-driven decision making. Accurate reports about SDT's progress toward outcomes are available to external partners and the public.	1. Dashboards, visualizations, or analytics related to SDT exist. 2. Above tool(s) are shared with external partners. 3. Above tool(s) are shared with the public.	By the end of this funding cycle, at least one tool documenting progress toward SDT outcomes is available to external partners and the public.	As of October 1, 2023, no dashboards, visualizations, or analytics are consistently shared with external partners or the public.	Product team specific dashboards are shared in sprint reviews, which are attended by DHS and MNIT staff as well as partners at Tribal Nations and counties. Since October 1, 2023, the SDT team has been working to better define progress measurement and identify available data that could go into proposed dashboards, visualizations, or analytics.

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
A6. Fund foundational work by providing business and technology resources to persistent cross-functional product teams to support ongoing, iterative development. Funding is used to improve how DHS performs its work for the people being served.	Cross-functional product teams are operational and supported with foundational frameworks.	By the end of this funding cycle, at least nine (9) teams continue to operate, and two (2) additional teams will be developed.	As of October 1, 2023, 9 product teams operate within Service Delivery Transformation.	As of July 1, 2024, 14 product teams are in operation.

Table 1: Transforming Service Delivery Outcomes Table

B. Integrated Services for Children and Families

Description

New resources will stabilize legacy systems responsible for delivering more than $1.9 billion in benefits to hundreds of thousands of Minnesotans. The state will focus on improving the experience of clients who apply for safety-net programs.

To improve the experience of families and providers, the efforts under Integrated Services for Children and Families are working to stabilize and improve case management systems that providers depend on to complete their work. The Social Services Information System (SSIS) is a case management and data collection system used by over 10,000 Tribal and county social workers supporting child protection, foster care, adoption, children's mental health and other child welfare programs.[7] SSIS has a well-documented list of shortcomings that impact the social workers who depend on it. Within this initiative, staff are taking a three-pronged approach to addressing these issues by: reducing SSIS's downtime; studying and making recommendations on to streamline data entry for child protection cases; and hiring an external evaluator to explore SSIS's usability, performance, and compliance for the purpose of making recommendations for comprehensive child welfare information system (CCWIS) that can remedy existing challenges.

Providing Resources to Improve Support in Minnesota (PRISM) is a federally mandated computer system that supports Minnesota's Child Support Enforcement program.[8] PRISM currently exists on an outdated mainframe platform and there will soon be no staff with skills to maintain it. State staff are working to switch PRISM to a web-based system, enabling DCYF/DHS to hire people who can maintain and improve the system into the future.

DHS/DCYF will implement innovative, user-friendly updates to the client-facing child support system, Minnesota Child Support Online (MCSO). Enhancing the child support participant portal will provide additional options for uploading and updating information, making payments, exchanging data securely, and providing other features requested by users. In addition to making the portal easier for users, it will also reduce the workload of Tribal and county child support workers, as fewer clients would call for information that is accessible on the portal.

Finally, communications from the legacy system MAXIS to applicants and recipients will also be included in the service delivery improvements. This initiative will improve notices by making information about eligibility and benefits more accessible and easier to understand for applicants and recipients.

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[7] Minnesota Department of Human Services. (2022). Social Services Information System - SSIS
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4994-ENG

[8] Minnesota Department of Human Services. (2013). PRISM (Providing Resources to Improve Support in Minnesota).
https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=ID_000403

Budget & Expenditures

In addition to the overarching trends in budgetary spending for SDT (described earlier in this report), spending related to Integrated Services for Children and Families has been delayed but is anticipated to increase in the coming fiscal year, particularly for the following streams of work:

- MAXIS notices: The team is working to address production environment questions that were identified through the proof of concept. A contract amendment has been executed and the work will continue.
- MAXIS backlog: DHS hired staff in January 2024 to work on the backlog items, but MNIT was not able to get staff on board until August 2024. Now with staff on board for both business and MNIT, backlog items are being implemented.
- PRISM refactor: Advisory services will be retained to provide guidance and information on technical concerns raised by MNIT ahead of issuing an RFP for refactor and replatform.
- SSIS: The initial discovery work was done in-house and will now be moving on to implementation.
- BID / CCWIS: Funding is for staff, and it has taken longer to fill the positions. Work has been done to prepare, but hiring has taken a longer time.

Fiscal Year 2024 Budget & Expenditures

Outcomes: Funding for the Integrated Services for Children and Families initiative fall under discreet efforts and outcomes. The table below lists the outcome to which each expenditure contributes.

Purpose of the Expenditure	Type of Expenditure	FY24 Amount Budgeted	FY24 Amount Expended
P/T Contracts to support PRISM Refactor (Outcome B2)	DCYF/DHS State Personnel	218,568	-
State Staff- MNIT to support PRISM Refactor (Outcome B2)	MNIT State Personnel	134,552	2,227
Service Contract to support PRISM Refactor (Outcome B2)	MNIT Service Contract	37,500	-
P/T Contracts to support MAXIS Notices (Outcome B4)	Service Contract	449,182	-
State Staff-MNIT to support MAXIS Notices (Outcome B4)	MNIT State Personnel	45,455	-
State Staff-DHS to support MAXIS and MEC2 Backlog	DCYF/DHS State Personnel	-	225,468

State Staff-DHS to support CCWIS compliance (Outcome B6)	DCYF/DHS State Personnel		-	786,482

Outcomes / Key Deliverables

Over FY2024 and FY2025, DHS/DCYF will work to stabilize and update legacy IT systems, modernize systems, and develop a plan for the future of IT systems for the programs that serve children and families. Outcomes to be achieved include: (B1) reducing unscheduled downtime on Social Services Information System (SSIS) by at least 20 percent; (B2) completing the transition of automated child support systems (PRISM) from mainframe technology to a web-based environment; (B3) making information received from MAXIS regarding an individual's eligibility for benefits easier to understand; and (B4) enhancing the child support participant portal (MCSO) to provide additional options for uploading and updating information, making payments, exchanging data securely, and providing other features requested by users of the portal.

In addition to these outcomes, two additional studies are required. (B5) DCYF/DHS will contract with an independent consultant to perform a thorough evaluation of the SSIS, make recommendations for improving the current system for usability, system performance, and federal Comprehensive Child Welfare Information System (CCWIS) compliance, address technical problems and identify any unnecessary or unduly burdensome data entry requirements that have contributed to system capacity issues. The consultant must assist the commissioner with selecting a platform for future development of an information technology system for child protection. (B6) DHS/DCYF will conduct a study and develop recommendations to streamline and reduce SSIS data entry requirements for child protection cases.

Outcome B1: Reduce unscheduled downtime on Social Services Information System (SSIS) by at least 20 percent.

Why it's important

- DCYF/DHS will work to stabilize issues with SSIS that produce unexpected periods of downtime. Because of the system's age, maintaining its functionality is complicated but necessary for Tribal and county workers to be able to effectively serve clients.
- Reducing unscheduled downtime will give workers a more consistent experience, allowing them to plan workloads more proactively and better serve clients.
- This work will address pressing challenges in the short term, while the state explores long-term solutions through the two studies of SSIS.

What happened since the last report

- There has been an overall decrease in downtime, due to increased monitoring and communications. MNIT has allocated more staff time to monitoring all technical components that support SSIS, such as firewalls, enterprise-wide changes, and establishing an Incident Command team that includes staff from MNIT and business. However, daily access issues for users still occur, such as the application not

connecting or cutting out; these are not related to larger outages but must be solved for users to have consistent access to SSIS.

- A Request for Offer (RFO) was submitted to leverage preapproved vendors to address the daily access downtime issues. A Delphi architect was brought on to review and make recommendations on specific technical aspects of the SSIS system.
- RFO respondents were interviewed in May 2024. Initial results were delivered November 2024, and improvement
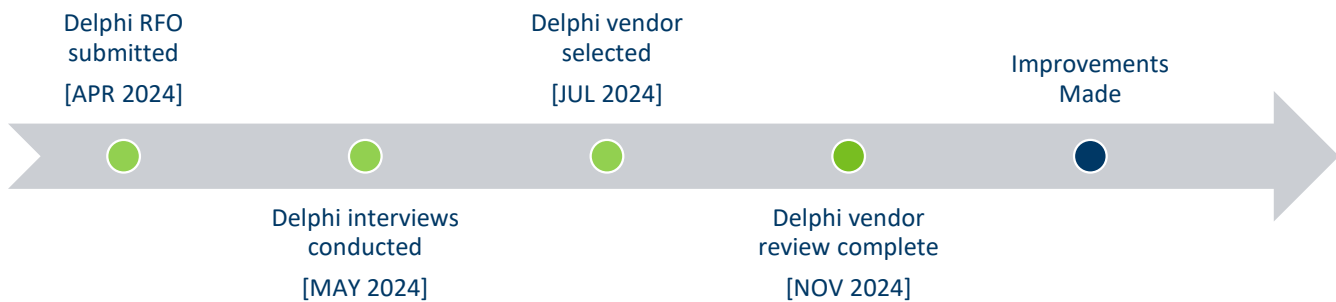
Delphi RFO submitted [APR 2024]

Delphi vendor selected [JUL 2024]

Improvements Made

Delphi interviews conducted [MAY 2024]

Delphi vendor review complete [NOV 2024]

Figure 7: SSIS System Downtime Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome B2: Complete the transition of automated child support systems from mainframe technology to a web-based environment.

Why it's important

- Refactor and replatform of PRISM is important from a system sustainability perspective. Refactoring is a process that converts older code into a modern programming language. Replatforming involves moving a system off the mainframe into a modern web-based environment. PRISM will be moved from an outdated system because there will soon be no IT staff with skills to maintain it. The web-based system will allow DCYF/DHS to hire IT staff who can maintain the system on an ongoing basis.
- This builds the foundation on which DCYF/DHS can later build features for users. Possibilities could include better presentation and functionality for workers. Improvements to Minnesota Child Support Online (MCSO) will be made after the refactor and replatform so the systems remain compatible with one another (Outcome B3).
- With the refactor and replatform, participants likely will not see immediate results. Tribal and county child support workers may see minor efficiencies. The reason this work is necessary is to maintain the stability of PRISM, by ensuring DCYF/DHS can retain staff that are able to maintain and improve PRISM in the long term.
- The plan to refactor and replatform is more affordable than buying a new system and may be easier from a change management perspective. PRISM interfaces with over 80 other systems, so consistency is key. This process will keep the data and the legacy systems running and accessible for current users.

What happened since the last report

- Since the last report, initiative efforts have focused on business and technical analysis.

