



Legislative Report

Transformation for Delivery of Human Services Programs

Legislative Relations

March 2026

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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 \$4,634.

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I. Executive summary

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.

Minnesota Department of Children, Youth, and Families (DCYF), Minnesota Department of Human Services (DHS), and Minnesota IT Services (MNIT) are transforming service delivery to better meet the needs of Minnesotans. This transformation is in the interest of those who apply for and receive services, and the staff at Tribal Nations, counties, and providers who deliver services to communities. Addressing people’s needs and challenges, or “pain points,” drives the state’s efforts. To address pain points, the state aims to change outdated processes, improve service delivery and outcomes, and expand transparency through data and visualizations.

Since October 2023, the teams from the five initiatives represented in this report are improving the experiences of the people they serve through diverse efforts. This legislative funding 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 Integrated Service Delivery (ISD) product line exists within this initiative area, which is working to make the path to benefits simple, welcoming, and quick for Minnesotans, while reducing administrative burdens for Tribal Nations and county case workers who process benefits applications.

This year, the ISD team rolled out new email and infrastructure that supports customizable content, expanded text message campaigns to Tribes and counties, and prepared to launch an applicant-facing case status tracking tool. Shared services teams hosted community engagement events, focus groups with county workers, and extensive user experience design research to gain feedback that the ISD team uses to address needs and improve products.

2. **Integrated Services for Children and Families:** The state will stabilize legacy systems responsible for delivering more than \$1.9 billion in benefits to hundreds of thousands of Minnesotans and will improve the experience of clients who apply for safety-net programs.

This year, the state completed critical system analyses that provided actionable recommendations, including technical guidance for SSIS, modernization options for child support technology, and direction for a comprehensive child welfare information system (CCWIS). Projects were launched to address findings from last year’s study on SSIS’ data entry burdens. Progress has been made toward piloting the proof-of-concept for improved applicant and benefit recipient notices.

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.

This year, the updated pharmacy module went live and is demonstrating positive results, including fewer prior authorization requests, shorter processing times when prior authorizations are requested, and reduced need for providers to call customer service for support. A 24/7 member and provider help-desk also launched, allowing callers to reach a customer service representative in under a minute.

4. **Provider Licensing and Reporting Hub:** The state will create a unified licensing experience for all human services licensed programs.

This year, comprehensive updated personas for each user type were created and validated by user groups. Systems were established for ongoing user feedback and persona updates. OIG product teams' foundational functionality continued to be built, and the teams expanded to support ongoing product development and implementation.

5. **Minnesota Eligibility Technology System (METS) functionality improvements:** The state will implement short-term emergency fixes, ongoing sustainability efforts, and recommendations for improvement.

This year, DHS has made significant progress through multiple efforts including updating METS renewal forms and functionality to comply with federal requirements; completing planning activities for critical updates; developing a tool for Minnesota Health Care Program (MHCP) enrollees to look up case information online; and addressing issues that affect workers' experience with METS.

This work will be ongoing. Measurements and outcomes will be adjusted periodically as the needs of the state's partners and people being served change. The performance indicators presented in this report represent the outcomes each initiative aims to achieve. All time-bound goals are dependent on DCYF, DHS, and MNIT'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.

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

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).

III. Introduction

Purpose of report

This report is submitted to the Minnesota Legislature pursuant to Minnesota Session Laws 2023, Chapter 70, Article 15, Section 10, Subdivision 2. The 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 July 2024 through June 2025.

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 initiatives take an iterative approach to addressing the needs of the people served, this report shares many of the successes and lessons learned from the past year.

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

IV. Service Delivery Transformation

Sections A through E below cover each of the five initiative areas and provide:

- information on budget and expenditures,
- a description of the identified outcomes and their importance,
- achievements since the last report,
- a milestones timeline for each outcome, and
- a table of outcomes and performance indicators.

Budgets & Expenditures

Across initiatives, teams underspent compared to their annual budgets. Underspending was due to many factors. Notably, the 2025 federal budget reconciliation bill (H.R. 1) and related federal actions have significantly altered operations of state agencies. In addition, 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

The state will simplify and streamline IT delivery systems for clients, Tribes, counties, and providers. DCYF, DHS, and MNIT 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.

Budget and 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 recent changes. Rethinking and splitting funding and functions between DHS and DCYF required significant operational capacity to ensure functions were redistributed in a way acceptable to both agencies. This temporarily delayed funding decisions.

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, which is supported by outcome (A6) fund foundational work by providing business and technology resources to persistent cross-functional product teams to support ongoing iterative development; the funding cannot be separated by outcome.

Purpose of the Expenditure	Type of Expenditure	FY25 Amount Budgeted	FY25 Amount Expended (Whole Dollars)	FY25 Amount Expended (State Dollars)
ISD Product Line	APD	8,260,703		
<i>ISD Product Line</i>	<i>DHS Staff</i>	-	1,387,381	513,331
<i>ISD Product Line</i>	<i>MNIT Staff</i>	-	2,937,137	1,086,741
<i>ISD Product Line</i>	<i>MNIT Staff Augmentation</i>	-	217,543	80,491
<i>ISD Product Line</i>	<i>Hardware/Software/Licenses</i>	-	1,403	519
<i>ISD Product Line</i>	<i>MNIT Enterprise</i>	-	191,274	70,771
ISD Product Line	DHS Service Contract	95,000	-	-
ISD Product Line	MNIT State Personnel	250,000	215,220	107,610
Agile Coaching	DHS Service Contracts	754,000	486,440	243,220
Existing SDT operational positions without a permanent funding source	DHS State Personnel	6,505,913	3,124,984	1,562,492
Foundational Support	MNIT State Personnel	174,000	141,128	70,564
Foundational Support	MNIT Service Contracts	900,000	680,936	340,468

Purpose of the Expenditure	Type of Expenditure	FY25 Amount Budgeted	FY25 Amount Expended (Whole Dollars)	FY25 Amount Expended (State Dollars)
Foundational Support	DHS Service Contract	175,000	174,825	87,413
Foundational Support	Hardware/Software/Licenses	255,000	-	-
Architecture Tools	DHS Service Contracts	100,000	-	-
Architecture Tools	MNIT Service Contracts	100,000	-	-
Architecture Tools	MNIT State Personnel	112,500	246	62
Architecture Tools	DHS State Personnel	112,500	-	-
Architecture Tools	Hardware/Software/Licenses	250,000	-	-
Data Infrastructure	Hardware/Software/Licenses	234,000	-	-
	Totals	18,278,616	9,558,516	4,163,718

Table 1: Transforming Service Delivery FY25 Budgets and Expenditures

Outcomes and Key Deliverables

Below are the six (6) outcomes included within the Transforming Service Delivery initiative.

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

- The Service Delivery Transformation portfolio of product lines, teams, and projects work to improve the experience of Minnesotans interacting with the human services system.
- The Integrated Service Delivery (ISD) product line, which includes the MNbenefits product team, the vision is: *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.*

What happened since the last report

- ISD, in partnership with Minnesota Management and Budget (MMB) through a OneMN Goal, MNIT and the DCYF Economic Assistance and Employment Supports Division (EAESD) has focused effort on reducing the overall time from benefits application to determination. ISD product teams have aligned to tackle the most pressing pain points in applying for and processing benefits applications.
- In April 2025, facing resource shortages and technical dependencies, resources pivoted and combined to work on key deliverables within the MNbenefits product team and the Worker Experience team.

During FY2024-2025, the ISD product line:

- Prepared for pilot launch of an applicant-facing case status tracking tool, providing clients with their case details.
- Hosted community engagement events and focus groups to collect insights on county worker needs.
- Conducted extensive user experience design research to evaluate potential designs and web flows for applicants that align to policy.
- Launched new email and text infrastructure to support customizable content, adding clarity to applicants and providing relevant county-specific support information.
- Expanded text message campaigns to additional Tribes and counties.

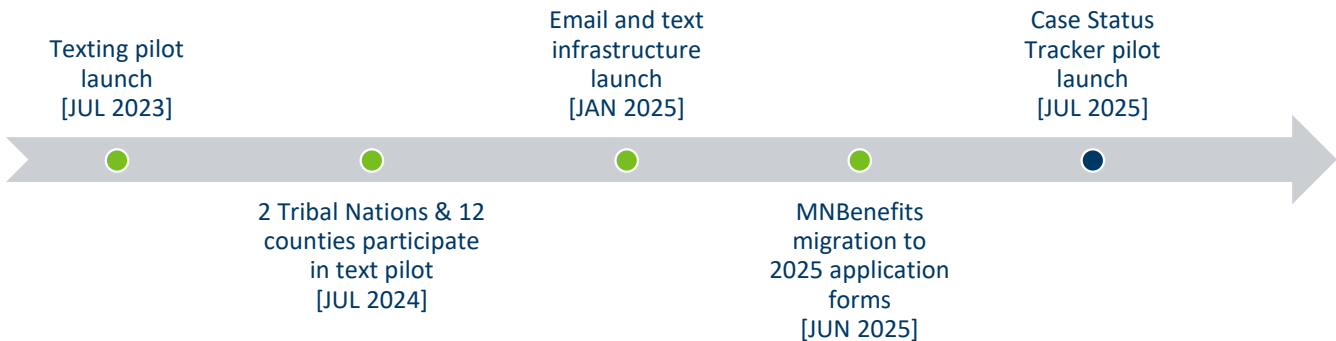


Figure 1: Outcome A1 Milestones Timeline

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

- 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 reviews¹ are held online and are open to all DHS, DCYF and MNIT staff, and partners at Tribal Nations and counties.
- Product teams also create close feedback loops for initiatives that have broad user impact.

What happened since the last report

- ISD product line team members remained flexible and adapted to strategic changes as work shifted to DCYF and the MNIT@DCYF re-structure took place.
- ISD Eligibility & Enrollment Strategic Roadmap was updated to reflect learnings from teams, partners, and technology adjustments.
- Client Experience team pivoted to support high-priority items of the ISD product line while technical roadblocks are resolved.
- The Worker Experience team displayed agility and perseverance as key security concerns were identified and resolved, resulting in a change to the scope of the initial planned product.
- ISD and other product lines continue to host sprint reviews and to ensure feedback loops are in place, allowing for consistency that is core to continuous improvement and continuous delivery best practices.



Figure 2: Outcome A2 Milestones Timeline

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

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>)

Outcome A3: Improve delivery times for digital services and solutions ²

Why it's important

- By adopting an agile, product-centric approach to information technology development, Service Delivery Transformation produces solutions in iterative cycles, also often referred to as continuous improvement/continuous delivery (CI/CD).
- Products are built on flexible technology infrastructure, which allows SDT to produce smaller, useable products that can be deployed quickly to clients, Tribal Nations, counties, and partners.
- Solutions can be immediately helpful to impacted populations and launched as pilots, enabling partners to test and provide feedback on new technology features. This approach allows for quick iterative cycles, by adjusting the product based on the feedback before full scale launch or adoption.

