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Minnesota Department of **Human Services**

INFORMATION TECHNOLOGY

2005 REPORT TO THE LEGISLATURE

COVERING FY2004

Minnesota Statute Chapter 256.014, Subdivision 3

FY 2004 REPORT TO THE LEGISLATURE
Minnesota Department of Human Services
Information and Technology Strategies
January 1, 2005

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

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INTRODUCTION

Background

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

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

DHS customers include:
- seniors who need help paying for hospital and nursing home bills
- families with children who need help during a financial crisis
- parents who need child support enforcement or child care assistance
- children who may be vulnerable or abused
- individuals with physical or developmental disabilities who need assistance to live independently

Through technology, DHS has improved the accuracy and delivery efficiency of many services by automating aspects of program delivery throughout DHS, and within counties and tribes.

Scope

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

Automated systems at DHS offer significant benefits to the general public of Minnesota as well as county, tribal and state governments, non-government business partners, other stakeholders, and the Legislature.

SUMMARY ANALYSIS

DHS invests in technology to automate service delivery for health and human services programs in Minnesota. Counties, tribes and regional facilities deliver benefits and services directly to citizens. In order to determine client needs and how best to administer them, DHS requires accurate, timely and complete information about its clients. DHS invests in technology to:

- Manage both administrative and benefit costs of DHS services.
- Improve the accuracy of the decisions made based on policy and ensure that such policy is applied consistently.
- Automate routine functions allowing human capital to focus on quality service delivery.
- Help clients manage their own needs by encouraging self-sufficiency.
- Ensure the security of electronic transactions with business partners and clients, and protect the privacy of client data.
- Improve services to DHS partners in service delivery, including health care providers, federal and state agencies, private assistance organizations, tribes and counties.
- Improve accountability.

DHS Core Systems

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

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

2. **MMIS (Medicaid Management Information System)** is a federally certified information system used to administer the Minnesota Health Care Program (MHCP). MMIS processes 57 million claims and transactions annually, submitted by health care providers who serve nearly 670,000 recipients of MHCP. Programs administered by DHS include MinnesotaCare, Medical Assistance (MA), General Assistance Medical Care (GAMC), the Prescription Drug Program and the Alternative Care Grants Program.

3. **PRISM (Providing Resources to Improve Support in Minnesota)** is the automated tool used by state and county child support workers to help establish paternities, establish child support and medical support court orders, enforce court orders, and collect and disburse child support funds. PRISM helps DHS and the counties manage the child support program statewide with consistency, uniformity and efficiency.

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

DHS manages a major investment in technology to maintain these four core information systems. They operate in partnership with counties to coordinate efforts for program operations and are built to respond to frequent program changes. DHS also maintains a data warehouse that enables DHS and county staff to analyze and understand data gathered from these systems and identifies trends in client needs, human services delivery and service outcomes.

FY 2004 highlights:

- DHS continues to make significant progress in developing the infrastructure and expertise to build interfaces allowing secure, real-time exchanges between systems on different technical platforms. This is key as DHS moves towards service integration and improved customer service.
- Data privacy and information security requirements of HIPAA resulted in on-time policy development and implementation of privacy rules. Initial security policies were implemented as defined in the new DHS Enterprise Security Architecture, and a complex zoned structure was implemented. The zoned structure is needed to allow DHS to meet HIPPA privacy and electronic data exchange requirements for FY2004.
- DHS continues to implement a technical foundation of Web hardware, software, and network technologies, allowing DHS business areas, including major systems, to offer access to programs and information through the Internet. This was the Department's foundation for implementing electronic government services to the public, DHS business partners, and other governmental units.

2006-2007 Biennium Challenges

To continue enhancing capabilities and improving services to counties, tribes and clients, DHS must stay on top of developments in human services technology, activities at the federal level that may affect technology efforts, and feedback mechanisms from clients, counties and tribes. Future challenges include:

- Assuring the stable operation of the four major systems. Managing the risk associated with several new developments and the ongoing changes due to modifications in state and federal laws.
- Fully implementing HIPAA requirements for information security, and providing consistent and stable maintenance of HIPAA privacy and EDI requirements.
- Continuing major development of HealthMatch, the automated health care eligibility determination system, which is a high technology priority within DHS. HealthMatch will be a Web-based system that will streamline the delivery of and the eligibility process for the Minnesota Health Care Program administered by DHS. Automation

will ensure that policies are consistently applied statewide and will help prevent gaps in coverage as enrollees change programs.