- At the end of 2023, a Request for Information (RFI) was issued to address both moving off mainframe technology (PRISM) and enhancing MCSO. DHS and MNIT received several refactor and replatform proposals, some including replacement. All proposals responded to MCSO as well as PRISM needs.
- Demonstrations were held from several vendors in December 2023 and January 2024. MNIT and DHS child support, and Tribal and county support were in attendance.
- The next step is to retain advisory services to provide guidance and information on technical concerns raised by MNIT ahead of issuing a Request for Proposal (RFP) for refactor and replatform. The service provider will review the analysis that has been completed by DHS, DCYF, and MNIT for the refactor and replatform approach. They will also identify any gaps or errors requiring additional analysis that will help to clarify business problems that need to be solved and expected outcomes, as well as provide an investment summary of the refactor and replatform approach.
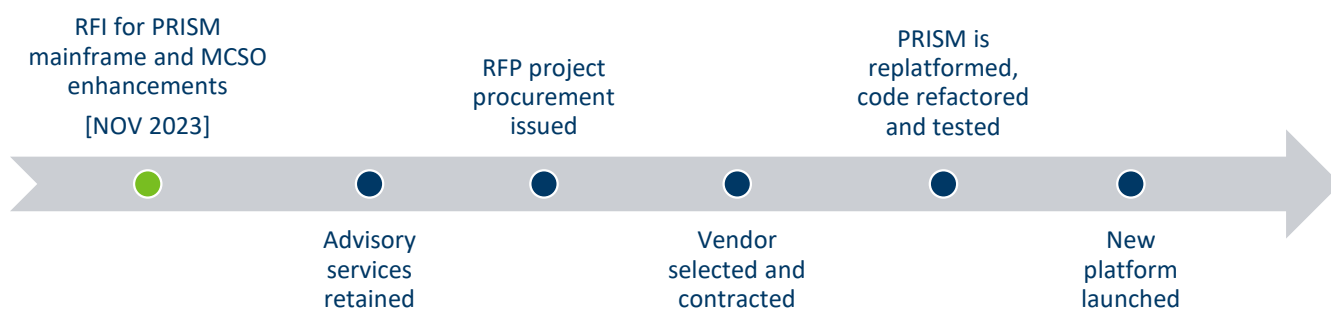

Figure 8: PRISM Replatform Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome B3: Enhance the child support participant portal to provide additional options for uploading and updating information, making payments, exchanging data securely, and providing other features requested by users.

Why it's important

- Features like document upload capabilities will improve timeliness and user experience for Minnesotans.
- When clients can relay information through the portal, proactive reporting can be accomplished with reduced staff duplication of efforts.

What happened since the last report

- Minnesota Child Support Online (MCSO) feeds into the PRISM system. Due to their interconnectedness, PRISM will be refactored and replatformed (Outcome B2) first, and then the work will shift to enhancing MCSO. This is a thoughtful decision to ensure both systems operate effectively together long term.
- Despite this timeline, all work on PRISM is conducted with an eye toward improving MCSO. For example, during the RFI process in late 2023, vendors presented information on potential MCSO enhancements alongside potential PRISM solutions.
- While PRISM replatforming is key to maintaining consistent access to data for case workers, MCSO enhancements will provide bigger outcomes to Minnesotans involved in child support.

Figure 9: MCSO System Improvement Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome B4: Make information received regarding an individual's eligibility for benefits easier to understand.

Why it's important

- Through the state of Minnesota's MAXIS system, applicants and recipients of many forms of assistance receive system-generated notices about their eligibility, enrollment, and benefit statuses.
- Currently, MAXIS notices tend to have poor readability and little clarity on what to do next. They also create challenges for DCYF, DHS and MNIT employees, as it is a lengthy, labor-intensive process to create and edit notices to meet recipients' information needs.
- DCYF/DHS is improving these notices by implementing the Adobe Experience Manager (AEM) application, beginning with notices about SNAP benefits.
- Through using AEM, (1) existing and new notice templates will be easier and more efficient for state staff to create and update, and (2) notice clarity, readability, and accessibility will be improved, helping clients better understand and manage their benefits or application status, and allowing them to make informed choices about how to respond to the notice.

What happened since the last report

- The MAXIS notices proof of concept using Adobe Experience Manager was completed with an outside vendor, and a demonstration was performed on March 21, 2024 for DHS business, the BSO and MNIT, and MNIT at DHS Chief Business Technology Officer (CBTO).
  - The demo successfully showed the creation of three notices that were generated based upon MAXIS approvals for active and closed case. The time limited recipient notice was created as a special run, as well as through the MAXIS approval process.
  - The demo showed how a worker could approve cases and generate PDFs from the MAXIS approval process. It also showed how comments could be added to the notice, emails could be generated, new functionality could display the PDF prior to approval, and that the notice PDF could be created, stored, and displayed in FileNet.
  - The demo also showed how AEM software could be used to create notice templates, merge text and MAXIS client data, and notice text could be maintained and updated by non-technical staff.

- o The proof of concept was a critical step to exploring feasibility of this solution before the next phase of preparing for broader application by building infrastructure.
- Next steps include ramping up this effort with staffing, technology, and more notices.
  - o Ongoing funding is necessary because the team is small, and infrastructure must support AEM.
  - o Beyond SNAP, other program areas are interested in making similar updates to their client communications, including the Minnesota Family Investment Program (MFIP), Diversionary Work Program (DWP), General Assistance (GA), Minnesota Supplemental Aid (MSA), Housing Supports, Refugee Cash Assistance (RCA), and Health Care.
  - o Planning and prioritization in converting DHS and DCYF notices at scale is needed to shift from proof of concept to operationalization, which will be a multi-year process requiring additional technology and staff resources. With the sheer volume of notices, it is necessary for infrastructure to be built for tackling the thousands of potential communications.
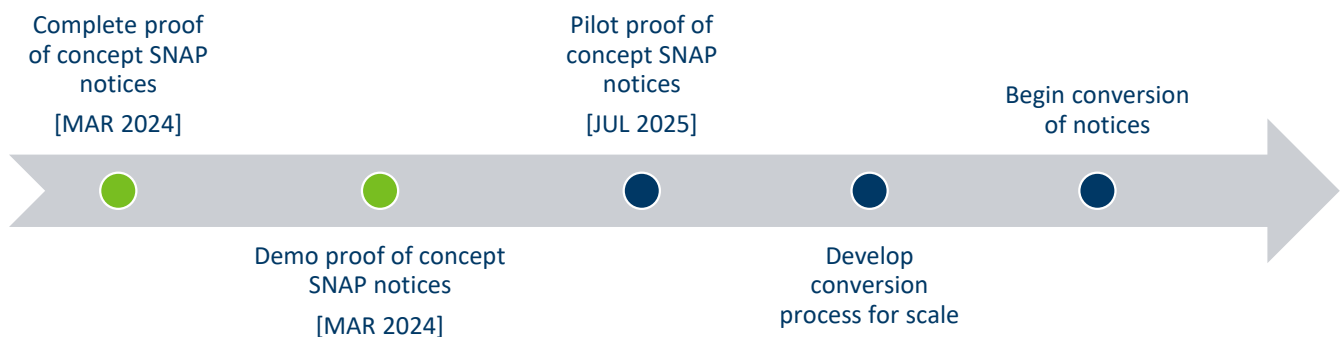

Figure 10: MAXIS Notices Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome B5: In addition to these outcomes, there is a requirement that the commissioner must contract with an independent consultant to evaluate SSIS, focused on the current system's usability, system performance, and federal compliance. The evaluation is expected to address data entry and system capacity issues, and the consultant must assist in selecting an IT system platform for child protection.

Why it's important

- Social Service Information System (SSIS) is the State of Minnesota's case management and reporting system for child and adult programs, including child welfare activities.
- Over 10,000 users in the State of Minnesota, Tribal Nations and counties depend on SSIS for reporting.
- SSIS has urgent user issues, including burdensome and unnecessary data entry requirements, system usability, and technical issues. These issues take providers' time away from working with families.
- Complementing the study in Outcome B6 (below), which focuses on the data entry and paperwork challenges of SSIS, this evaluation analyzes the current system's technical and architectural issues, in addition to a business analysis and feedback from impacted groups.

- External vendors will assess the investment required and platform for modernization. This is intended to produce a list of potential system implementation alternatives, with key considerations, scoring criteria, and final recommendations on a comprehensive child welfare information system (CCWIS).

What happened since the last report

- A Request for Offer (RFO) was posted on July 2, 2024, to leverage preapproved vendors to conduct the evaluation and provide the deliverables listed above. The RFO was reposted in the fall and will close in December 2024.
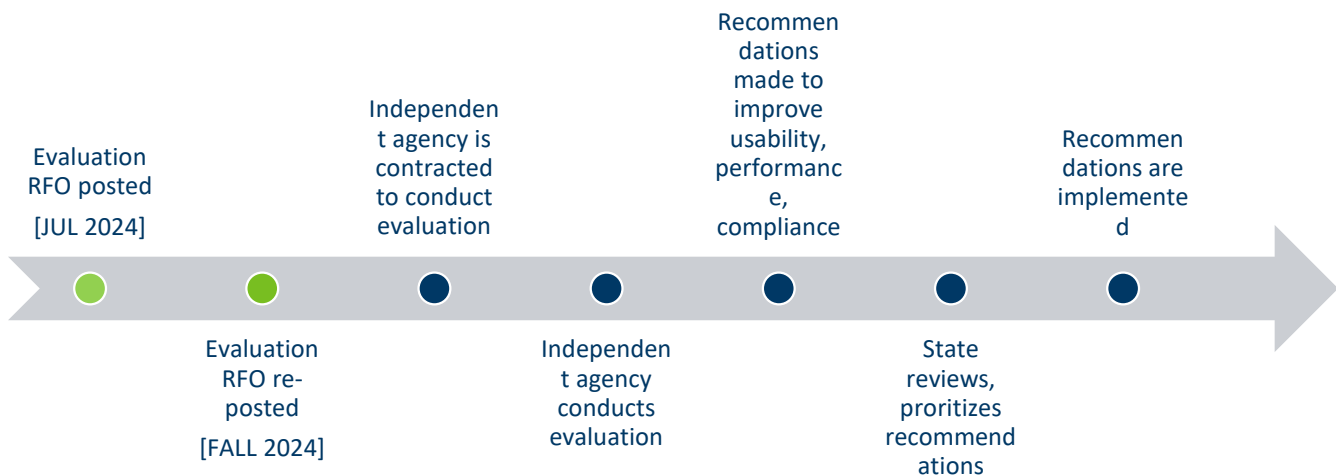- It is anticipated that results will be delivered within the next state fiscal year.