What happened since the last report

- MNbenefits team has regular releases that focus on incrementally improving site features and usability.
- Client Experience team launched initial implementation of new communications infrastructure, allowing for timely email and text communications about applications, with increased messaging personalization.
- Worker Experience team launched the Basic Case Status Tracker pilot in July 2025, allowing for clients in pilot counties to digitally access information about their application post submission for the first time.
- Enhancements to capabilities are managed by ISD product teams with CI/CD at the core.

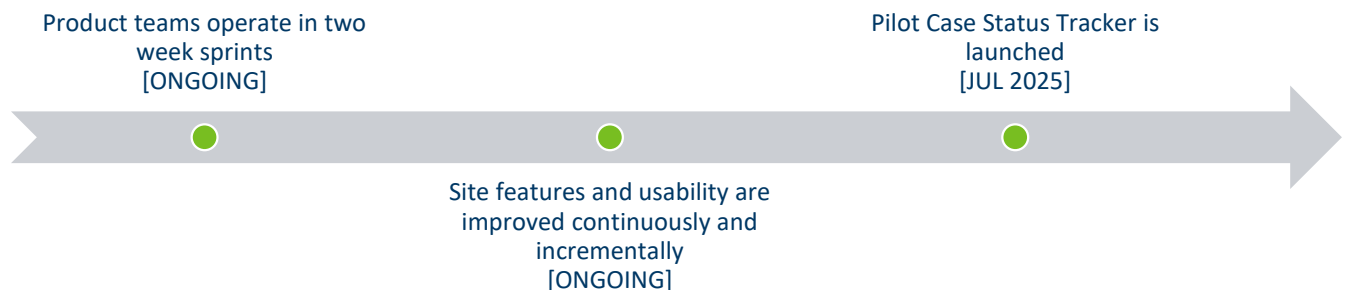


Figure 3: Outcome A3 Milestones Timeline

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 and now DCYF, allowing more time to focus on providing services to Minnesotans.

² This outcome was rewritten in 2024, 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.

- 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.
- 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 pilot Case Status Tracker was launched in July 2025. Through close partnership with counties, clients will have access to relevant information provided by their workers in a digital format, sooner than it is likely available in the mail. This effort aligns with the OneMN Goal of reducing time to benefits, while improving the experience of Minnesotans, Tribal Nation and county partners as call volume is reduced.
- The digital application flow in MNbenefits was updated to match the physical 2025 Combined Application (CAF), providing consistent information to Tribal and county workers regardless of how the information was captured.
- Compliance and policy updates were made to ensure users have the most recent, relevant information.
- The MNbenefits team adjusted application questions and user flows to ensure that applications are routed to the correct Tribal Nation or county based on their unique information and on the specific programs supported by each Tribal Nation or county.
- ISD Product team hosted “Working Backwards” visioning workshops with key internal and county partners to continue identifying worker needs and challenges. Partnership with MNIT, DCYF, and EAESD led to the launch of the OneMN Goal of reducing time to benefits in June 2025.

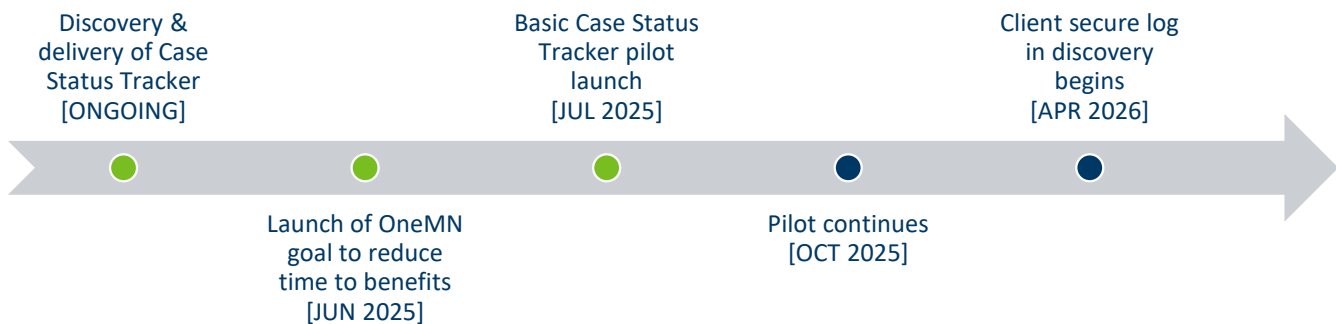


Figure 4: Outcome A4 Milestones Timeline

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 will share its journey with internal leaders, external partners and the public for increased transparency, partnership, and decision-making.

- By creating dashboards, visualizations, or other analytic tools, accurate and easy to understand results about its progress toward outcomes are shared.

What happened since the last report

- To help product teams better share their work and progress, Turnberry Solutions consultants and SDT leadership developed dashboard templates for use across teams. Product team dashboard presentations to executive leaders were rolled out in February 2025.
- To provide transparent outcomes to partners and the public, state staff are investing in dashboard visualization and analytics tools. The tools being procured will allow automated updates of deidentified data across the enterprise, efficiently providing insights that support informed decision-making within the state and at Tribal Nations, counties and other partners.

Specific to ISD:

- Data scientists have adjusted to operate as a shared service, providing cross-team awareness and consistent analytics across teams.
- All product line data needs are prioritized to ensure visibility into each product and to overall goals.
- Tribal Nation and county-facing dashboards are being developed and reviewed, pending migration to new data tools that meet MNIT guidelines.
- Successful launch of new web analytics capabilities in FY25 will allow for greater understanding and insights into user behavior and client satisfaction.

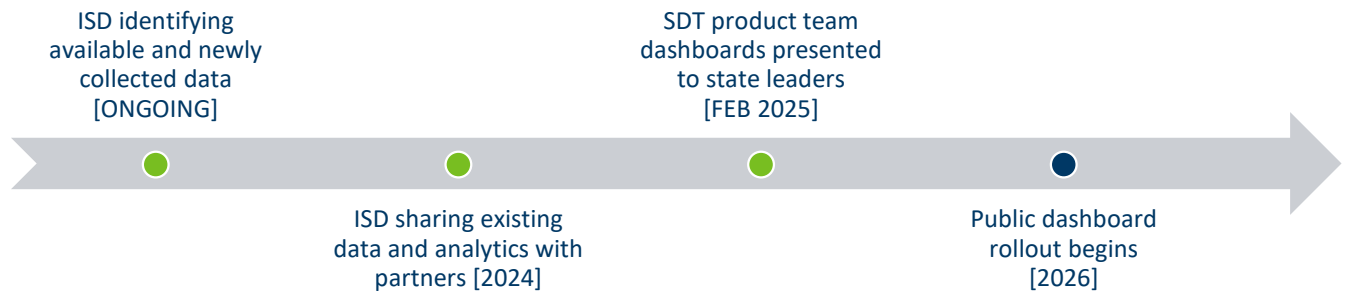


Figure 5: Outcome A5 Milestones Timeline

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 work supports all preceding outcomes. To develop solutions that respond to the needs of Minnesotans, Tribal Nations, counties, and other partners, persistent cross-functional product teams must be implemented, staffed, and resourced.
- Resourcing foundational frameworks, including community engagement, change management, evaluation, enterprise architecture, and system security ensure product team performance and growth.

What happened since the last report

- DHS' Business Solutions Office (BSO) held two community engagement events in fall 2024, in addition to the four events held the previous fiscal year³. In addition to the development of the Case Status Tracker tool mentioned under outcome A4, the ideas, pain points, and feedback provided in these sessions guided ISD staff in making several updates to the MNbenefits platform, including:
 - Added information about phone and internet discounts and accessibility devices, Child Tax Credit program, Women, Infants, and Children (WIC) supplemental nutrition program, and other resources based upon applicants' responses.
 - Improved routing of applications to appropriate Tribal Nations based on membership status and/or living within the boundaries of a Tribal Nation.
 - New questions added to Child Care Assistance Program (CCAP) and Emergency Assistance program applications, to allow eligibility workers to make faster determinations.
- Community engagement staff provide training and resources internally to expand DHS staff capacity to authentically engage with communities who receive services and benefits.
- The ISD product line moved to DCYF from DHS. Two product teams, Pharmacy and Education & Training Voucher, successfully completed their work and have disbanded.
- To improve system security, DHS servers are being updated to ensure compatibility and avoid costly extended support fees. Remediation of existing critical and high vulnerabilities has occurred along with a reduction in 2012 and 2016 windows servers in use.
- Work is underway to migrate 171 databases and associated applications to either an upgraded server or to the cloud to remediate security vulnerabilities resulting from out-of-date servers.
- The contract with Turnberry Solutions consultants completed. DHS and MNIT@DHS received transformation coaching and guidance across multiple levels to support transformation into the future.
- Procurement of an enterprise architecture tool is underway. This tool will provide meaningful insight into DHS's product and project portfolio, especially in identifying where current capabilities and opportunities overlap. These insights will be used to evaluate successes and areas for improvement.
- DCYF, DHS, and the Department of Direct Care and Treatment (DCT) agreed to share a metadata catalogue tool. This work is foundational for accurate data analysis, data security, and technology development. Finding, understanding (tagging), and trusting data used across systems enables secure and transparent data sharing with Tribal Nations and county partners.
- To support Service Delivery Transformation, MNIT DHS engaged Gartner to guide the IT Operating Model Transformation. This work established the foundational strategies, structures, and capabilities needed to modernize IT service delivery and align with Transforming Service Delivery's outcomes:
 - Improved Service Delivery and Responsiveness to Minnesotans
 - How the Contract Helped: Defined core IT service delivery processes and clarified shared service roles across MNIT DHS, DCYF, DCT, and HSDS.

³ For a full description of these community engagement activities and the improvements made to ISD products, see [Minnesotans' Lived Experience with Human Services: A Community Engagement Report, May 6, 2025](#)

- Impact: Enables faster, more efficient product development and delivery, ensuring that services better meet the needs of Minnesotans.
 - Increased Efficiency and Reduced Duplication
 - How the Contract Helped: Introduced formal resource and capacity management processes and standardized job roles.
 - Impact: Improves workload visibility, reduces project delays, and eliminates redundancy across teams and services.
 - Enhanced Collaboration with Tribal Nations and Counties
 - How the Contract Helped: Strengthened Business Relationship Management (BRM) to align IT services with agency and partner needs.
 - Impact: Improves intake coordination and prioritization, ensuring that technology solutions are responsive to the needs of Tribal Nations and counties.
 - Greater Transparency and Accountability in IT Investments
 - How the Contract Helped: Established unified frameworks for IT Financial Management (ITFM) and IT Performance Management (ITPM).
 - Impact: Aligns IT investments with strategic outcomes and provides clear visibility into costs and performance.
 - A Modern, Skilled, and Adaptable IT Workforce
 - How the Contract Helped: Redesigned job architecture and launched a workforce strategy to close skills gaps and align roles with service delivery needs.
 - Impact: Supports the adoption of new ways of working and ensures MNIT DHS has the right talent to deliver on its mission.
- Several of Gartner’s recommendations are already in the process of being implemented, laying the groundwork for meaningful change. Continued implementation is essential to fully realize the intended improvements in service delivery, operational efficiency, and responsiveness to Minnesotans, counties, and Tribal Nations.