- Designing and implementing a Shared Master Index (SMI) to provide a common reference point for clients uniquely identified in state and county systems.
- Upgrading older systems to Web-based technology where it is a sound business move.
- Continuing to make data available to state and county users with the DHS data warehouse and providing program information to decision makers at all levels.
- Maintaining the integrity, accuracy and availability of the data DHS stores and processes.

The Role of the DHS Chief Information Officer (CIO)

The CIO provides technology direction for the Department to assure that economies of scale are realized around technology efforts. This helps keep the information infrastructure reliable and responsive to program and customer needs.

Within the CIO's purview are divisions that maintain the DHS-wide technology infrastructure and support projects and initiatives involving technology applications. These divisions provide resources and facilitate the Department's goal of developing a secure, stable and technologically sound information environment. A major aspect of the CIO's leadership is focused on ensuring that IT initiatives are coordinated within the Department and among other agencies, including the Department of Administration's Office of Technology.

DHS Core Computer Systems Overall Expenses

Fiscal Year 2004 Expenditures by System (in thousands)	
MAXIS[1]	$33,093
MMIS[2]	45,871
PRISM	24,347
SSIS	6,449
Other [3]	5,004
Total[4]	$114,764

Source: DHS Major Systems Projected Financial Status dated December 2004

[1] Includes MEC²

[2] Includes HealthMatch and HIPAA costs

[3] Overhead expenditures related to the Executive Information System (EIS), the Shared Master Index (SMI), and DHS' centralized infrastructure that are shared by MAXIS, MMIS, PRISM and SSIS.

[4] Includes approximately $73,147 in federal financial participation (FFP). Systems that support federally related programs are eligible for partial federal matching funding through matching rates. These rates differ from program to program and from one type of cost to another. Matching rates range from 50% for operational costs to up to 90% for developmental costs.

MAXIS

Purpose

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

Impact on Consumers/Clients

MAXIS links all 87 Minnesota counties, six voluntary agencies (VOLAGs) providing refugee services, and one tribal agency, ensuring that benefits are uniform throughout the state. More than 500,000 Minnesotans are affected by MAXIS eligibility determinations. Each month, more than $19 million in Food Stamps and $37 million in General Assistance (GA), Refugee Cash Assistance (RCA), Group Residential Housing, Minnesota Supplemental Aid (MSA), Minnesota Family Investment Program (MFIP) and Diversionary Work Program (DWP) benefits are calculated and issued by MAXIS. MAXIS also determines eligibility for an average of $466 million in health care benefits and determines eligibility for IV-E foster care for an average of nearly 3,300 children each month.

Among the year's highlights:
- Continued support via MAXIS Food Stamp eligibility determinations kept Minnesota's payment accuracy among the highest in the nation.
- MAXIS automation of IV-E foster care eligibility determinations helped SSIS to meet federal certification requirements.
- A MAXIS and SSIS partnership with Ramsey County to build and implement Ramsey County CAFÉ (Common Access Front End) provided Ramsey County workers with a tool to provide better integration and coordination of services to clients. The partnership was recognized at the Minnesota Government Information Technology Symposium in December 2004 with a Government IT Recognition Award in the Collaboration category.
- Clients receive timely notification of benefit changes, the energy assistance program, time remaining on MFIP and annual tax statements.
- Employment service providers receive real time information from MAXIS on MFIP clients through a new interface MAXIS built to the Minnesota Department of Employment and Economic Development's Workforce One system.
- County staff receives access to hundreds of on-line reports on topics such as case activity by program, MFIP sanctions, benefits issuance and claims collection.
- Eligibility for the School Lunch Program is automatic through a data exchange with the Minnesota Department of Education, limiting the need to involve county workers.
- County staff can easily verify Social Security Administration benefits and cost of living adjustment (COLA) increases; Social Security Administration staff can easily verify receipt of Temporary Assistance for Needy Families (TANF) benefits.
- Client benefits and vendor payments can be deposited directly.

- MAXIS meets reporting requirements for TANF funding, high performance bonuses and county program evaluation.

County Participation

The primary users of MAXIS are 2,700 county and tribal financial workers and supervisors who are frequently involved in ongoing system training and testing of MAXIS software changes to ensure end-user satisfaction. DHS MAXIS staff meets monthly with county staff to get their feedback and recommendations for improvements, and incorporate user recommendations in their planning. The MAXIS Help Desk provides ongoing technical and program support to county workers. Enhancements include:

- Automation of health care program eligibility.
- A tool to aid county staff in completing and recording asset assessments for persons in need of long term care assistance.
- Automation of food stamp-only eligibility for persons living in MFIP households.
- The Ramsey County Common Access Front End (CAFÉ) Program that provides better coordination of services to the public.