Figure 11: Independent SSIS Evaluation Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome B6: The commissioner is required to conduct a study in collaboration with social service providers, to develop recommendations to streamline and reduce SSIS data entry requirements for child protection cases.

Why it's important

- As mentioned in Outcome B5 above, SSIS has urgent issues, including burdensome and unnecessary data entry requirements for case workers.
- By analyzing the current data entry requirements and procedures, recommendations and next steps can be tailored to the current user experience and pain points.
- Through these studies, short-term and long-term needs of SSIS users are being addressed.
- After recommendations are implemented, the child welfare system will:
  - o perform better (e.g., fewer screens, easier steps)
  - o meet required federal and state compliance requirements
- This study provides multiple benefits to state and local agencies (build trust and partnership, better access to data that can inform decisions, accrual of revenue without extra burden on workers), Tribal

Nation and county workers (decrease in data entry, increase consistent access to system, increase worker time available), and residents (enhanced client security, reduction in time to receive services).

What happened since the last report

- From January to May 2024, a review of the Child Protection areas of SSIS system was conducted by DHS's SSIS Business Operations unit, in partnership with caseworkers and SSIS mentors at Tribal Nations and counties, Minnesota Child Welfare Training Academy's Peer Network, DHS' Child and Family Services Administration Business Integration Division, and Child Safety and Permanency Division, and MNIT partners.
    - The review consisted of three parts: (1) Listening sessions with case workers, mentors, and Child Safety and Permanency policy experts; (2) a review of all Child Protection fields within SSIS; and (3) a review of requirements at the federal, state, and administrative levels.
    - Key themes that emerged from the review included: (1) user interface is not intuitive and difficult to navigate; (2) extensive "work-arounds" are necessary on almost every screen and are not clear or documented; (3) system access is tricky and not always guaranteed; (4) challenges with documents working as designed and document management; and (5) there are inadequate methods to support person-centered practices and business processes.
    - The results of this review process provided a list of the top items for DCYF/DHS to address now.
    - Staff are implementing items identified that can be done now and will benefit case workers. There are many larger items that cannot be completed within the current system and will be at the forefront of considerations for modernization of SSIS, such as mobile capabilities.
    - The review resulted in 56 recommendations. These recommendations vary widely in terms of project size, and several require multiple changes to be implemented effectively.
    - Of the 56 recommendations, sixteen (16) are currently feasible to complete. Eleven (11) of these recommendations have been scheduled for implementation. Those that have not been scheduled require additional work on processes and collaboration between MNIT, policy, business, and systems teams.
    - One example of a recommendation that is being implemented in late August is increasing the number of characters for a Child Maltreatment Report on the Conclusions tab to 4,000 to allow workers to fully document within SSIS.
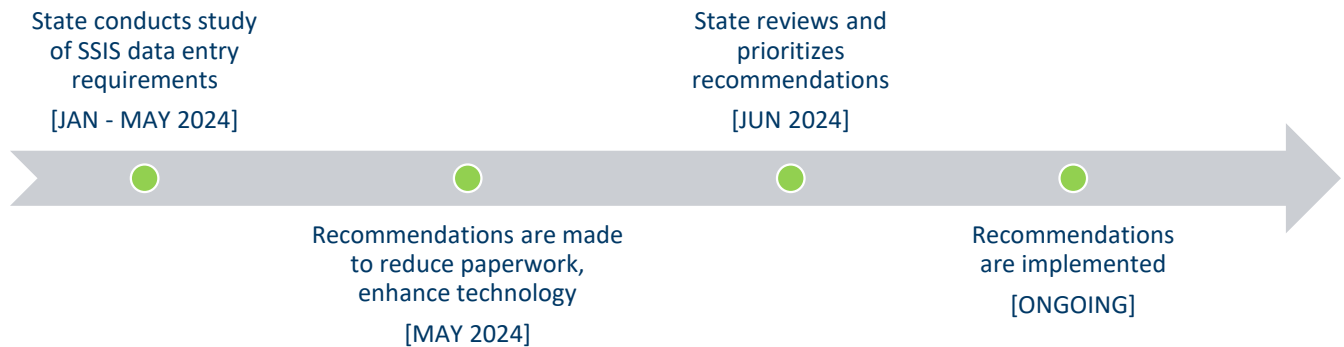

Figure 12: SSIS Data Entry & Paperwork Review Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Integrated Services for Children and Families Outcomes Table

Baseline and progress indicators have been added to the following outcomes table. Due to the multi-phase nature of several initiatives, some performance indicators may not yet show progress at this point.

Outcome and Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
B1. Reduce unscheduled downtime on SSIS by at least 20 percent. SSIS is consistently available for Tribal and county social workers. Consistent access to SSIS will increase productivity, workload planning, and serving clients quickly.	Number of hours-of-service impact (down time) annually.	By the end of the biennium, reduce by 20% from baseline.	107 hours 35 minutes of service impact (downtime) in 2022.	43 hours 51 minutes of service impact (downtime) in 2023. This represents a 59.2% reduction from baseline.
B2. Complete the transition of automated child support systems from mainframe technology to a web-based environment. PRISM's technology will be stabilized, ensuring a consistent experience for Tribal and county workers now, with the ability to improve the system in the future.	1. The replatform occurs. 2. The code is refactored and tested. 3. The new platform is launched.	By mid-FY2026, complete all deliverables listed in the performance indicators.	As of October 1, 2023, the child support system PRISM exists only on mainframe technology.	No change from baseline. As of June 2024, DCYF/DHS and MNIT are seeking outside technical advisory consulting services on outstanding technical concerns before proceeding with an RFP.

Outcome and Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
B3. Enhance the child support participant portal to provide additional options for uploading and updating information, making payments, exchanging data securely, and providing other features requested by users of the portal. Child support participants can quickly and easily access information and complete tasks. This self-service option will reduce burden on Tribal and county child support workers.	1. Number of child support clients actively using the participant portal. 2. Increase the frequency of use of the portal by 50%.	By 2028, 1. Increase the number of child support clients using the participant portal by 50%. 2. Increase the numbers logins into the portal by 50%.	Between October 2023 and May 2024, the number of unique users were 31,959 or approximately 38% percent. Between October 2023 and May 2024, the average number of monthly logins was 189,347, users on average log in five to six times a month.	As of June 2024, no new features have been added. The decision was made to prioritize the PRISM refactor and replatform first, while planning for the MCSO changes.

Outcome and Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
B4. Make information received regarding an individual's eligibility for benefits easier to understand. Benefit applicants and recipients will receive notices that are clear, accurate, and provide actionable next steps. Workers will be able to make necessary updates to notices quickly and easily.	1. An improved notice creation and management system is developed. 2. Number of notice types that are updated to a new, readable format.	By the end of the biennium, 1. An improved notice creation and management system will be developed, starting with SNAP. 2. Increase the number of notices that are updated to a new, readable format.	As of October 1, 2023, all notices generated by MAXIS are in the prior format.	As of July 2024, a proof of concept for three SNAP notices has been demonstrated. At this point, no notices are generated by MAXIS in the new format.

Outcome and Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
B5. Contract with an independent consultant to evaluate SSIS, focused on the current system's usability, system performance, and federal compliance. The evaluation is expected to address data entry and system capacity issues, and the consultant must assist in selecting an IT system platform for child protection. Assessing the current system's usability, performance and federal compliance will provide a baseline from which DHS can build a user-friendly, better performing, federally compliant child protection system.	1. Completion of an independent evaluation of SSIS. 2. Recommendations for child protection system platform are developed.	By the end of the current biennium, 1. The independent evaluation is complete. 2. Recommendations are provided for child protection system platform.	As of October 1, 2023, the independent evaluation had not been initiated.	As of December 2024, the RFO for the independent evaluation of the technical current state has been re-posted

Outcome and Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
B6. Conduct a study in collaboration with social service providers, to develop recommendations to streamline and reduce SSIS data entry requirements for child protection cases. By reducing paperwork and enhancing technology, Tribal and county workers will be able to spend more time serving their clients.	1. Review of federal, state, and DHS paperwork and data entry requirements is completed. 2. Recommendations for streamlining and reducing SSIS data entry requirements for child protection cases are made.	By the end of the biennium, 1. Paperwork / data entry requirements study is completed. 2. Recommendations for streamlining and reducing data entry requirements are completed.	As of October 1, 2023, the paperwork / data entry requirements study had not been initiated.	As of May 2024, the paperwork / data entry requirements study has been completed. As of May 2024, 56 recommendations for streamlining and reducing SSIS data entry requirements for child protection cases have been made, 16 of which can be implemented in the current environment.

Table 2: Integrated Services for Children and Families Outcomes Table

C. Medicaid Management Information System Modernization

Description

The state will enhance, modernize, and stabilize the functionality of the Medicaid Management Information System (MMIS). MMIS ensures more than 1.4 million people on the Medical Assistance and MinnesotaCare programs get necessary services and benefits when they need them and supports payments to health care providers and managed care organizations for these services.

The aging Medicaid Management Information System (MMIS) lacks the agility to respond to frequently changing standards within health care delivery, which increases the risk for inaccurate payments, raises administrative costs for providers, and contributes to delays in access to critical health care services and benefits for the people being served. Modernizing Minnesota's Medicaid Enterprise System (including MMIS and the eligibility technology systems interfaced with MMIS) will equip DHS to better meet state and federal compliance requirements and improve business processes, such as enabling more timely and responsive communication with providers, payers, and the people being served, while simplifying and integrating payments for Medicaid benefits.

Functions associated with the Minnesota Health Care Programs (MHCP) pharmacy benefit are one of the current areas of focus for MMIS modernization. Analysis indicated that modernizing these functions would result in a high return on investment in terms of benefits and value for the people being served. As the MMIS modernization initiative progresses, other functions will be addressed, and performance indicators and outcomes will be identified.

Budget & Expenditures

In addition to the overarching trends in budgetary spending for SDT (described earlier in this report), spending related to the MMIS Modernization initiative has been impacted by the fact that planning an overall Medicaid Enterprise Systems modernization strategy has been happening concurrently with the planning and implementation of a new pharmacy fee-for-service point of sale module. This strategy is an essential step to encourage a unified approach to modernizing subsequent components of a Medicaid Enterprise System. This strategy has created an opportunity to set shared priorities across the organization and to evaluate and address challenges to modernizing systems that are not only experienced in Minnesota, but also other state governments and Medicaid programs. The process to create this strategy has slowed spending on implementation projects, but subsequent implementation projects will have the benefit of connecting into an overarching structure and approach that is more integrated and has an improved chance of successfully creating better outcomes for the people we serve.