Specific to ISD:

- ISD has funding for four planned teams but are not yet fully staffed. Staffing product managers continues to be a challenge in competition with private sector pay rates.
- Adoption and support of product-focused delivery within DCYF and MNIT is slow, but with the efforts through the OneMN goal and the restructuring of MNIT@DCYF, there is increased buy-in and opportunity.
- Leadership is reviewing teams’ coaching needs for ongoing skill building in Agile methodologies, which will be further supported as MNIT@DCYF adjusts to the new structure.
- Several high-profile projects have temporarily shifted resources from ISD-specific goals, but in support of our Tribal Nation and county partners.
- Transitions from DHS to DCYF have introduced complexities and role adjustments for many product line members, which continue to be evaluated. This gives ISD and MNIT leadership the opportunity to align new product teams to the strategic goals of DCYF and DHS. Any product team restructuring would be introduced with the intent to continue to introduce high impact, high quality products for all of Minnesotans to benefit and experience.

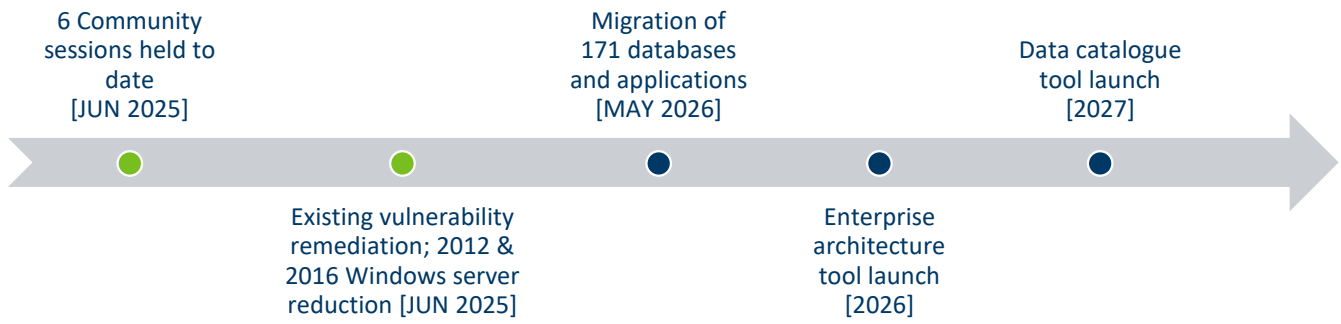


Figure 6: Outcome A6 Milestones Timeline

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	FY24 Progress Indicator	FY25 Progress Indicator
<p>A1. Improve the experience of Minnesotans interacting with the human services system</p> <p>It will be quicker and easier for Minnesotans to interact with the human services system</p>	<p>1. Overall time from application to eligibility determination (MNbenefits)</p> <p>2. Overall time from application to receiving benefits for eligible applicants (MNbenefits)</p>	<p>By the end of this funding cycle:</p> <p>1. Overall reduction in the number of days from MNbenefits application submission to eligibility determination</p> <p>2. Overall reduction in the number of days from MNbenefits application to receiving benefits for eligible applicants</p>	<p>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</p> <p>2. Not yet available. The ISD team is working toward measuring this.</p>	<p>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.</p>	<p>1. In 2024, 82% 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.</p>

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.

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>A2. Improve delivery times for digital services and solutions.</p> <p>By adopting agile practices, product teams will consistently deliver value to their users.</p>	<p>1. Use of backlog to prioritize work.</p> <p>2. Burndown rates for backlog work.</p>	<p>1. All product teams will use a backlog to prioritize work.</p> <p>2. Burndown rates will show consistency or increase in productivity across sprints.</p>	<p>1. As of 10/2023, 100% of product teams were using a backlog to prioritize their work.</p> <p>2. Burndown rates are not yet being calculated across teams.</p>	<p>1. As of 09/2024, 100% of product teams use backlogs to prioritize their work.</p> <p>2. Burndown rates are not yet being calculated across teams.</p>	<p>1. As of 07/2025, 100% of product teams use backlogs to prioritize their work.</p> <p>2. Burndown rates are tracked for 12 (100%) teams in various ways; several teams are shifting the way they calculate to provide more meaningful data</p>
<p>A3. Increase business agility to respond to new or shifting needs.</p> <p>Improving DHS' ability to pivot its work focus allows it to consistently prioritize user needs.</p>	<p>Sprint reviews are regularly held for each product team.</p>	<p>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.</p>	<p>As of 10/1/2023, 7 of 9 product teams (77%) were holding regular sprint reviews.</p>	<p>As of 07/2024, 12 of 14⁵ product teams (85%) hold regular sprint reviews.</p>	<p>As of 07/2025, 12 of 12⁶ (100%) product teams hold regular sprint reviews.</p>

⁵ 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.

⁶ The Pharmacy and Education & Training Voucher product teams successfully completed their work, reducing the number of Service Delivery Transformation product teams to 12 total.

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>A4. Improve the experience of Tribal human services and county workers.</p> <p>Administrative tasks are made quick and easy for Tribal and county workers, allowing more time to provide services to Minnesotans.</p>	<p>Overall call volume for application status updates received by Tribal and county workers.</p>	<p>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.</p>	<p>Initial qualitative data from user experience interviews indicated a high call volume to county workers.</p>	<p>As of 08/2024, a survey of Tribal Nations and county workers is in development to gauge call volume regarding status updates.</p>	<p>As of 07/2025, the ISD team is working with counties to identify a feasible method for measuring call volume changes in relation to the application status tracker pilot</p>
<p>A5. Develop and host dashboards, visualizations, or analytics that can be shared with external partners and the public to foster data-driven decision making.</p> <p>Accurate reports about progress toward outcomes are widely available.</p>	<p>1. Dashboards, visualizations, or analytics related to SDT exist.</p> <p>2. Above tool(s) are shared with external partners.</p> <p>3. Above tool(s) are shared with the public.</p>	<p>By the end of this funding cycle, at least one tool documenting progress toward SDT outcomes is available to external partners and the public.</p>	<p>As of 10/1/2023, no dashboards, visualizations, or analytics are consistently shared with external partners or the public.</p>	<p>Product team specific dashboards are shared in sprint reviews that are open to state staff and partners.</p> <p>Since 10/1/2023, the SDT team has worked to define progress measurement and identify data for new dashboards, visualizations, or analytics.</p>	<p>As of 7/1/2025, Product team dashboards have been developed and are shared with leaders.</p> <p>Tools to provide public dashboards are being procured</p>

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>A6. Fund foundational work by providing business and technology resources to persistent cross-functional product teams to support ongoing, iterative development.</p> <p>The state improves how it performs its work for the people being served.</p>	<p>Cross-functional product teams are operational and supported with foundational frameworks.</p>	<p>By the end of this funding cycle, at least nine (9) teams will continue to operate, and two (2) additional teams will be developed.</p>	<p>As of 10/1/2023, 9 product teams operate within Service Delivery Transformation.</p>	<p>As of 07/1/2024, 14 product teams are in operation.</p>	<p>As of 07/01/2025, 12⁷ product teams are in operation across DCYF and DHS.</p>

Table 2: Transforming Service Delivery Outcomes

⁷ The Pharmacy and Education & Training Voucher product teams successfully completed their work, reducing the number of Service Delivery Transformation product teams to 12 total.

B. Integrated Services for Children and Families

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.

Budget and 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	FY25 Amount Budgeted	FY25 Amount Expended (Whole Dollars)	FY25 Amount Expended (State Dollars)
MAXIS Notice Contract (Outcome B4)	MNIT Service Contracts	280,000	269,750	148,363
State Staff supporting MAXIS/MEC2 Backlog	MNIT State Personnel	1,751,094	1,129,913	621,452
State Staff supporting MAXIS & MEC2, EAESD, SSIS, and BID	DCYF State Personnel	1,884,000	1,842,803	1,842,803
PRISM Modernization (Outcome B2)	MNIT Service Contracts	350,092	315,083	107,128
SSIS Delphi Contract (Outcome B1)	MNIT Staff Augmentation	250,000	245,142	127,474
	Totals	4,515,186	3,802,691	2,847,220

Table 3: Integrated Services for Children and Families FY 25 Budgets and Expenditures

Outcomes and Key Deliverables

Below are the six (6) outcomes included within the Integrated Services for Children and Families initiative.

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

Why it's important

- SSIS is the state’s case management and reporting system for child and adult programs, including child welfare activities.
- DCYF and 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 Nations and county workers to effectively serve clients.
- Reducing unscheduled downtime will give workers a more consistent experience, allowing them to proactively plan workloads and better serve clients.
- The state will address pressing short-term challenges, while exploring long-term solutions through the two studies of SSIS.

What happened since the last report

- A Delphi expert consultant conducted an in-depth technical review of SSIS from July 2024 through June 2025. This consultant’s work is also tied to the results of Outcome B5 below.
- A final report was completed in June 2025, with the following recommendations:
 - Migrate all functionality to the cloud or all on-premises; MNIT has clarified that the on-premises option will not be feasible for our current environment.
 - All Oracle databases used by SSIS should be moved to Azure.
- Small improvements could be made to improve performance; however, these performance issues are technical in nature and not related to the user experience reported.
- MNIT began the process of migrating all environments to Azure in late 2025. Early data on an internal QA environment has shown performance improvements. Migration of production environments are anticipated to be completed by mid-2026.



Figure 7: Outcome B1 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

- Modernization will deliver value to front-line child support workers by supporting training and retention of new staff and lead to more efficient processes and improved customer service.

- Modernization will allow the child support program to replace a legacy tech stack with current technology.

What happened since the last report

- The DCYF Child Support Division (CSD) facilitated over 40 Tribal Nation and county interviews to understand pain points, define modernization success criteria, and workflows of front-line workers.
- CSD surveyed Tribal Nation and county partners to understand the document management landscape across the state, including costs, applications, and accessibility practices.
- CSD spoke with vendors to understand the current modernization landscape across other child support agencies, and what is possible with our current stack.
- The business engaged Public Consulting Group (PCG) to perform an analysis of two approaches that fit current budget constraints: refactor/replatform and encapsulation. PCG produced a cost summary of various child support approaches inside and outside of current budget constraints. PCG conducted both technical assessments and compared the approaches. MNIT further developed an incremental approach that led with Encapsulation.
- Vision, mission, goals, and guiding principles aligned with the CSD Strategic Framework were developed with MNIT, CSD, Tribal Nations and counties.
- MNIT and CSD continue to weigh the pros and cons of various approaches and how to move forward. The state has identified a potential path forward that requires a feasibility study to obtain federal approval.