Fiscal Year 2024 Budget & Expenditures

Outcomes: The funding for the MMIS Modernization contributes to all three outcomes: (C1) reduce disruptions and delays in filling prescriptions for Medical Assistance and MinnesotaCare enrollees and improving call center support for pharmacies and enrollees to ensure prompt resolution of issues; (C2) improve the timeliness and accuracy of claims processing and approval of prior authorization requests; and (C3) advance the exchange of

health information between providers and trusted partners so that enrollee care is timely, coordinated, proactive, and reflects the preferences and culture of the enrollee and their family. These three outcomes are intertwined within the work, and the funding cannot be separated by outcome.

Purpose of the Expenditure	Type of Expenditure	FY24 Amount Budgeted	FY24 Amount Expended
Improve MMIS Functionality (MMIS Modernization Project Steering & Coordination)	DHS State Personnel; MNIT Service Contract	4,708,860	4,086,194

Outcomes / Key Deliverables

The MMIS Pharmacy Modernization Module includes selecting and contracting with a vendor to pull this functionality out of the current mainframe environment to process outpatient pharmacy claims and manage the outpatient fee-for-service pharmacy benefit. This vendor will use modernized technology that is configurable, compliant with industry standards, certifiable by CMS to qualify for the enhanced federal match, and flexible enough to interface with additional modernization efforts undertaken in the future.

The team in charge of MMIS modernization is employing an innovative approach to move toward vendor solutions, starting with the modernization of the MMIS pharmacy module. The approach consists of:

- Following recommendations from the MN Technology Advisory Council (TAC) to conduct thoughtful planning and implementation when modernizing applications, including consideration of the entire application lifecycle and related business processes. This is aligned to MNIT's preferred "Rent / Buy / Build" approach to modernization and working with vendors.
    o This approach was described in a TAC report in this way: "We need to think about when to buy versus build, and we must consider successes in other states. When we first introduce new technology, we need to consider the entire lifecycle, including acquisition, enhancement, upgrades, maintenance, operations, and even replacement. We need to think about modernization of business processes, too – and must adapt business processes to standard software practices rather than the reverse. We must also note the different talents and skills needed to manage operations, risk, and security in a cloud-based environment as compared to an on-premises data center environment, to procure the right solutions and to ensure business continuity."[9]
- Using an agile development methodology in a product model to iteratively design the system's layers and components to align with one another.

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[9] From the Report of the State of Minnesota Blue Ribbon Council on Information Technology, June 2020; https://mn.gov/mnit/assets/blue-ribbon-council-report-june-2020_tcm38-438716.pdf

The MMIS modernization team has emphasized that their goal is not just to improve MMIS for the benefit of those who receive Medicaid services, but to demonstrate a process in which they stand up the necessary systems in partnership with vendors as efficiently and effectively as possible based on predefined outcomes. They have started with pharmacy systems (Outcomes C1 and C2) and interoperability solutions (Outcome C3) and are proceeding through milestones related to each effort as described in the following sections.

Outcome C1: Reduce disruptions and delays in filling prescriptions for Medical Assistance and MinnesotaCare enrollees and improving call center support for pharmacies and enrollees to ensure prompt resolution of issues; AND

Outcome C2: Improve the timeliness and accuracy of claims processing and approval of prior authorization requests.

Why it's important

- The MMIS pharmacy module modernization initiative aims to reduce client frustrations due to delayed access to prescriptions. This delay is due in part to the current prior authorization process, as well as limited customer support hours. The goal is that call center support for both members and providers will be enhanced from the existing 8 hours per weekday to a 24/7 operation to align with typical pharmacy hours, with response times of 60 seconds or less.
- After this initiative is implemented:
    o Medical Assistance and MinnesotaCare enrollees will have consistent access to filled prescriptions.
    o Medical Assistance and MinnesotaCare enrollees will be able to quickly resolve any issues beyond regular government office hours through expanded call center support.
    o The modernized MMIS pharmacy system will be compliant with industry standards and certifiable by the U.S. Centers for Medicare and Medicaid Services (CMS).

What happened since the last report

- MMIS modernization has made great strides towards the goal of standing up the improved pharmacy system, starting by securing a vendor, Magellan Rx Management. This vendor was selected due to their previous success and track record of setting up Medicaid pharmacy systems in other states.
- In an agile, iterative approach to this work, the team has been collaborating with Magellan to conduct data integration discovery to customize Magellan products with Minnesota-specific needs.
    o The team is investing time in these data integration points up front to set themselves up for success when the new, expanded technologies are rolled out in the fall of 2024.
    o The teams have developed an iterative approach to data integration layouts and quality assurance.
    o These efforts have already improved accessibility (e.g., making online forms accessible to providers through making the forms readable by a scanner) and efficiency (e.g., removing unnecessary forms).
- The next milestones toward standing up the modernized pharmacy system include:
    o Conducting pharmacy provider testing.

- o   Vendor onboarding, training, and testing with the pharmacy providers.
- o   Participating in an operational readiness review to be conducted by CMS to prepare for federal certification.
- o   The MMIS team has set a "go live" date of November 4, 2024, in which all Medicaid members will be switched to the new system at once.
- o   Following this launch, the team will aim to further update the system to move toward official certification from CMS (meeting a variety of CMS standards); the CMS certification review will take place 6-8 months after the system goes live (approximately May of 2025).
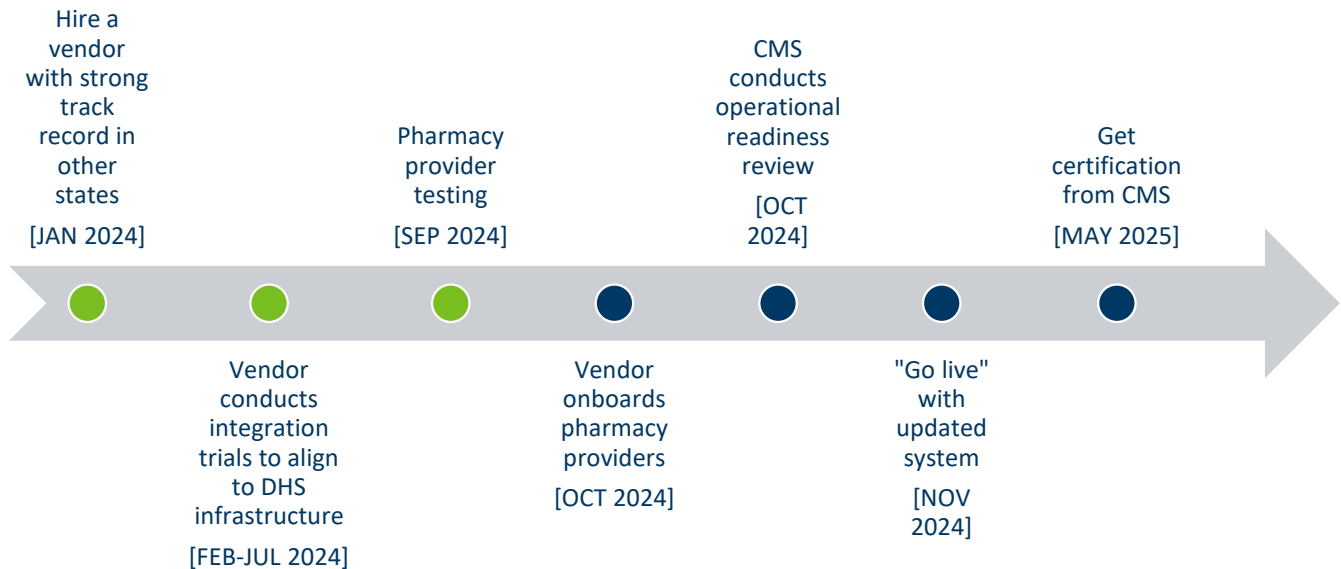

Figure 13: MMIS Pharmacy Module Modernization Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome C3: Advance the exchange of health information between providers and trusted partners so that enrollee care is timely, coordinated, proactive, and reflects the preferences and culture of the enrollee and their family.

Why it's important

- This Medicaid Interoperability initiative will procure and implement a foundational platform that enables capabilities required to bring in and flexibly swap out vendor solutions for many of the CMS identified Medicaid Enterprise System functions. This platform will integrate, standardize, and exchange data between all these functions and act as a base of functionality required for data sharing between providers and trusted partners so that enrollee care is timely, coordinated, proactive, and reflects the preferences and culture of the enrollee and their family.
- This interoperability solution will enable meeting standards set forth by CMS and those in the health information exchange environment. When implemented effectively, health information exchange (interoperability) can also reduce the burden of certain administrative processes, such as prior authorization. This procurement would mark a critical milestone in enabling the exchange of data

between payers, providers, and members, demonstrate continuous organizational flexibility, and respond to ever-evolving state and CMS regulations.

What happened since the last report

- As indicated in the October 2023 SDT Legislative Report, this procurement requires rigorous planning efforts that reflect a strategy for sharing and using data in a meaningful way.
- This initiative includes two separate but connected efforts:
  - A proof of concept (POC) with a vendor's interoperability solution. The POC will demonstrate the solution's viability in the real world.
  - The procurement of a vendor to set up foundational technical data capabilities, referred to as the Medicaid Interoperability (MI) strategy. Pharmacy will be the first module to be developed that will require the implementation of MI, but since the MI solution will need to send data to other systems and modules, the project needs to collaborate with others to ensure that the MI solution will be an interoperable approach that meets a variety of systems' current and future interoperability needs. Once a vendor has been selected, DHS will leverage the vendor's solution capabilities to enable Medicaid interoperability needs to access standard data.
- The initial milestones that have been accomplished to support each of these efforts include:
  - Starting with the Medicaid Interoperability (MI) strategy, the MMIS modernization team issued a Request for Information (RFI) for vendors in May 2024, received applications in June 2024 and completed all demonstrations from these vendors by the end of July 2024.
    - As part of the team's intentional approach to selecting a vendor, they have invited additional technical advisors into the RFI review process to ensure that the vendor solution that is eventually selected aligns with DHS's broader interoperability needs.
  - This RFI informed the team's plans to move forward on a proof of concept (POC), procuring a vendor solution for a pilot project to test functionalities and an approach with a smaller scope. This POC will test data exchange and interoperability with a vendor that has capabilities with high promise for addressing the state's interoperability needs for the Medicaid program.
- Upcoming milestones in this work include:
  - Planning and implementing the proof-of-concept pilot project.
  - Using the information gathered through the RFI and POC processes to develop an RFP for a full vendor solution.
  - Drafting and approval of the MI RFP.
  - Selecting and contracting with a vendor.
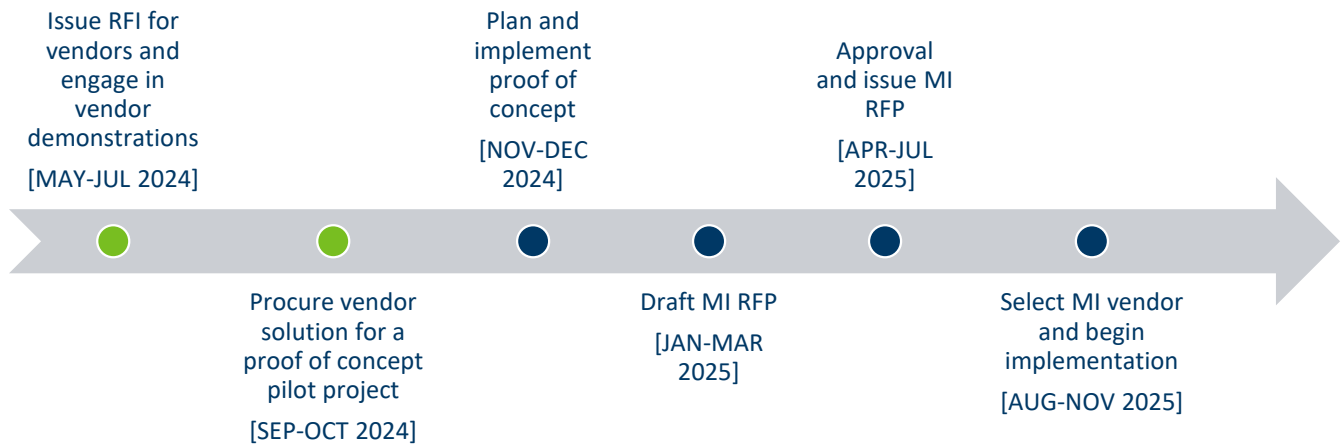 - Beginning implementation with the vendor by the end of 2025.

Figure 14: MMIS Pharmacy Module Modernization Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Medicaid Management Information System Modernization Outcomes Table

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
C1. Reduce disruptions and delays in filling prescriptions for Medical Assistance and MinnesotaCare enrollees and improving call center support for pharmacies and enrollees to ensure prompt resolution of issues. Medical assistance and MinnesotaCare enrollees have consistent access to filled prescriptions. Medical assistance and MinnesotaCare enrollees can quickly have any issues resolved through call center support.	1. The contractor's call center is in operation 24/7. 2. Monthly reports of average speed of answer for call center support.	By the end of the biennium, call center offerings will be improved with an established 24/7 hours of operation and report of 60 seconds or less for average speed of answer.	MHCP Provider Resource Center (7/1/2023 - 6/30/2024): • Average speed of answer: 2 minutes 32 seconds. • Abandonment rate: 2.3%. • Average time on hold: 11 minutes 48 seconds. • Hours: 8:00 am - 4:30 pm. M-F. Sat. Sun off. 2- 15-minute breaks, and ½ lunch period from 12:15-12:45. No call center service on state or federal holidays, plus the day after Thanksgiving. Consumer Call Center (7/1/2023 - 6/30/2024): • Average speed of answer: 12 minutes, 55 seconds. • Abandonment rate: 30%. • Average time on hold: 9 seconds • Hours: 8:00 am – 4:00 pm. No breaks in service for lunch. No service on state holidays.	Progress in comparison to baseline data will be shared in the October 2025 SDT legislative report, following the November 2024 launch of the new pharmacy system.

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
C2. Improve the timeliness and accuracy of claims processing and approval of prior authorization requests. Medical Assistance and MinnesotaCare enrollees experience quick and accurate claims and prior authorization processing.	1. Monthly reports of percent of prior authorization requests responded to (Respond = approve, deny, change in therapy, or request additional information) within twenty-four (24) hours following receipt. 2. Respond to a minimum of 75% of prior authorization requests within eight (8) business hours. 3. Prior authorization process is established that allows more flexibility with different modes of prescriptions and different providers based on processing requirements.	By the end of the biennium, response time to prior authorization requests will reduce and the number of unnecessary, repeat prior authorization requests will decrease.	As of October 1, 2023: 1. Percent of prior authorization requests responded to (Respond = approve, deny, change in therapy, or request additional information) within twenty-four (24) hours following receipt: 100%[10] 2. Percent of prior authorization requests responded to within eight (8) business hours: 75% 3. No prior authorization process had yet been established to allow more flexibility with different modes of prescriptions and different providers based on processing requirements.	1 & 2: Progress in comparison to baseline data will be shared in the October 2025 legislative report, following the November 2024 launch of the new pharmacy system. 3: This process will be established when the updated pharmacy system goes live in November 2024.

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[10] Although this performance indicator will not be able to increase given that it is already at 100%, the goal will be for the *new* system to continue to meet this federal requirement of 100%.

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
C3. Advance the exchange of health information between providers and trusted partners so that enrollee care is timely, coordinated, proactive, and reflects the preferences and culture of the enrollee and their family. Medical Assistance and MinnesotaCare enrollees and their providers are more informed, which can support timely, coordinated, and culturally responsive services.	1. A plan that establishes the interoperability, architectural and data strategies for the overall modernized MMIS that supports a set of value-based outcomes for Medicaid service delivery is created. 2. The strategic plan for interoperability, architecture, and data with sets of requirements the vendor must meet is operationalized. 3. A Request for Proposals for a solution that represents the strategies and requirements is written and published.	By the end of the biennium, the initiative will be positioned to procure and implement a vendor solution that can deliver interoperability solutions that meet the architectural and data strategies, along with advancing the exchange of health information, to deliver value-based outcomes for Medicaid service delivery.	As of October 1, 2023: 1. No plan had been created that established the interoperability, architectural and data strategies for the overall modernized MMIS. 2. The strategic plan for interoperability, architecture, and data with sets of requirements the vendor must meet had not been operationalized. 3. A Request for Proposals for a solution representing the strategies and requirements had not been written and published.	As of August 2024: 1. The plan is being drafted with input from points of contact. 2. No change from baseline. 3. Expected publishing date for RFP is late spring 2025.

Table 3: Medicaid Management Information System Modernization Outcomes Table

D. Provider Licensing and Reporting Hub for DHS Providers

Description

A new provider licensing and reporting hub will create a unified licensing experience for all human services licensed programs. New staff will provide technical support, training, and communication with licensed programs. New resources will support an implementation vendor, software licensing costs, product maintenance and additional technology.

Minnesota is home to approximately 20,000 licensed service providers, offering childcare, adult day care, and several other care services.[11] Historically, these Minnesota providers have had to apply and conduct basic license maintenance reporting tasks through a cumbersome variety of paper forms and other methods. This creates excessive administrative burden for providers, taking their time and attention away from serving their clients. To address this issue, DHS is developing licensing and reporting hubs that will provide a centralized, electronic location to complete licensing and reporting tasks efficiently.

This effort consists of two sites: a Provider Hub and an Agency Hub. The site that providers can access is titled the "Provider Hub," which is being created to support licensing activities. This website will help to simplify and enhance the experiences for providers, licensors, and families receiving childcare. Providers will be able to submit new applications and make updates to their existing license or certification at any time. The "Agency Hub" is the companion to the Provider Hub, which allows licensing staff to track and manage their caseload. Information entered into the Provider Hub will automatically feed into the licensor's view in the Agency Hub, where the licensor will be able to make requests and assign action items to providers.

In April 2024, the initiative to create a hub for provider and agency licensing and reporting needs was officially reconfigured to be part of a multifaceted, more comprehensive product line.[12] This shift has allowed the team to expand their initial platforms (licensing provider and agency hubs) to encompass a wider range of processes and license types. In 2025, the Provider Hub will expand to encompass all human services license types, creating a unified and streamlined platform for providers and agency workers across all spectrums of care. This expansion will bring the benefits of increased efficiency, transparency, and convenience to a wider range of providers, including those in the fields of adult foster care, mental health services, substance abuse treatment, and more. Simultaneously, agency workers responsible for regulating and supporting these diverse provider types will gain access to the enhanced functionality and centralized resources of the Agency Hub. The unifying vision driving this product line is to create a seamless, tailored, and intuitive experience that inspires confidence and boosts satisfaction through enhanced transparency, efficiency, and consistency. In other words, although there is some

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[11] Minnesota Department of Human Services. (2024). Licensed Programs. https://mn.gov/dhs/partners-and-providers/licensing/

[12] A product line is a group of related products working to achieve a similar goal or vision; led by a product line manager.

added complexity from expanding this initiative into a full product line, the ultimate goal is to ensure that those interacting with the hubs or other tools have a cohesive experience as users.

The full Provider and Agency Solutions (PAS) product line consists of the following product teams:

- **Office of Inspector General (OIG) Enterprise Product Teams**
    o Licensing Provider Hub
    o Licensing Agency Hub
    o Program Integrity Hub
- **PAS Product Teams**
    o Wayfinder
    o Great Start Compensation Payment Application
    o Enrollment & Attendance
    o CCAP Provider Registration
    o Early Learning Scholarships

The expansion of this work into a full product line illustrates an important move towards cross-functional partnerships that bring holistic products to end users. In addition, each of the product teams within the product line continue to engage in their work in an agile, product-focused manner. This approach allows DHS to be responsive to providers' diverse and changing needs. Ongoing engagement with representative providers, the ability to pivot and prioritize emerging user needs, and consistent delivery of product improvements are fundamental components to the agile way of working.

Budget & Expenditures

In addition to the overarching trends in budgetary spending for SDT (described earlier in this report), spending related to the Provider Licensing & Reporting Hub initiative has been impacted by procurement efforts for service contracts taking longer than expected.

Fiscal Year 2024 Budget & Expenditures

Outcomes: The funding for the Provider Licensing and Reporting Hub contributes to all three outcomes: 1) Create and maintain user personas for all provider licensing and reporting hub users that document the unique requirements for each user; 2) Create an electronic licensing application within the provider licensing and reporting hub to ensure efficient data collection and analysis; 3) Create a persistent, cross-functional product team of business and technology resources to support the ongoing iterative development of the provider licensing and reporting. These three outcomes are intertwined within the work, and the funding cannot be separated by outcome.