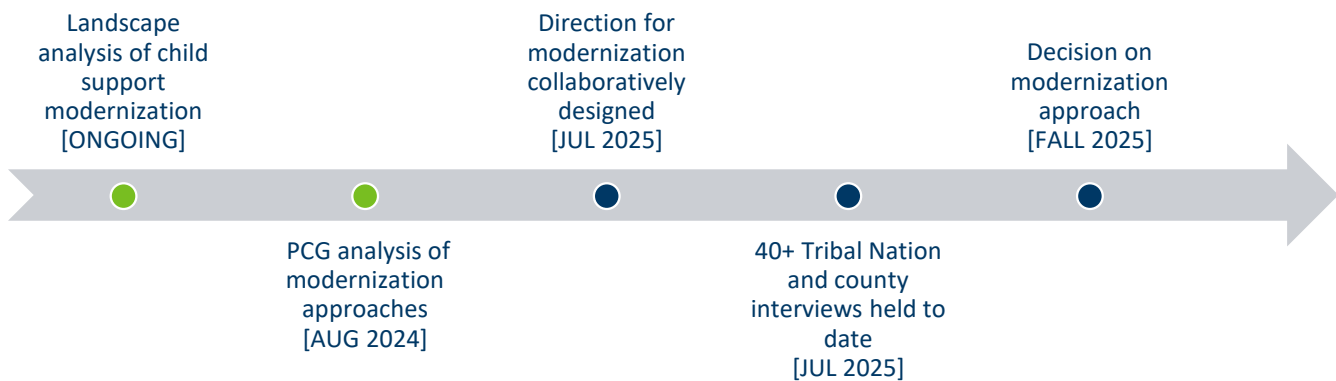


Figure 8: Outcome B2 Milestones Timeline

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 options 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

- The first step in modernization is determining the overall approach presented in outcome B2 above, therefore work on MCSO is forthcoming.
- DCYF CSD and MNIT have added some features that will benefit users using operating budget, but the modernization budget will allow for more significant enhancements. These projects include updating banking information and adding electronic payments.

Features for updating and adding financial information added
[TBD]

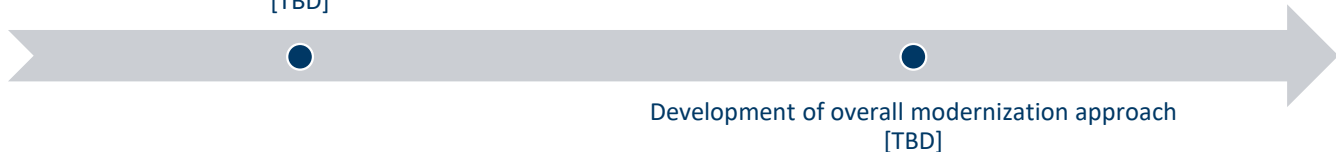


Figure 9: Outcome B3 Milestones Timeline

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 state employees, as it is a lengthy, labor-intensive process to create and edit notices that meet recipients' information needs.
- The state 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

- All discovery and requirements work has been completed for the move to the JEE environment, which is the platform for developing this large-scale application.
- Four of the six tasks to complete the pilot proof of concept in this new environment have been completed: MAXIS natural code analysis, notice code analysis using informer tool, conversion of notice code text to AEM text fragments, and review with project team.

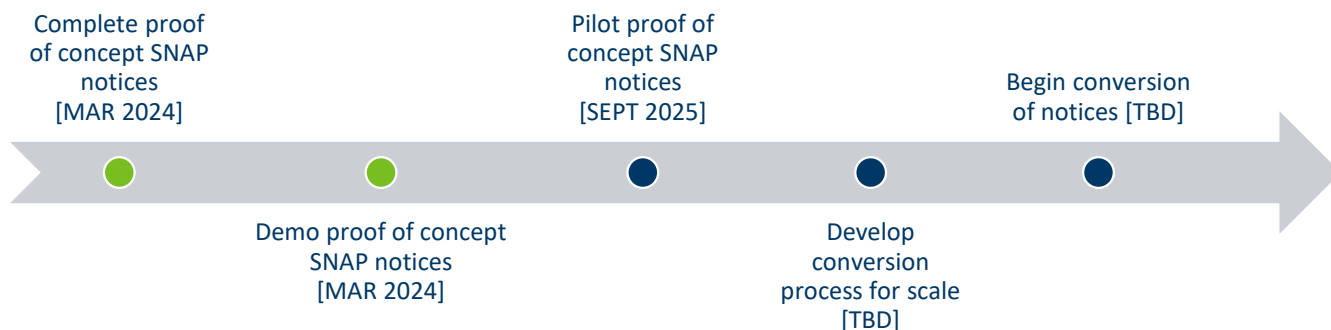


Figure 10: Outcome B4 Milestones Timeline

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

Outcome B5: In addition to these outcomes, there is a requirement that the DCYF 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

- Over 6,000 daily users at the state, Tribal Nations and counties depend on SSIS for reporting.
- SSIS has urgent user issues, including burdensome data entry requirements, system usability, and technical issues. These issues take providers’ time away from working with families.
- This evaluation analyzes the current system’s technical and architectural issues, in addition to business analysis and feedback from impacted groups. This complements the study in outcome B6 (below) focused on the data entry and paperwork challenges of SSIS
- External vendors will assess the investment required and platform for modernization. This will 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 reassessment was completed after the 2018 Public Consulting Group assessment, Child Protection Paperwork Reduction Act assessment, and the decision to invest in modernizing the child welfare components of SSIS into a modern CCWIS system for Minnesota during the 2025 Legislative session. The decision to shift direction was made; rather than transitioning the current SSIS system to meet CCWIS compliance, DCYF and MNIT have decided to replace the child welfare components entirely with a new system, purpose-built for CCWIS requirements. A new RFO has been issued for activities to complement internal activities. A timeline of completed and projected milestones is below:

- 2024-2025: the original RFO could not be executed due to contract issues with selected vendor
- May 2025: Governor Walz signs into law a \$35 million investment for CCWIS
- June 2025: Federal consultation with new Administration for Children and Families (ACF) CCWIS partners
- July 2025: Formation of internal Core Modernization Committee, including new activities and timeline

- July 2025: RFO issued to support CCWIS Modernization activities
- September 2025: RFO vendor/s selected to complement internal readiness activities
- November 2025: Planning Advanced Planning Document approved by ACF for federal match on planning personnel and planning vendor contract
- September 2025 - May 2026: Development of implementation Advanced Planning Document (APD), RFP and system requirements, and Data Conversion Plan for federal review

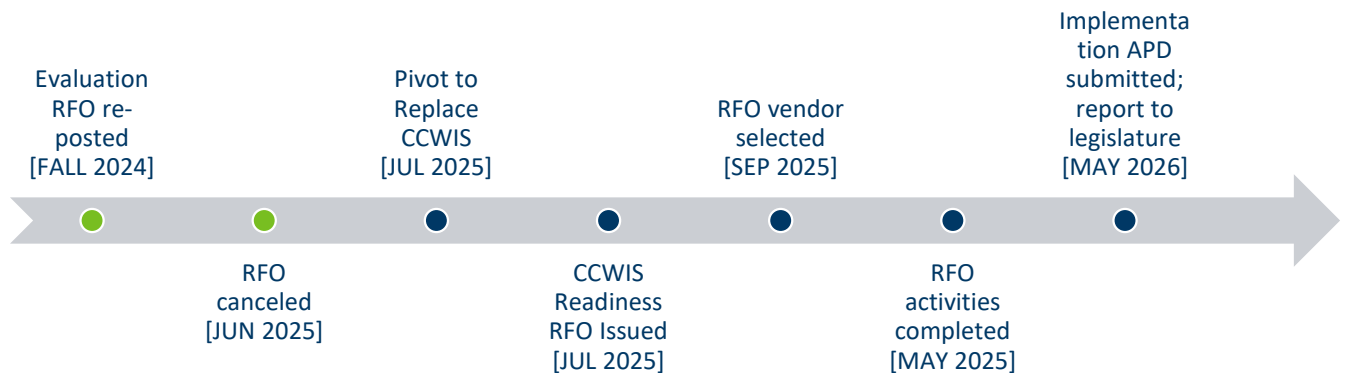


Figure 11: Outcome B5 Milestones Timeline

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

Outcome B6: The DCYF 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 current data entry requirements and procedures, recommendations are tailored to the current user experience and pain points. Short- and long-term needs of SSIS users are addressed.
- After recommendations are implemented, the child welfare system will perform better (e.g., fewer screens, easier steps), while meeting required federal and state compliance requirements.
- This study provides many benefits to all involved.
 - 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
 - Minnesotans: enhanced client security, reduction in time to receive services

What happened since the last report

- The Out-of-Home Placement Plan (OHPP) was identified as a top priority in the SSIS Review. In response, SSIS Business Operations partnered with the DCYF Foster Care Policy team to evaluate OHPP with a focus on streamlining content and removing elements not required by statute. Based on this evaluation,

a decision was made to remove the OHPP from SSIS. A new version of the OHPP is being developed in AgileApps, with a planned release in March – May 2026.

- SSIS Business Operations is diligently prioritizing and implementing SSIS review recommendations to streamline and reduce data entry burdens. To date, 7 of 16 recommendations have been implemented. Two additional high-priority changes are included in the November 2025 25.4 release.
- The Time Entry Transformation (TET) project is improving how caseworkers record their time by delivering a streamlined, mobile-friendly, and user-focused system. It will reduce administrative burden, improve data quality, and strengthen fiscal claiming. Key features include mobile access, auto-save, and faster, more reliable performance. This is included in the rolling statewide release in November 2025. Local agency product testers reported an estimated 2 hours per week of time savings on data entry.



Figure 12: Outcome B6 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 & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>B1. Reduce unscheduled downtime on SSIS by at least 20 percent.</p> <p>SSIS is consistently available for Tribal Nations and county workers; consistent access will increase productivity, workload planning, and serving clients.</p>	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.	41 hours of service impact (downtime) This represents a 61.9% reduction in downtime from baseline
<p>B2. Complete the transition of automated child support systems from mainframe technology to a web-based environment.</p> <p>PRISM's technology will be stabilized, ensuring a consistent experience for Tribal and county workers, with the ability to further improve the system.</p>	<ol style="list-style-type: none"> 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 10/1/2023, the child support system PRISM exists only on mainframe technology.	No change from baseline. As of 06/2024, DCYF/DHS and MNIT are seeking outside technical advisory consulting services on outstanding technical concerns before proceeding with an RFP.	No change from baseline. As of 07/2025, DCYF/DHS and MNIT have received outside consulting and are deciding on a modernization approach Fall 2025.

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>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.</p> <p>Child support participants can quickly and easily access information and complete tasks, while reducing burden on child support workers.</p>	<p>Number of child support clients actively using the participant portal.</p> <p>Increase the frequency of use of the portal by 50%.</p>	<p>By 2028,</p> <p>Increase the number of child support clients using the participant portal by 50%.</p> <p>Increase the numbers logins into the portal by 50%.</p>	<p>Between 10/2023 and 05/2024, the number of unique users was 31,959 or approximately 38% percent.</p> <p>From 10/2023 to 05/2024, the average number of monthly logins was 189,347, users on average log in five to six times a month.</p>	<p>As of 06/2024, no new features have been added. The decision was made to prioritize the PRISM refactor and replatform first, while planning for the MCSO changes.</p>	<p>As of 06/2025, no new features have been added using modernization funding. As noted above, the modernization approach will be decided in Fall 2025.</p>

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>B4. Make information received regarding an individual's eligibility for benefits easier to understand.</p> <p>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.</p>	<p>An improved notice creation and management system is developed.</p> <p>Number of notice types that are updated to a new, readable format.</p>	<p>By the end of the biennium,</p> <ol style="list-style-type: none"> 1. An improved notice creation and management system will be developed, starting with SNAP. 2. Increase the number of notices that are updated. 	<p>As of 10/1/2023, all notices generated by MAXIS are in the prior format.</p>	<p>As of 07/2024, a proof of concept for three SNAP notices has been demonstrated. At this point, no notices are generated by MAXIS in the new format.</p>	<p>As of 07/2025, all discovery work was completed for the move to the JEE environment. Four of six tasks to complete the pilot proof of concept in the new environment have been completed. Work will be completed to present a working proof of concept by 09/2025.</p>

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>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.</p> <p>Assessing the current system will provide a baseline from which DHS can build a user-friendly, better performing, federally compliant child protection system.</p>	<p>Completion of an independent evaluation of SSIS.</p> <p>Recommendations for child protection system platform are developed.</p>	<p>By the end of the current biennium,</p> <ol style="list-style-type: none"> 1. The independent evaluation is complete. 2. Recommendations are provided for child protection system platform. 	<p>As of 10/1/2023, the independent evaluation had not been initiated.</p>	<p>As of 12/2024, the RFO for the independent evaluation of the technical current state has been re-posted</p>	<p>As of 07/2025, a pivot to replace Child Welfare functionality in the current SSIS into a modern CCWIS solution. An RFO was issued in 2024 but ultimately canceled as a decision was made to replace Child Welfare components of SSIS to a modern CCWIS. As of 07/2025, a new RFO is posted, with readiness activities to have final recommendations and comprehensive requirements for a replacement RFO by 03/2026, knowing Federal approval will be 60 days.</p>

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>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.</p> <p>By reducing paperwork and enhancing technology, Tribal and county workers will be able to spend more time serving their clients.</p>	<p>Review of federal, state, and DHS paperwork and data entry requirements is completed.</p> <p>Recommendations for streamlining and reducing SSIS data entry requirements for child protection cases are made.</p>	<p>By the end of the biennium,</p> <ol style="list-style-type: none"> 1. Paperwork / data entry requirements study is completed. 2. Recommendations for streamlining and reducing data entry requirements are completed. 	<p>As of 10/1/2023, the paperwork / data entry requirements study had not been initiated.</p>	<p>As of 05/2024, the paperwork / data entry requirements study has been completed.</p> <p>As of 05/2024, 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.</p>	<p>As of 07/2025, 7 of the 16 actionable recommendations for child protection cases have been implemented as part of ongoing efforts to reduce data entry burden in SSIS.</p> <p>TET and OHPP projects are scheduled for statewide release in 09/2025.</p>

Table 4: Integrated Services for Children and Families Outcomes

C. Medicaid Management Information System Modernization

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.

Budget and Expenditures

Outcomes: The funding for 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	FY25 Amount Budgeted	FY25 Amount Expended (Whole Dollars)	FY25 Amount Expended (State Dollars)
Pharmacy Module	DHS State Personnel	94,984	235	35
Pharmacy Module	MNIT State Personnel	762,958	847,624	127,144
Pharmacy Module	MNIT Staff Augmentation	999,000	184,496	27,674
Pharmacy Module	DHS Service Contract	3,925,500	2,747,852	1,456,362
Pharmacy Module	MNIT Service Contract	4,338,000	2,004,242	300,636
Medicaid Interoperability	DHS State Personnel	698,638	12,523	1,878
Medicaid Interoperability	MNIT State Personnel	290,636	13,024	1,954
Medicaid Interoperability	MNIT Staff Augmentation	315,000	67,105	10,066
Medicaid Enterprise System Coordination	DHS State Personnel	343,300	167,701	25,155

Purpose of the Expenditure	Type of Expenditure	FY25 Amount Budgeted	FY25 Amount Expended (Whole Dollars)	FY25 Amount Expended (State Dollars)
Medicaid Enterprise System Coordination	MNIT Staff Augmentation	180,000	87,353	13,103
Medicaid Enterprise System Coordination	MNIT State Personnel	182,849	82,710	12,407
	Totals	12,130,865	6,214,865	1,976,414

Table 5: MMIS Modernization FY25 Budgets and Expenditures

Outcomes and Key Deliverables

Below are the three (3) outcomes included within the Medicaid Management Information System modernization initiative.

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 prescription access. This delay is caused in part by the current prior authorization process and limited customer support hours. The goal is to expand call center support for both members and providers from the existing 8 hours per weekday to a 24/7 operation aligned with typical pharmacy hours, with response times of 60 seconds or less.
- After this initiative is implemented:
 - Medical Assistance and MinnesotaCare enrollees will have consistent access to filled prescriptions.
 - Medical Assistance and MinnesotaCare enrollees will be able to quickly resolve any issues beyond regular government office hours through expanded call center support.
 - 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

- The Pharmacy module has gone live and is operating well.
- The enhanced prior authorization (PA) functionality has resulted in about a 40% reduction in the number of prior authorization requests. In May 2024 there were 4,305 PA requests whereas in May 2025 there were only 2,675. The reduction is primarily due to the use of sophisticated claims processing edits that eliminate the need for a provider to request a PA, and enhanced PA functionality that reduced the need to reissue PAs. In May 2025 alone, physicians, pharmacists and other health care providers had to make 1,630 fewer phone calls to DHS or our contracted vendors to deliver pharmacy services to members.
- Not only are fewer prior authorizations (PA) being requested, but the PAs that are requested are being worked faster in the Prime system than they were using the legacy systems. In May 2024, 83.4% of PA requests were completed within 8 business hours. In May of 2025, 99.8% of PA requests were completed in 8 business hours, with an average turnaround time of 2.56 hours. This means healthcare providers receive decisions on their PA requests quicker, and our members are receiving services faster than they were with our legacy systems.
- Prior to the implementation of the Prime system, all healthcare providers had to use the DHS Member and Provider help-desks that operated during business hours only (8:00a-4:30p). The Prime system was contracted for a dedicated member and provider help-desk for pharmacy services that operates 24 hours a day, 7 days a week, 365 days a year. Not only are the expanded hours better aligned with the business hours of pharmacies, some of which are open 24 hours a day, the additional resources have dramatically decreased providers’ wait time to reach a representative. With the DHS help-desks, the average time for a provider to reach a representative commonly exceeded 5 minutes, but the average time with the Prime help-desks has consistently been only a few seconds since go-live. In May 2025, the average speed of answer by a representative (not an automated message) was 12 seconds, with only 0.48% of calls being abandoned before a representative answered the call (a 99.52% answer rate).
- A new “claims discovery” project will be considered alongside work to procure a more permanent solution for pre-payment review. Any efforts to modernize our claims system will address these outcomes for Medicaid-funded services outside of Pharmacy.

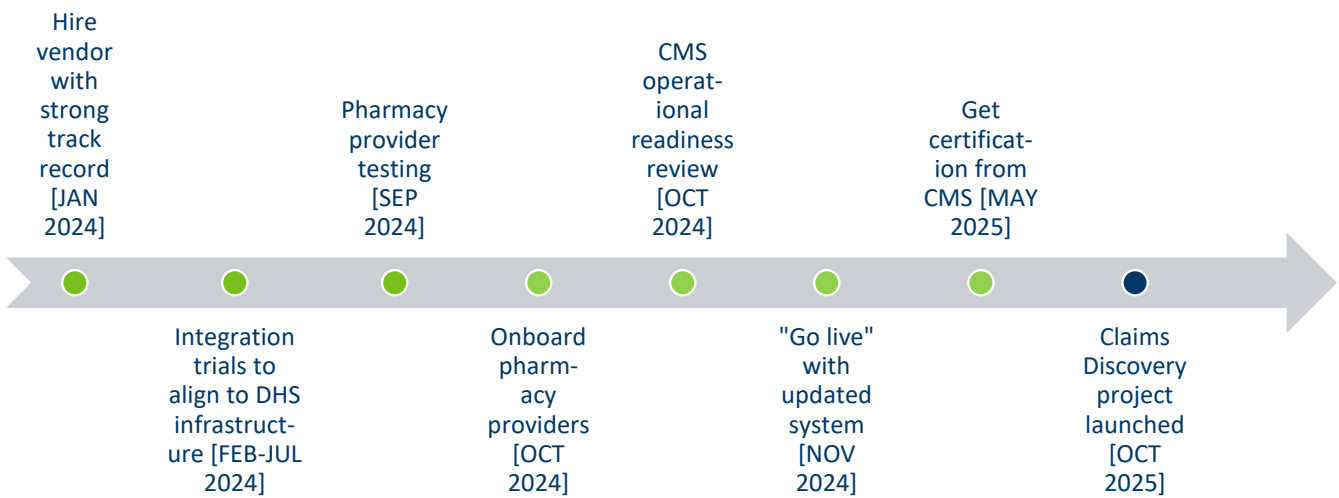


Figure 13: Outcome C1 and C2 Milestones Timeline

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 (MI) 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. It will act as a functionality base required for data sharing between providers and trusted partners, so that 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

- Based on lessons learned from the RFI, guiding principles for MI Hub including DHS/MNIT control of data management capabilities were drafted.
- A proof of concept was completed with a vendor and successfully validated the capabilities needed, applying it to the federal Interoperability requirements for a provider directory.
- The Medicaid Interoperability team found and started to procure the solution used in the proof of concept; it is expected to have an executed contract before the end of the calendar year.