Purpose of the Expenditure	Type of Expenditure	FY24 Amount Budgeted	FY24 Amount Expended
DHS State Personnel	DHS State Personnel	6,466,500	454,502

Provider Licensing Personnel	MNIT State Personnel	5,229,000	567,997
Provider Licensing Staff Augmentation	MNIT Staff Augmentation	1,182,000	247,013
DHS Service Contracts	P/T Contracts	10,773,000	462,575
Hardware/Software/Licenses	Service Contracts	2,457,000	555,445
MNIT Enterprise Services	Service Contracts	66,000	-
General Administration	General Administration	109,500	6,440

Outcomes / Key Deliverables

As noted above, some shifts have occurred since the previous report was published in relation to the broader context in which the work tied to this initiative is being conducted. The Licensing Provider Hub and Licensing Agency Hub are now two product teams within a comprehensive effort to create a unified experience for providers, agency workers, and now even for families (e.g., through early learning scholarships). The following section outlines how DHS has made progress toward the specific outcomes shared in the October 2023 SDT Legislative Report, which focus on the provider and agency licensing hubs that the original OIG product teams have been building. However, additional contextual information about the overarching product line is also included where relevant, given the interconnected nature of this work.

Outcome D1: Create and maintain user personas for all Provider Licensing and Reporting Hub users that document the unique requirements for each user.

Why it's important

- DHS recognizes that there is a wide variety of professionals that will use the Provider Hub and the Agency Hub with different training and functionality requirements. To tailor portal users' experience to unique licensing and reporting needs and realities, DHS must first understand what those needs are.
- Meaningful collaboration with a representative sample of providers is occurring to create a positive and efficient user experience. Through this collaboration, distinct provider type profiles known as user personas are being developed with the specific requirements for each type of licensed service provider, which will inform future products.

What happened since the last report

- To gather information to inform development of PAS products, PAS product line members are using Change Networks, or groups of individuals who are representative of a larger group. These Change Networks consist of providers, licensors, and supervisors who represent counties (large and small, rural, and metro), and meet monthly with PAS teams. Members of the Change Network can learn about and react to proposed processes, features, and resources and give feedback to inform decisions. The PAS

team now has Change Networks for the five types of MN residents who will use the product line's tools, including: Certified Child Care Providers, Licensed Center Child Care Providers, Family Child Care Providers, DHS Licensing Staff, and County Licensing Staff.

- In April 2024, the PAS product line hired four new Experience Design Strategists who are leading the charge to create user personas using information shared by Change Network participants.
    - o These staff began with initial "starting point" personas DHS staff had previously drafted in partnership with a local consulting agency (Slalom).
    - o The Experience Design Strategists are synthesizing information collected from surveys and interviews with all user groups (via Change Networks) and plan to release new, more detailed personas in Fall 2024, representing each of the five types of Provider and Agency Hub end users.
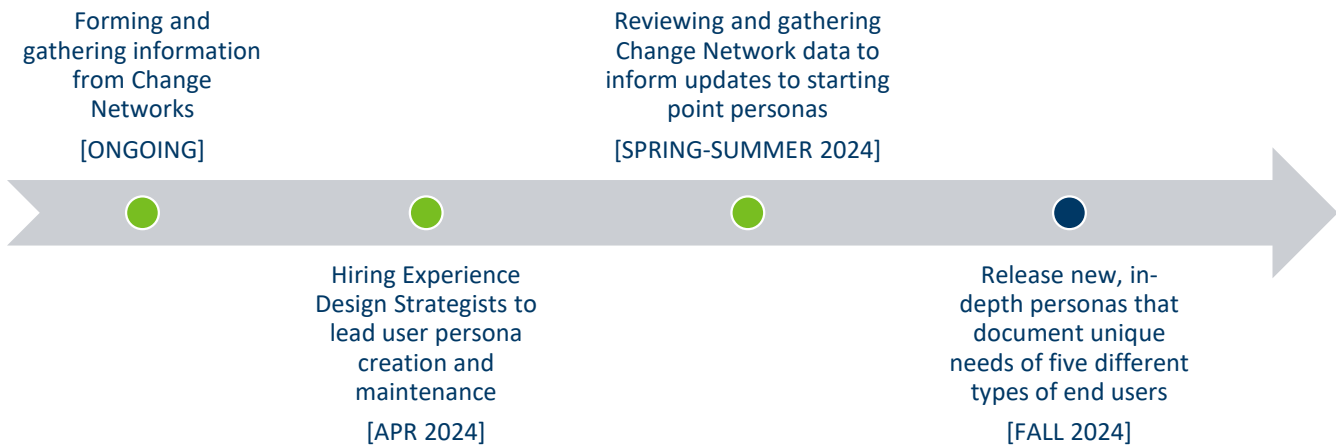

Figure 15: PAS User Personas Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome D2: Create an electronic licensing application within the Provider Licensing and Reporting Hub to ensure efficient data collection and analysis.

Why it's important

- The goal is for licensing applications to be fully available electronically, replacing existing paper applications and reducing administrative burden for providers.
- Beyond reducing administrative burden for providers, license types that are overseen by county partners are prioritized in the rollout timeline to also reduce the workload of county partners during the review and approval process.
- The features of the Provider and Agency Hubs will be continuously and incrementally released to users, so new products can be used by providers as soon as possible.

What happened since the last report

- The OIG product teams prioritized setting up licensing for the licenses that the counties administer, starting with certified and licensed childcare centers. These two license types were both completed and

are now fully available electronically for users (Certified child care providers: As of April 2023; Licensed child care centers: As of November 2023).

- The following activities are set to take place to continue adding to the PAS suite of electronic resources. Activities relevant to this specific licensing outcome are indicated by an asterisk (*):
  o April 2025: Child Care Assistance Program (CCAP) provider registration
  o Summer 2025:
    ▪ Family Child Care Licensing, phased rollout by region*
    ▪ County Licensing, phased rollout by region*
    ▪ Licensing Information Look-Up website*
  o Future, dates to be determined:
    ▪ Legal Appeals & Program Integrity Case Management
    ▪ Mental Health, Substance Use Disorder, and Children's Residential Facilities license types*
    ▪ Home and Community Based Services license types*
    ▪ Foster Care licensing*
- Although they are not licensing applications, the PAS product line has also completed several additional milestones to add to the growing set of online resources for providers and families:
  o Child Care Wayfinder, a one-stop navigation network staffed by local Navigators at regional Child Care Aware of Minnesota agencies and Minnesota Tribal Resources for Early Childhood Care (MNTRECC), was completed as of April 2023.
  o The Early Learning Scholarships Hub, a streamlined, guided, and supportive digital application process for families applying for and renewing Pathway I scholarships, went live in July 2024.
  o The Great Start Compensation Program site, providing Minnesota with additional funds designed to support the child care industry and child care educators, went live in July 2024.
  o Providers now have streamlined options to report required enrollment and attendance data in the Provider Hub, a feature that went live in July 2024.
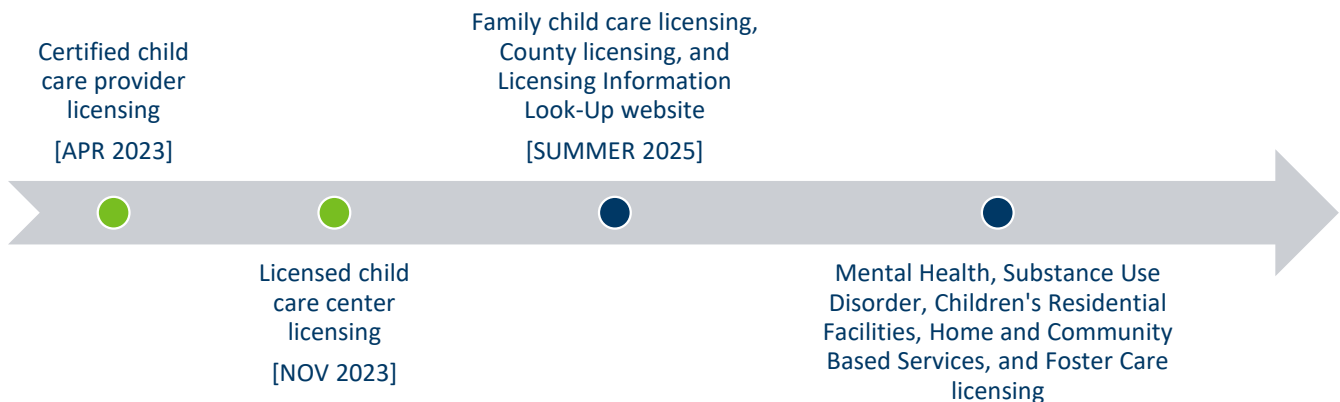

Figure 16: PAS Licensing Applications Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome D3: Create a persistent, cross-functional product team of business and technology resources to support the ongoing iterative development of the provider licensing and reporting.

Why it's important

- To create an effective PAS product line and online Hub with continuously updated and tailored products, DHS and DCYF need a product team trained in agile product development.
- By the end of this funding cycle, a product team will be established, staffed, and supported that can iteratively develop and release features to improve providers' experiences applying for licenses and completing reporting requirements.