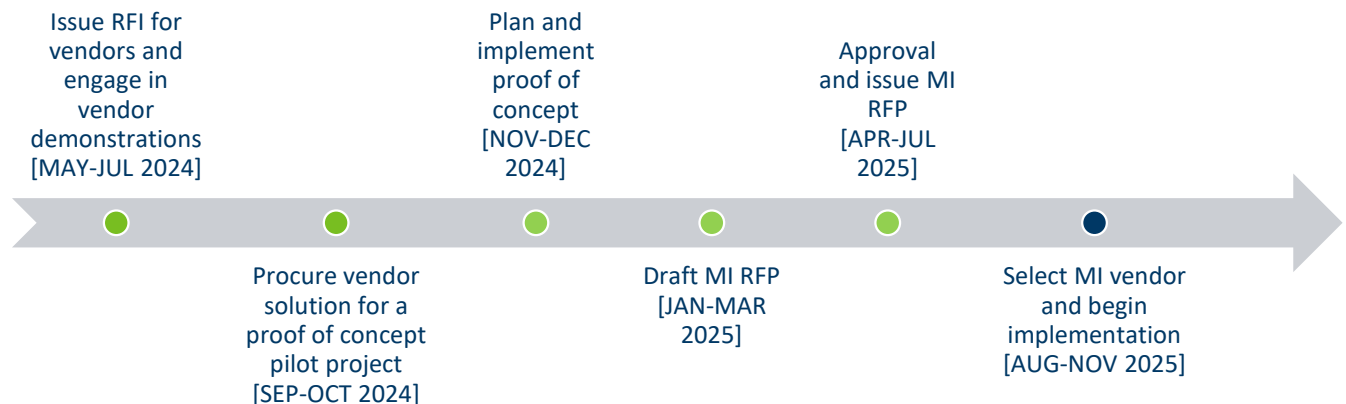


Figure 14: Outcome C3 Milestones Timeline

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	FY24 Progress Indicator	FY25 Progress Indicator
<p>C1. Reduce disruptions and delays in filling prescriptions for Medical Assistance (MA) and MinnesotaCare enrollees and improving call center support for pharmacies and enrollees to ensure prompt resolution of issues.</p> <p>MA and MinnesotaCare enrollees have consistent access to filled prescriptions and can quickly have issues resolved through call center support.</p>	<ol style="list-style-type: none"> The contractor’s call center is in operation 24/7. Monthly reports of average speed of answer for call center support. 	<p>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.</p>	<p>MHCP Provider Resource Center (7/1/2023 - 6/30/2024):</p> <ul style="list-style-type: none"> Average answer speed: 2 minutes 32 seconds Abandonment rate: 2.3%. Average hold time: 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. <p>Consumer Call Center (7/1/2023 - 6/30/2024):</p> <ul style="list-style-type: none"> Average answer speed: 12 minutes, 55 seconds. Abandonment rate: 30%. Average hold time: 9 seconds <p>Hours: 8:00 am – 4:00 pm. No breaks in service for lunch. No service on state holidays.</p>	<p>Progress in comparison to baseline data will be shared in the 10/2025 SDT legislative report, following the November 2024 launch of the new pharmacy system.</p>	<p>Performance indicators have been reached, and outcomes have been met. In 05/2025, the new help-desk recorded:</p> <ul style="list-style-type: none"> Average answer speed: 12 seconds Abandonment rate: 0.48% Hours: 24 hours per day; 7 days per week <p>Metrics must be sustained for continued quality service.</p>

<p>C2. Improve the timeliness and accuracy of claims processing and approval of prior authorization requests.</p> <p>MA and MinnesotaCare enrollees experience quick and accurate claims and prior authorization processing.</p>	<p>1. Monthly reports of percent of prior authorization requests responded to (approved, denied, change in therapy, or request for additional information) within 24 hours following receipt.</p> <p>2. Respond to a minimum of 75% of prior authorization requests within 8 business hours.</p> <p>3. Prior authorization process is established that allows more flexibility with different prescription modes and providers based on processing requirements.</p>	<p>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.</p>	<p>As of 10/2023:</p> <p>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%⁸</p> <p>2. Percent of prior authorization requests responded to within eight (8) business hours: 75%</p> <p>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.</p>	<p>1 & 2: Progress in comparison to baseline data will be shared in the 10/2025 legislative report, following the 11/2024 launch of the new pharmacy system.</p> <p>3: This process will be established when the updated pharmacy system goes live on 11/2024.</p>	<p>Performance indicators have been reached for Pharmacy and outcomes have been met.</p> <p>In 05/2025, 99.8% of PA requests were completed in 8 business hours, with an average turnaround time of 2.56 hours.</p> <p>Metrics must be sustained for continued quality service.</p> <p>A new “claims discovery” project will be considered alongside work to procure a more permanent solution for pre-payment review. Claims system modernization would enable efforts to reach</p>
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Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
					these performance indicators for Medicaid-funded services outside of Pharmacy.

⁸ 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	FY24 Progress Indicator	FY25 Progress Indicator
<p>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.</p> <p>Medical Assistance and MinnesotaCare enrollees and their providers are more informed, which can support timely, coordinated, and culturally responsive services.</p>	<ol style="list-style-type: none"> 1. A plan is created that establishes interoperability, architectural and data strategies for MMIS that supports a set of value-based outcomes for Medicaid service delivery. 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. 	<p>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.</p>	<p>As of October 1, 2023:</p> <ol style="list-style-type: none"> 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. 	<p>As of August 2024:</p> <ol style="list-style-type: none"> 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. 	<p>Performance indicators 1 and 2 have been reached.</p> <p>3. The procurement process has begun and is set to be completed by the end of the calendar year.</p>

Table 6: MMIS Modernization Outcomes

D. Provider Licensing and Reporting Hub for DHS Providers

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.

Budget and Expenditures

Outcomes: The funding for Provider Licensing and Reporting Hub contributes to all three outcomes: (D1) create and maintain user personas for all Provider Licensing and Reporting Hub users that document the unique requirements for each user; (D2) create an electronic licensing application within the Provider Licensing and Reporting Hub to ensure efficient data collection and analysis; and (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. These three outcomes are intertwined within the work; the funding cannot be separated by outcome.

Purpose of the Expenditure	Type of Expenditure	FY25 Amount Budgeted	FY25 Amount Expended (Whole Dollars)	FY25 Amount Expended (State Dollars)
Provider Hub: Enterprise Services	MNIT Service Contract	2,961	2,961	489
OIG Salesforce	MNIT Service Contract	20,716	20,716	20,716
OIG Salesforce	MNIT State Personnel	1,455,468	1,455,468	1,455,468
OIG Salesforce	DHS Service Contracts	3,403,010	3,368,583	1,684,291
OIG Salesforce	General Administration	30,000	2,535	1,268
The Hub	DHS State Personnel	1,304,532	1,304,532	1,304,532
Provider Hub: Foundational Platform	DHS State Personnel	1,372,028	1,372,028	226,385
Provider Hub: Foundational Platform	Staff Augmentation	123,000	-	-
Provider Hub: Foundational Platform	Service Contracts	270,000	-	-

Purpose of the Expenditure	Type of Expenditure	FY25 Amount Budgeted	FY25 Amount Expended (Whole Dollars)	FY25 Amount Expended (State Dollars)
Provider Hub: Foundational Platform	Hardware/Software/Licenses	996,000	-	-
Provider Hub: Foundational Platform	General Administration	120,000	-	-
Provider Hub: Medicaid/Foster Care	DHS State Personnel	251,034	-	-
Provider Hub: Medicaid/Foster Care	MNIT State Personnel	395,957	395,957	65,333
Provider Hub: Medicaid/Foster Care	MNIT Staff Augmentation	1,568,281	296,283	48,887
Provider Hub: Medicaid/Foster Care	MNIT Service Contracts	356,025	356,025	58,744
Provider Hub: Medicaid/Foster Care	Hardware/Software/Licenses	540,000	63,448	10,469
Provider Hub: Medicaid/Foster Care	MNIT State Personnel	1,427,000	-	-
Provider Licensing	General Administration	17,012	15,735	2,596
Non-licensing Programs: OPS	MNIT Staff Augmentation	50,000	-	-
Non-licensing Programs: OPS	Hardware/Software/Licenses	200,000	5,106	2,553
	Overhead	1,312,000	1,312,000	1,312,000
	Totals	15,215,024	9,971,377	6,193,731

Table 7: Provider Licensing and Reporting Hub FY25 Budgets and Expenditures

Outcomes and Key Deliverables

Below are the three (3) outcomes included within the Provider Licensing and Reporting Hub initiative.

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 a wide variety of professionals will use the Provider Hub and the Agency Hub with different training and functionality requirements. To tailor portal users' experiences to their unique licensing and reporting needs, DHS must first understand what those needs are.
- A positive, efficient user experience is being co-created with a representative sample of providers. Distinct provider type profiles known as user personas are being developed with the requirements for each type of licensed service provider. User personas will inform future products.

What happened since the last report

- In fall 2024, comprehensive updated personas for each user type were successfully created, providing detailed documentation of specific needs, pain points, and operational requirements for different categories of licensed service providers. These personas clarify the unique challenges faced by each user group and serve as the foundation for tailoring future system functionality and user interface design.
- The completed personas were shared with corresponding user groups during fall 2024 Change Network meetings, ensuring that providers had the opportunity to review, validate, and provide feedback on documented characteristics and needs. This collaborative validation process confirmed that the personas accurately represent the diverse provider community and their operational realities.
- A comprehensive evaluation of all user group engagements was conducted to assess the effectiveness of collaboration methods and identify opportunities to improve ongoing user research and feedback collection processes. Based on the evaluation findings, Change Networks transitioned into two distinct engagement models designed to provide targeted and actionable collaboration opportunities:
 - Public information sessions offering broader community engagement and transparency around system development progress and upcoming features.
 - Focused usability testing opportunities called Design Cohorts, providing intensive, hands-on environments where selected providers can directly interact with new features and give detailed feedback on functionality and user experience.
- A systematic process was established for regular persona updates. This ensures that documentation remains current as the provider landscape evolves and user engagement activities provide new insights.

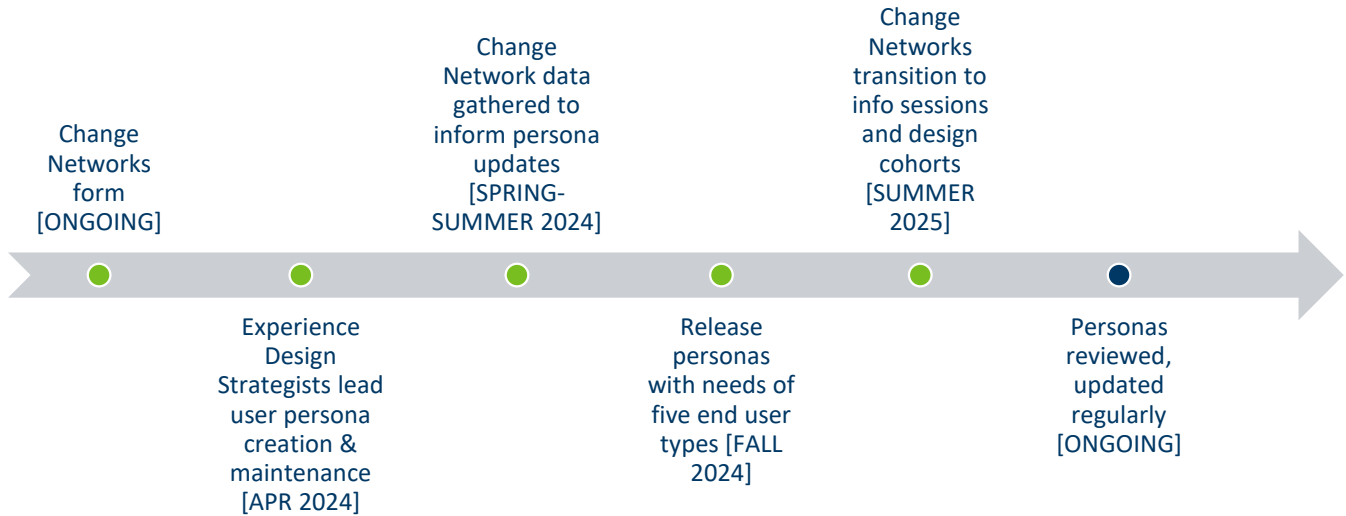


Figure 15: Outcome D1 Milestones Timeline

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

- Licensing applications will be fully available electronically, replacing existing paper applications and reducing administrative burden on providers.
- License types that are overseen by county partners are prioritized in the rollout timeline, reducing the workload of county partners during the review and approval process.
- Provider and Agency Hubs' features will be continuously and incrementally released to users, so providers can use new products as soon as possible.

What happened since the last report

- The OIG product teams continued to build foundational functionality, supporting the expanding suite of electronic licensing applications with emphasis on ensuring system stability and user experience as more license types are brought online.
- Updated project timelines were established to accommodate the phased rollout of Family Child Care Licensing, Licensing Information Look-Up website, and County Licensing, all scheduled for Spring 2026 with regional implementation phases, to ensure smooth deployment and user support during transition.
- The Child Care Assistance Program (CCAP) provider registration successfully launched in April 2025, giving providers a streamlined electronic registration process that reduces processing time for providers and administrative staff.
- Significant improvements and expansions were made to existing PAS resources to better serve the provider community:
 - The Great Start Compensation Program site was enhanced to improve user navigation and processing efficiency, building on the foundation established when it went live in July 2024.

- The Enrollment & Attendance reporting features in the Provider Hub were expanded with additional functionality and improved user interface elements, making it easier for providers to submit required data electronically.
- Progress was made on user experience research and design, with ongoing analysis of user feedback and data to inform system improvements and ensure that digital experiences meet the needs of Minnesota's provider community across regions and license types.
- Created an interface between the current Licensing database in OIG and the Minnesota Provider Screening and Enrollment (MPSE) module and were able to update over 50,000 provider licensing end-dates in MPSE. This interface creates a more unified experience for providers as they navigate maintaining their license and their enrollment as a Medicaid provider.

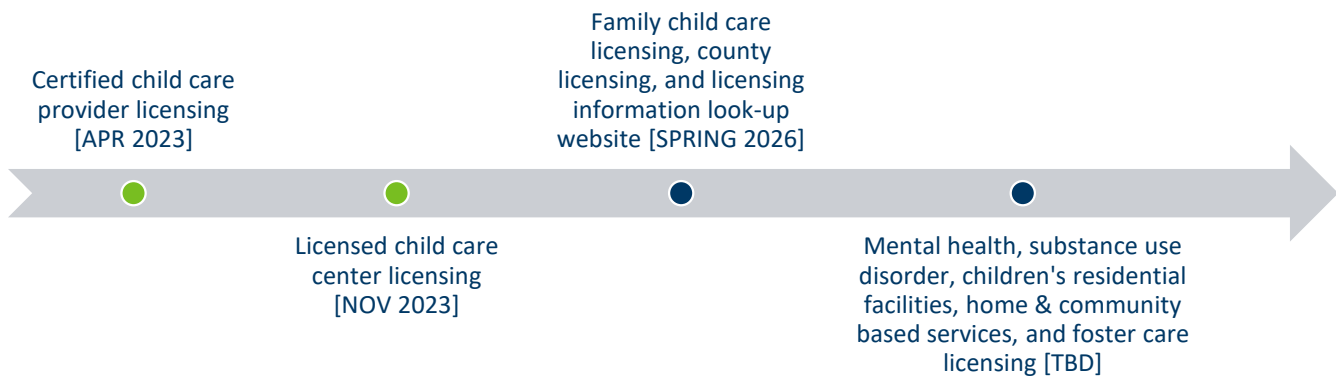


Figure 16: Outcome D2 Milestones Timeline

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

- The OIG product team successfully recruited and hired 12 dedicated DHS/DCYF staff to support ongoing product development and implementation in critical areas including change management, content strategy, instructional design, and product success.
- 13 MNIT technology professionals joined the team to provide essential technical development, system architecture, and infrastructure support, creating the technical foundation necessary for sustained agile development and product maintenance.
- Agile development processes and workflows were implemented across the cross-functional team,

including sprint planning, daily standups, retrospectives, and user story development practices. These processes ensure consistent, iterative development cycles and provide structure for continuous improvement and feature releases.

- Since this effort supports programs at both DHS and DCYF, the team is now assessing capacity and development velocity to establish realistic project timelines and resource allocation strategies in a shared services model. This will provide the foundation for sustainable development practices and accurate delivery commitments to stakeholders and end users.

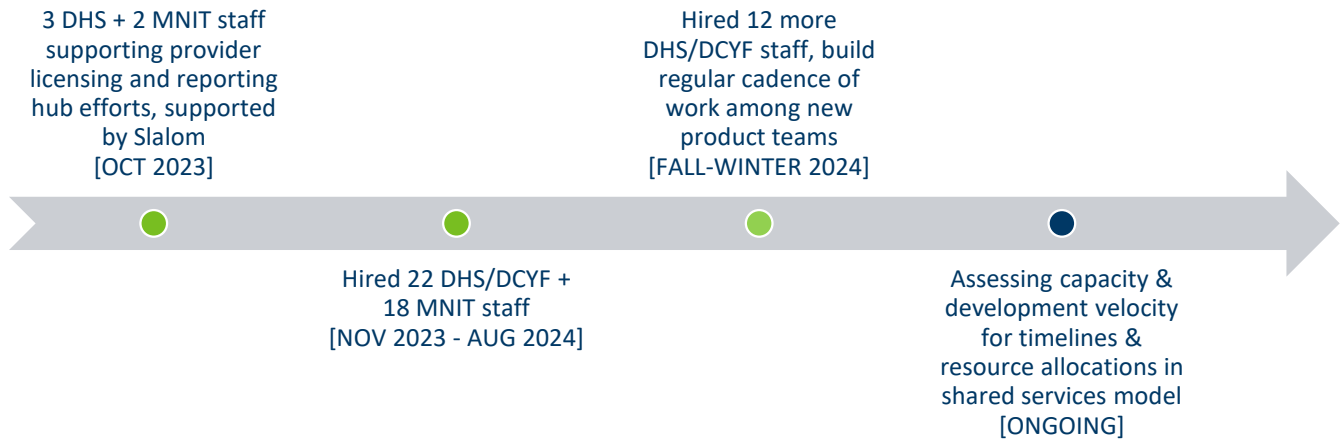


Figure 17: Outcome D3 Milestones Timeline

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	FY24 Progress Indicator	FY25 Progress Indicator
<p>D1. Create and maintain user personas for all Provider Licensing and Reporting Hub users that document the unique requirements for each user.</p> <p>DHS understands the unique needs of each provider type. DHS is poised to create a tailored experience for each provider type.</p>	<p>A user persona for each provider type is created.</p> <p>Each persona outlines the requirements for the given user.</p>	<p>By the end of this funding cycle, all provider types will have a user persona documenting the user’s requirements.</p>	<p>As of 10/2023, only initial starting point personas representing each of five provider types had been developed.</p>	<p>As of 08/2024, staff have collected additional data via interviews and surveys with Change Networks to inform persona development. Fully developed personas outlining requirements for each of five provider types will be completed in fall 2024.</p>	<p>As of 08/2025, enhanced personas for all user types have been developed and released. Personas are updated on a regular basis to stay current.</p>

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>D2. Create an electronic licensing application within the Provider Licensing and Reporting Hub to ensure efficient data collection and analysis.</p> <p>One licensing application type is fully available electronically, replacing the paper application and reducing administrative burden on providers.</p>	<p>At least one (1) complete licensing application is available electronically.</p>	<p>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.</p>	<p>As of 10/2023, only the certified child care provider licensing application was fully available electronically.</p>	<p>As of 08/2024, licensed child care center licenses are also available, totaling two licensing applications that are available electronically.</p> <p>In fall 2024, family child care licensing, county licensing, and a Licensing Information Look-Up website will also be launched.</p>	<p>As of 08/2025, the foundation on which additional functionality is developed has been strengthened and enhanced.</p> <p>Development of family child care, county licensing, and Licensing Information Lookup functionality is estimated to be released in Spring 2026.</p> <p>Created an interface between the current Licensing database in OIG and the Minnesota Provider Screening and Enrollment (MPSE) module and were able to update over 50,000 provider licensing end-dates in MPSE.</p>

Outcome & Why It Matters	Performance Indicator(s)	Goal	Baseline	FY24 Progress Indicator	FY25 Progress Indicator
<p>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.</p> <p>The user experience is constantly improving, as DHS staff are in place to make needed/requested features and system modifications on an ongoing basis.</p>	<p>Product team focused on Provider Licensing and Reporting Hub is established and fully staffed.</p>	<p>By the end of this funding cycle:</p> <ol style="list-style-type: none"> 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). 	<p>As of 10/1/2023, three DHS staff and two MNIT staff were supporting the licensing and reporting hub effort.</p>	<p>As of 08/2024, 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.</p>	<p>As of 08/2025, an additional 12 OIG positions and 13 MNIT positions have been hired for PAS</p> <p>PAS continues to develop cross-functional work methods to deliver iterative improvements to the Provider Licensing and Reporting Hub.</p>

Table 8: Provider Licensing and Reporting Hub Outcomes

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

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, counties and Tribes.

Budget and 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	FY25 Amount Budgeted	FY25 Amount Expended (Whole Dollars)	FY25 Amount Expended (State Dollars)
Medicaid Enterprise System Coordination	DHS State Personnel	343,300	167,701	25,155
Medicaid Enterprise System Coordination	MNIT State Personnel	182,849	82,710	12,407
Medicaid Enterprise System Coordination	MNIT Staff Augmentation	180,000	87,353	13,103
METS Foundational Supports	MNIT State Personnel	1,726,000	1,726,000	431,500
	Totals	2,432,149	2,063,764	482,165

Table 9: Improving the METS Functionality FY25 Budgets and Expenditures

Outcomes and Key Deliverables

Below are the three (3) outcomes included within the Improving the Minnesota Eligibility Technology System functionality initiative.

Moving Forward - MES Modernization at DHS

DHS is reimagining what it means to modernize our Medicaid Enterprise Systems (MES) including MAXIS, METS, and MMIS. Rather than relying on rigid, multi-year plans, DHS is inviting vendors to co-create better outcomes, one slice at a time.

As part of DHS's MES Modernization Challenge, a Request for Information (RFI) was launched to gather ideas, feedback, and expressions of interest from software and delivery service vendors. DHS specifically sought input from seasoned innovators with deep experience in government systems, as well as fresh thinkers with bold, new approaches to solving complex challenges. DHS's goal was to open the door to diverse perspectives and collaborative energy. The RFI closed on September 30, 2025 and DHS received 100 responses—a strong signal that this strategy is resonating across the industry.