What happened since the last report

- As of October 2023, three DHS staff, two MNIT staff, and an implementation contractor (Slalom) were staffing the provider licensing and reporting hub efforts.
- Since then, the team has been hard at work hiring and training for a wide range of positions. New hires that are specifically supporting the provider and agency licensing efforts (the OIG product teams) include:
  - 22 DHS/DCYF staff
  - 18 MNIT staff (these positions are supporting the entire PAS product line)
  - A total of 12 vacancies on the OIG product teams remain
- Training new staff has been a group effort, including peer support, official training conducted by Slalom, and use of DHS's SDT training resources and LinkedIn Learning tools. These intentional onboarding efforts have allowed the OIG product teams to develop ways of working together in service of effectively and efficiently building out the Provider and Agency Hubs, including building user personas and launching electronic licensing applications (outcomes D1 and D2, listed above).
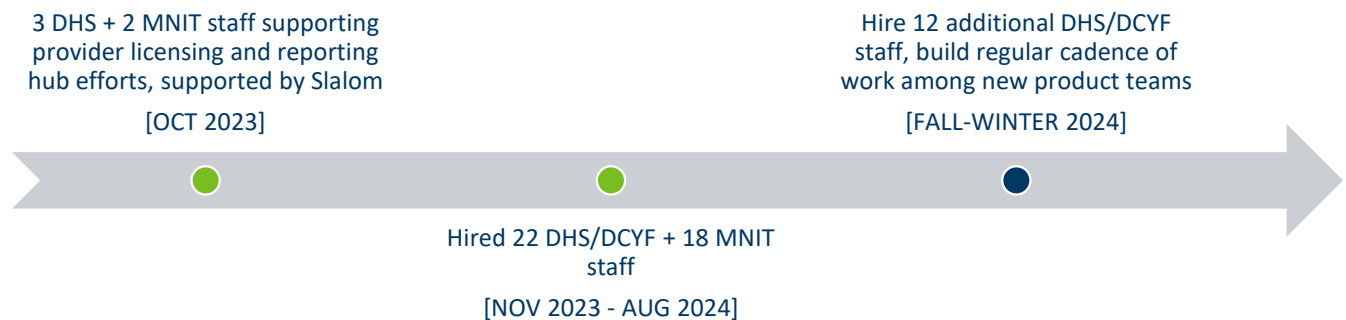
3 DHS + 2 MNIT staff supporting provider licensing and reporting hub efforts, supported by Slalom
[OCT 2023]

Hire 12 additional DHS/DCYF staff, build regular cadence of work among new product teams
[FALL-WINTER 2024]

Hired 22 DHS/DCYF + 18 MNIT staff
[NOV 2023 - AUG 2024]

Figure 17: Provider Licensing and Reporting Staffing Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Provider Licensing and Reporting Hub Outcomes Table

Outcome & Why it Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
D1. Create and maintain user personas for all Provider Licensing and Reporting Hub users that document the unique requirements for each user. DHS understands the unique needs of each provider type. DHS is poised to create a tailored experience for each provider type.	1. A user persona for each provider type is created. 2. Each persona outlines the requirements for the given user.	By the end of this funding cycle, all provider types will have a user persona documenting the user's requirements.	As of October 1, 2023, only initial starting point personas representing each of five provider types had been developed.	As of August 2024, staff have collected additional data via interviews and surveys with Change Networks to inform persona development. Fully developed personas that outline requirements for each of five provider types will be completed in fall 2024.
D2. Create an electronic licensing application within the Provider Licensing and Reporting Hub to ensure efficient data collection and analysis. One licensing application type is fully available electronically, replacing the paper application and reducing administrative burden on providers.	At least one (1) complete licensing application is available electronically.	By the end of this funding cycle, at least one (1) of the license types will be fully available to providers as an electronic licensing application.	As of October 1, 2023, only the certified child care provider licensing application was fully available electronically.	As of August 2024, licensed child care center licenses are also available, totaling two licensing applications that are available electronically. In fall 2024, family child care licensing, county licensing, and a Licensing Information Look-Up website will also be launched.

Outcome & Why it Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
D3. Create a persistent, cross-functional product team of business and technology resources to support the ongoing iterative development of the Provider Licensing and Reporting Hub. The user experience is constantly improving, as DHS staff are in place to make needed/requested features and system modifications on an ongoing basis.	Product team focused on Provider Licensing and Reporting Hub is established and fully staffed.	By the end of this funding cycle: 1. The Provider Licensing and Reporting Hub Product Team is established and operational. 2. Product Team is fully staffed (on par with staffing rates across DHS).	As of October 1, 2023, three DHS staff and two MNIT staff were supporting the licensing and reporting hub effort.	As of August 2024, an additional 22 DHS staff (supporting just licensing) and 18 MNIT staff (supporting the whole PAS product line) have been hired. An additional 12 DHS vacancies will be filled in fall/winter 2024 to support licensing efforts.

Table 4: Provider and Agency Solutions (PAS) Outcomes Table

E. Improving the Minnesota Eligibility Technology System (METS) functionality

Description

Changes to the METS system will include short-term emergency fixes, ongoing sustainability efforts, and future recommendations for improvement. Critical upgrades will be made to comply with the Centers for Medicare & Medicaid Services (CMS) eligibility and enrollment requirements. Investments will sustain current software and hardware functionality, while addressing core functionality issues that result in incorrect determinations and administrative burden for the state, Tribes, and counties.

The Minnesota Eligibility Technology System (METS) was developed a decade ago as an enrollment and eligibility determination system that Minnesotans can access through an online portal, via MNsure.org, to apply for public health care programs. Unfortunately, METS does not interface with MAXIS, the eligibility determination system used prior to METS and still used by Tribal, county, and state workers to determine eligibility for public assistance programs and health care eligibility for people who are blind, have a disability, or are age 65 or older. The use of two separate systems causes inefficiencies and may require Tribal and county workers to duplicate client information across multiple data entry points. To address these challenges, DHS is working towards identifying and implementing health care application, renewal, and management solutions that are secure, compliant with federal requirements, and reduce burden on Tribal and county workers. Updating the online MNsure self-service user experience that allows applicants and enrollees to manage their applications, renewals, information, and health plan is key to improving client and case worker experiences, as well as ensuring that the State Medicaid agency has appropriate oversight to ensure compliance with federal and state laws and rules.

Accessible self-service is the overarching long-term vision for Minnesota's public health care program eligibility and enrollment processes. In the process of moving towards this long-term goal, DHS has first been focusing on addressing the more urgent, short-term goal of maintaining compliance with evolving regulations from the Centers for Medicare & Medicaid Services (CMS). Public health care application and maintenance requirements are updated regularly, and METS' technology and policy must be updated accordingly. Once completed, these critical updates will position the team to engage fully in delivering an end-to-end experience that is easier to use, provides needed information accurately, meets federally required timelines, and delivers more efficiency for the workforce.

Budget & Expenditures

In addition to the overarching trends in budgetary spending for SDT (described earlier in this report), spending related to improving METS functionality has been impacted the unwinding from continuous coverage requirements and related mitigation strategies required by the Centers for Medicare & Medicaid Services (CMS) and implementing new laws (i.e., a new federal and state law to provide continuous Medicaid eligibility for children and a new state law expanding MinnesotaCare to individuals regardless of immigration status).

Fiscal Year 2024 Budget & Expenditures

Outcomes: The funding for METS contributes to all three outcomes: 1) complete necessary changes to comply with federal requirements; 2) implement the capability for medical assistance and MinnesotaCare enrollees to apply, renew, and make changes to their eligibility and select health plans online; and 3) reduce manual data entry and redundancies in other steps taken by county and state eligibility workers to improve the accuracy and timeliness of eligibility determinations. These three outcomes are intertwined within the work, and the funding cannot be separated by outcome.

Purpose of the Expenditure	Type of Expenditure	FY24 Amount Budgeted	FY24 Amount Expended
Covered a portion of METS operational costs: Funding the Merative contract which supports to Cúram platform and changes that need to be made to that platform	Service Contract	1,176,000	1,176,000

Outcomes / Key Deliverables

Since the last report, the METS team has invested significant effort into the process of ensuring that METS meets federal requirements. This process has been complicated by the fact that CMS released a new final rule related to Medicaid eligibility and enrollment on April 2, 2024,[13] which requires additional compliance updates to METS beyond what was originally planned with the current SDT funding. The successes and planned next steps in the team's work to improve METS are outlined in relation to each of the outcomes listed below.

Outcome E1: Complete necessary changes to comply with federal requirements.

Why it's important

- The key priority for these improvements to METS functionality is that they comply with federal requirements. Many of these requirements focus on health care renewals and beneficiary protections, which are of utmost importance for Minnesotans. Because CMS regularly updates their requirements, there is an ongoing need to review and make changes to METS functionality.
- By making required changes to METS for compliance purposes, DHS is also improving ease of access to and management of services for Minnesota residents, as well as reducing redundancies in paperwork for Tribal and county eligibility workers (Outcome E3).

What happened since the last report

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[13] https://www.federalregister.gov/documents/2024/04/02/2024-06566/medicaid-program-streamlining-the-medicaid-childrens-health-insurance-program-and-basic-health

- Prior to the October 2023 SDT legislative report, DHS developed "Mitigation Plan 1.0" in collaboration with CMS to address several compliance needs. These issues were addressed through manual workarounds performed by Tribal and county eligibility workers; these workarounds were completed and submitted to CMS in March 2023.
- The METS team then collaborated with CMS again to develop a Mitigation Plan 2.0, which includes a series of updates to state systems (METS and MAXIS) to address the problem that Minnesota has traditionally conducted Medicaid auto-renewals on a household basis rather than an individual basis, as individuals in multi-member households may have different eligibility requirements. CMS required that states that have administered auto-renewals in this way needed to pause procedural benefits terminations and implement a mitigation strategy.
- The METS team has now nearly completed Mitigation Plan 2.0, including:
  o DHS broadly identified impacted individuals who should have auto-renewed based on available data.
  o DHS paused procedural benefits terminations for the October, November, and December 2023 renewal cohorts for three months for each cohort. This protected enrollees and allowed processing agencies time to manually restore eligibility and renew coverage for affected individuals.
  o Processing agencies manually renewed coverage for eligible individuals across the state.
  o DHS has nearly completed changing METS systems and processes to support individual-based renewals in three phases:
    ▪ Phase 1 completed on 3/10/2024.
    ▪ Phase 2 completed on 7/14/2024.
    ▪ Phase 3 timeline is being developed.
- Actions taken as part of Mitigation Plan 2.0 have directly contributed to the following results during the "unwinding period" (July 2023 through June 2024 renewal cohorts):
  o METS auto-renewal rates increased significantly – from 17% for the July 2023 cohort of enrollees to over 80% after the unwinding period.
  o 1.07 million enrollees retained health coverage
    ▪ 88% of children processed for renewal during the unwinding period retained coverage in a MN health care program.
  o The improved auto-renewal rates have saved an estimated 115,725 processing worker hours (this also supports Outcome E3, below).
- Next steps in this work to ensure compliance with federal regulation include:
  o Finalizing a core team who will steer the effort to address the new CMS requirements on eligibility and enrollment (from the April 2024 final rule issuance).
    ▪ Part of the work to prepare to meet these new requirements has included research into how other states' processes and systems are configured to support compliance.
    ▪ The METS team has applied for additional state and federal funding to support the development of this core team to steer the CMS compliance work.
    ▪ Additional resources will also be needed to fund the staff who will be tasked with conducting the work to get systems in compliance.

- o Completing Phase 3 of the METS individual renewal process, the final task in Mitigation Plan 2.0, which sets the state up for completing both auto-renewals and manual renewals for those enrollees who could not be auto-renewed on an individual level.
- o Addressing renewal compliance issues to provide IT support. This has not yet been addressed because DHS must follow the new rule and guidance that will be issued by CMS in fall 2024.
- o Seeking ongoing, permanent funding to continue to address the frequently evolving compliance requirements from CMS, and provide a path to long-term, sustainable processes and supporting systems that better meet people's needs and ensures they can access the care they need.
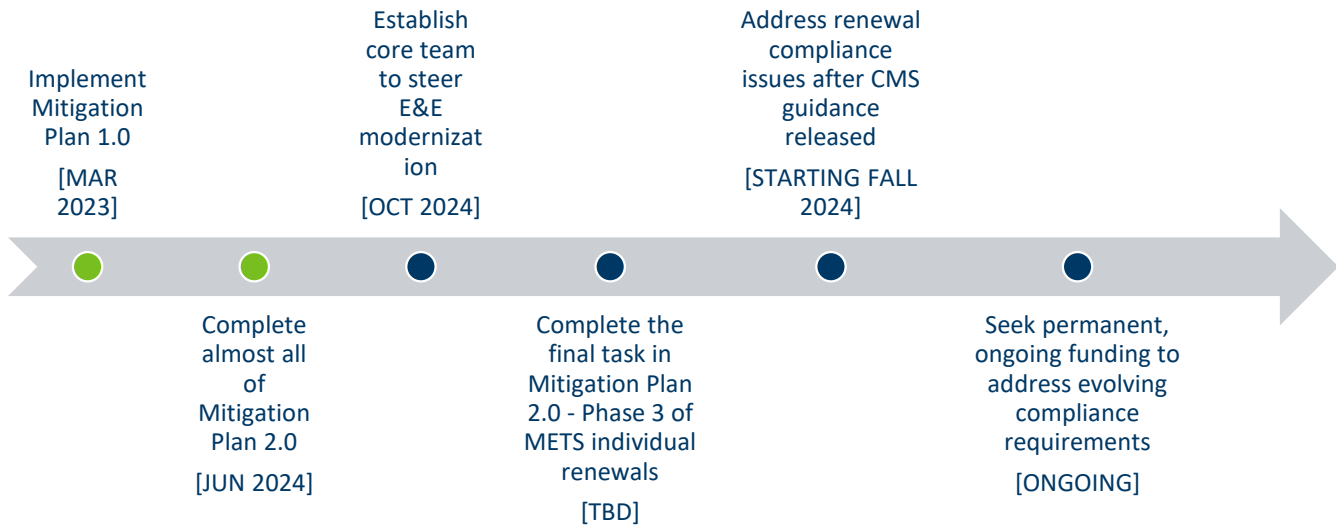

Figure 18: METS Compliance Updates Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome E2: Implement the capability for medical assistance and MinnesotaCare enrollees to apply, renew, and make changes to their eligibility and select health plans online.

Why it's important

- The goal is to establish an expanded self-service user experience so that Medical Assistance and MinnesotaCare applicants and enrollees can quickly and easily manage their health care eligibility profile and health plan selection online.

What happened since the last report

- The METS team has largely focused on addressing mitigation and compliance since the last report was completed, so they have not yet been able to center this longer-term initiative in their work.
- However, the large amount of mitigation and compliance work that has been completed since the last report (especially those that led to increases in the Medicaid auto-renewal rate) will help improve features like automation, which will set the team up for success when they are ready to pivot to focus on expanding the self-service experience for Minnesotans.
- Next steps to move toward this outcome include:

- The METS team partnered with local contractor, Deloitte, to obtain a review of MN's renewal form and make recommendations informed by the approaches of other states. The team will use this information as a precursor to further review, revise, and simplify this paper renewal form, which will set the team up to make future systems improvements.
- As noted in relation to Outcome E2, the METS team will establish a core team to steer eligibility and enrollment modernization.
- Develop business requirements that will guide the system solution for online renewal functionality.
- Conduct a scan to learn more about what solutions or models exist that can meet these needs. This is based on recommendations from the Gartner Report to better understand what is available for integrating health care applications with other core functions of public health care administration. Assessing the feasibility and utility of available options will provide the data needed to ensure the solution adopted will address the long-term needs of Minnesotans, Tribal and county workers, and DHS.
- The findings of this scan will guide a plan to move forward with ensuring public health care applicants and enrollees can quickly and easily manage their health care eligibility profile and health plan selection online, and that Tribal and county workers are able to interact with DHS to provide fast, accurate eligibility determinations and services to Minnesotans.
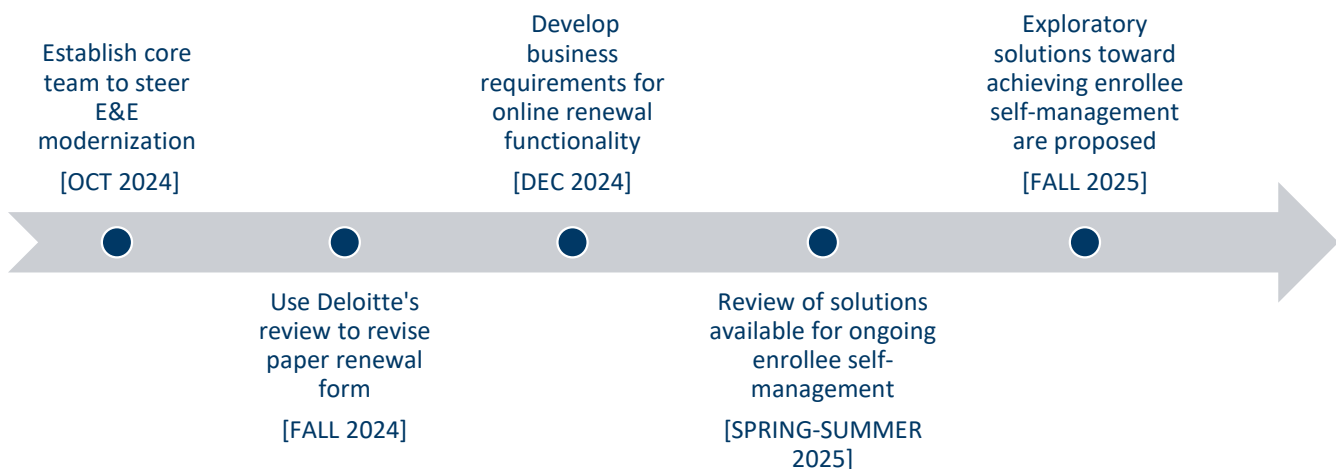

Figure 19: METS Self-Service Experience Milestones Timeline

Key: Green points are completed milestones; blue points are anticipated milestones

Outcome E3: Reduce manual data entry and redundancies in other steps taken by Tribal and county eligibility workers to improve the accuracy and timeliness of eligibility determinations.

Why it's important

- One goal of both the mitigation/compliance efforts (Outcome E1) and the self-service user experience (Outcome E2) is to make it quicker and easier for Tribal and county workers to make eligibility determinations, which also allows Minnesotans to receive health care coverage faster.

What happened since the last report

- As reported above for Outcome E1, the improved auto-renewal rates saved an estimated 115,725 processing worker hours during the unwinding period (April 2023-May 2024).
- The next steps and milestones in this effort to reduce manual data entry and redundancies for Tribal and county eligibility workers mirror those listed above for Outcomes C1 and C2. Most mitigation and compliance changes will positively impact this outcome for Tribal and county workers, as will the expanded self-service user experience for Minnesota applicants and enrollees.

Minnesota Eligibility Technology System Outcomes Table

This table summarizes the narrative from above, including detailed updates on baseline and performance indicator metrics.

Outcome & Why it Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
E1. Complete necessary changes to comply with federal requirements. DHS' systems are fully compliant with requirements issued by the Centers for Medicare & Medicaid Services (CMS).	General compliance with CMS requirements exists.	By the end of this funding cycle, DHS' health care solutions are generally compliant with CMS renewal requirements.	As of October 1, 2023, Mitigation Plan 1.0 (co-developed with CMS) had been implemented.	As of August 2024, all of Mitigation Plan 2.0 has been completed except the third and final phase of individual renewals.
E2. Implement the capability for Medical Assistance and MinnesotaCare enrollees to apply, renew, and make changes to their eligibility and select health plans online. Medical Assistance and MinnesotaCare applicants and enrollees can quickly and easily manage their health care profile and plan online.	1. Review of solutions available for public health care eligibility and enrollment and ongoing enrollee self-management is conducted. 2. Exploratory solutions toward achieving these outcomes are proposed.	In this funding cycle, a review of solutions available for public health care will be completed and exploratory solutions will be proposed.	As of October 1, 2023: 1. No review of solutions available for public health care eligibility and enrollment and ongoing enrollee self-management had yet been conducted. 2. Exploratory solutions toward achieving these outcomes had not yet been proposed.	As of August 2024, the METS team has begun their review and exploration of solutions, with a goal of proposing exploratory solutions by early fall 2025.

Outcome & Why it Matters	Performance Indicator(s)	Goal	Baseline	Progress Indicator
E3. Reduce manual data entry and other steps taken by Tribal and county eligibility workers to improve the accuracy and timeliness of eligibility determinations. It is quicker and easier for Tribal and county workers to make eligibility determinations, allowing Minnesotans to receive health care coverage faster.	The review of public health care solutions (noted above) is conducted with consideration of the data entry burden on Tribal and county eligibility workers.	(Joined with the goal above) In this funding cycle, a review of solutions available for public health care will be completed and exploratory solutions will be proposed, including data entry considerations.	As of October 1, 2023: 1. No review of solutions available for public health care eligibility and enrollment and ongoing enrollee self-management had yet been conducted. 2. Exploratory solutions toward achieving these outcomes had not yet been proposed.	As of August 2024, the METS team has begun their review and exploration of solutions, with a goal of proposing exploratory solutions by early fall 2025. In the shorter term, activities done to address compliance needs related to auto-renewals (Outcome E1) saved an estimated 115,725 processing worker hours between April 2023-May 2024; workers continue to benefit from improved auto-renewal rates on an ongoing basis.

Table 5: Minnesota Eligibility Technology System Outcomes Table

VI. Report Next Steps

As staff continue to iterate and refine within each of the efforts, DCYF/DHS will update performance measures, baseline metrics, benchmarks, and goals as appropriate. Any updates to this information will be shared with the legislature in future reports. All time-bound goals are dependent on the success of DCYF and DHS in gaining resources such as funding, contracts, consultants, vendors, and staff, who can then provide the deliverables needed to achieve stated goals.

The outcomes and performance indicators included in this report reflect specific areas where Service Delivery Transformation currently has focused energy. Performance indicators and corresponding goals will be further developed and become more robust as this work moves forward. As new data collection systems are implemented, more specific performance measurement will be available in future reports. For initiatives like MMIS, movement on outcomes will be seen once the technological changes have been made.