What DHS heard from vendors:

- “Refreshing and hopeful” — Vendors praised DHS's approach as a welcome shift from traditional government procurement
- “A model for other states” — Many saw DHS's strategy as forward-thinking and replicable across the country
- “Clear vision and strategy” — Respondents appreciated the clarity and outcome-oriented nature of DHS's modernization goals
- “Excited to participate” — The tone of responses reflected genuine enthusiasm and alignment with DHS's values of innovation and collaboration

DHS's modernization efforts aim to:

- **Increase business agility** to respond to new or shifting needs
- **Reduce manual data entry** and other administrative steps for county and Tribal eligibility workers, improving both the accuracy and timeliness of eligibility determinations
- **Enable enrollees** in Medical Assistance and MinnesotaCare to apply, renew, update eligibility, and select health plans through a streamlined online experience
- **Ensure compliance** with evolving federal Medicaid requirements through timely and necessary system updates

Current Status:

DHS leadership has directed the MES modernization team to reassess sequencing and entry points for the strategy in light of competing operational and compliance priorities. The goal is to identify an initial starting point that minimizes disruption to ongoing operations while preserving alignment with the broader modernization vision.

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

Why it's important

- Compliance with federal Medicaid requirements is the key priority for improvements to METS. Many federal requirements focus on health care renewals and beneficiary protections, which are of utmost importance for Minnesotans. Because the Centers for Medicare & Medicaid Services (CMS) regularly update requirements, there is an ongoing need to review and make changes to METS functionality.
- By making required changes to METS for compliance purposes, DHS also improves ease of access to and management of services for Minnesota residents, while reducing paperwork redundancies for county and Tribal eligibility workers (Outcome E3).

What happened since the last report

- DHS completed planning activities for an initiative to review the Medical Assistance and MinnesotaCare financial verification processes within METS and make necessary changes to align with the state’s verification plan and federal requirements.
 - Included the initiative as part of the FY2026 METS Advanced Planning Document (APD) to receive enhanced federal funding beginning October 1, 2025.
- DHS completed planning activities for an initiative to permit future pregnancies within METS to ensure accurate eligibility determinations and consistent outcomes for all family members, regardless of the timing of updates in METS.
 - Included the initiative in the FFY2026 METS Advanced Planning Document (APD) to receive enhanced federal funding beginning October 1, 2025.

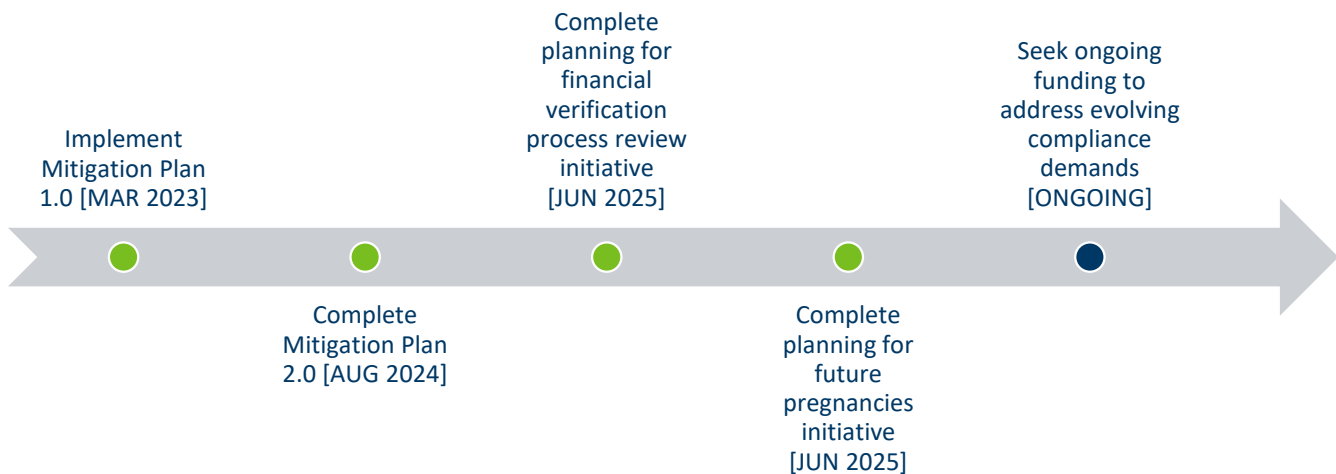


Figure 18: Outcome E1 Milestones Timeline

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

- By establishing an expanded self-service user experience, 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

- DHS began defining business needs to develop an option for all Minnesota Health Care Programs (MHCP) enrollees to complete their renewal online, in coordination with changes to paper renewal forms, to align with federal guidance and simplify the renewal process.

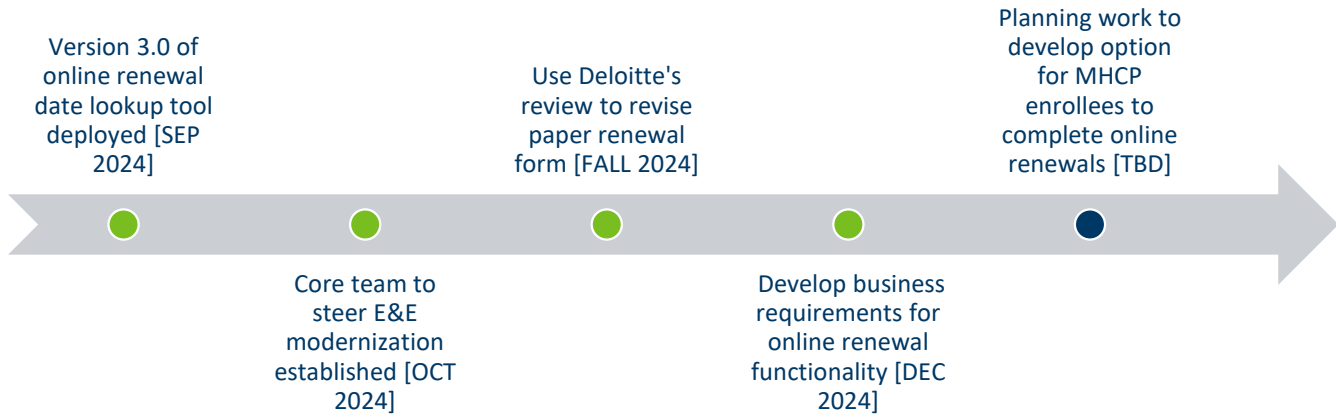


Figure 19: Outcome E2 Milestones Timeline

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

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

Why it's important

- A 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 county workers to make eligibility determinations; this also allows Minnesotans to receive health care coverage faster.

What happened since the last report

- DHS completed planning activities for an initiative to review the Medical Assistance and MinnesotaCare financial verification processes within METS and make necessary changes to align with the state's verification plan and federal requirements.
 - Included the initiative as part of the FY2026 METS Advanced Planning Document (APD) to receive enhanced federal funding beginning October 1, 2025.
- Completed planning activities for an initiative to permit future pregnancies within METS to ensure accurate eligibility determinations and consistent outcomes for all family members, regardless of the timing of updates in METS.
 - Included the initiative in the FFY2026 METS Advanced Planning Document (APD) to receive enhanced federal funding beginning October 1, 2025.

Minnesota Eligibility Technology System Outcomes Table

Outcome and Why It Matters	Performance Indicator(s)	Goal	Baseline (2023)	Progress Indicator (2024)	Progress Indicator (2025)
<p>E1. Complete necessary changes to comply with federal requirements.</p> <p>DHS’ systems are fully compliant with requirements issued by the Centers for Medicare & Medicaid Services (CMS).</p>	<p>General compliance with CMS requirements exists.</p>	<p>By the end of this funding cycle, DHS’ health care solutions are generally compliant with CMS renewal requirements.</p>	<p>As of October 1, 2023, Mitigation Plan 1.0 (co-developed with CMS) had been implemented.</p>	<p>As of August 2024, all of Mitigation Plan 2.0 has been completed except the third and final phase of individual renewals.</p> <p>After reviewing costs, benefits, and shifting federal priorities, the 3rd phase will not be implemented. It would require extensive foundational system changes that are cost prohibitive. A workaround is in place.</p>	<p>A roadmap for compliance with federal requirements is created by the MES modernization strategy.</p> <p>Optimize electronic financial verifications to ease burden on eligibility workers.</p> <p>Eligibility workers will no longer need to close and re-enter cases for enrollees that report subsequent pregnancies.</p>

Outcome and Why It Matters	Performance Indicator(s)	Goal	Baseline (2023)	Progress Indicator (2024)	Progress Indicator (2025)
<p>E2. Implement the capability for Medical Assistance and MinnesotaCare enrollees to apply, renew, and make changes to their eligibility and select health plans online.</p> <p>Medical Assistance and MinnesotaCare applicants and enrollees can quickly and easily manage their health care profile and plan online.</p>	<p>1. Review of solutions available for public health care eligibility and enrollment and ongoing enrollee self-management is conducted.</p> <p>2. Exploratory solutions toward achieving these outcomes are proposed.</p>	<p>In this funding cycle, a review of solutions available for public health care will be completed and exploratory solutions will be proposed.</p>	<p>As of October 1, 2023:</p> <p>1. No review of solutions available for public health care eligibility and enrollment and ongoing enrollee self-management has yet been conducted.</p> <p>2. Exploratory solutions toward achieving these outcomes have not yet been proposed.</p>	<p>As of August 2024, the METS team began their review and exploration of solutions, with a goal of proposing exploratory solutions by early fall 2025.</p>	<p>A roadmap for compliance with federal requirements is created by the MES modernization strategy.</p>

Outcome and Why It Matters	Performance Indicator(s)	Goal	Baseline (2023)	Progress Indicator (2024)	Progress Indicator (2025)
<p>E3. Reduce manual data entry and other steps taken by Tribal and county eligibility workers to improve the accuracy and timeliness of eligibility determinations.</p> <p>It is quicker and easier for Tribal and county workers to make eligibility determinations, allowing Minnesotans to receive health care coverage faster.</p>	<p>The review of public health care solutions (noted above) is conducted with consideration of the data entry burden on Tribal and county eligibility workers.</p>	<p>(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.</p>	<p>As of October 1, 2023:</p> <ol style="list-style-type: none"> 1. No review of solutions available for public health care eligibility and enrollment and ongoing enrollee self-management has yet been conducted. 2. Exploratory solutions toward achieving these outcomes have not yet been proposed. 	<p>As of August 2024, the METS team began their review and exploration of solutions, with a goal of proposing exploratory solutions by early fall 2025.</p> <p>In the shorter term, activities to address auto-renewal compliance needs (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.</p>	<p>A roadmap for compliance with federal requirements is created by the MES modernization strategy.</p> <p>Optimize electronic financial verifications to ease burden on eligibility workers.</p> <p>Eligibility workers will no longer need to close and re-enter cases for enrollees that report subsequent pregnancies.</p>

Table 10: Improving the METS Functionality Outcomes

VI. Report Recommendations and 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, DHS, and MNIT 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 measurements will be available in future reports.