Pending Issues for MAXIS

- Several real time data exchange projects are in progress to provide better service integration and client access.
- Continued investment in new technologies is needed to keep the system viable and flexible for evolving directions in program policy and service delivery.
- Implementation of HealthMatch places a heavy demand on MAXIS resources. HealthMatch contends for resources with MAXIS productions support and implementation of legislative changes, such as the Diversionary Work Program. Additional investment in staff and technology will be necessary to continue to provide coordinated services to users and clients.

MAXIS Expenses for FY 04

Expenditures by Category (in thousands)	
Personnel	$10,615
Professional/Technical Services	5,398
Computer & System Services	8,545
Communications	5,921
Equipment & Supplies	663
Other	1,951
TOTAL[1]	$33,093

Source: DHS Major Systems Projected Financial Status dated December 2004

[1] For FY2004, MAXIS Federal Financial Participation was 41% of net expenditures (total expenditures minus program income).

MEDICAID MANAGEMENT INFORMATION SYSTEM (MMIS)

Purpose

Minnesota's MMIS is a federally certified information system used to administer the Minnesota Health Care Program (MHCP). MMIS processes 57 million claims and transactions annually, submitted by health care providers who serve nearly 670,000 recipients of MHCP. Programs administered by DHS include MinnesotaCare, Medical Assistance (MA), General Assistance Medical Care (GAMC), the Prescription Drug Program and the Alternative Care Grants Program. MHCP provides health care services to low-income families and children, low-income elderly people, and individuals that have physical disabilities, developmental disabilities, mental illness and/or chronic illness. MMIS is the tool county workers and DHS staff currently use to enroll eligible recipients and store enrollee data. MMIS also calculates, bills and records payments made to health care providers.

MMIS facilitates benefit recovery activities that include the coordination of benefits and recouping monies owed to the state. In FY 2004, the Benefit Recovery unit saved the state more than $100 million.

MMIS also facilitates enrollment and premium payment for special programs like Medical Assistance for Employed Persons with Disabilities. The most recent quarter's premium collections totaled approximately $1 million. To provide for efficient premium payment, the system has been modified to permit enrollees to have their payments automatically withdrawn from their banks and sent to the state.

Impact on Consumers/Clients

Consumers of MMIS include Minnesota's counties and over 43,000 health care providers that serve MHCP enrollees. Providers include: individual and group practitioners, pharmacies, dentists, health maintenance organizations, hospitals, nursing homes and treatment facilities.

- DHS encourages electronic claims submission because paper billings take longer to process and are more expensive. Over 93 percent of the 22 million fee-for-service claims processed by MMIS are electronic. The remaining claims (approximately 1.5 million annually) are submitted on paper. The majority of electronic claims process within two days; paper claims take an average of more than 25 days to process. DHS meets legislative requirements for prompt payment.

- Secure eligibility verification is available via telephone or Internet 24 hours a day, seven days a week. Eligibility verification allows providers to check recipient eligibility before they provide services.

- Electronic Fund Transfers (EFT) are now available for all providers. If they choose to enroll in EFT, their payments will be electronically deposited in their bank accounts. In FY 2004, 85% of average monthly payments to providers were made using EFT.

County Participation

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

- DHS managed care staff meet quarterly with counties to review and recommend changes to MMIS;

- DHS provides information and organizational guidance to counties on HIPAA compliance issues; and,

- The State-County Data Unit meets regularly. This unit explores extracting MMIS or other DHS systems' data safely and securely. The goal is to assist counties to access client information and payment data. This data partnership facilitates federal reports, state evaluations, county performance requirements and county needs to target services.

Pending Issues for MMIS

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

- As the state's Medicaid agency, DHS worked to comply with the federal HIPAA mandate. HIPAA mandated significant change in the way all health care payers and providers conduct business. HIPAA's Administrative Simplification Act provisions created new standards for electronic data interchange (EDI). The new standards protect and secure the confidentiality of personally identifiable health care data. All Medicaid agencies, payers and providers were required to redesign their systems to receive and process new transactions. DHS implemented the HIPAA-compliant EDI system on December 1, 2003. Work continues on the next phase of HIPAA, which will require implementation of a national uniform provider identification number.

- MMIS staff is managing the technology for the DHS HealthMatch project. HealthMatch will combine health care program information with flexible technology, which will result in improved access to public health care coverage in Minnesota. HealthMatch will update and expand automated eligibility processing for county and state workers. This system will ensure that policies are implemented consistently across Minnesota, and help prevent gaps in insurance coverage as enrollees change programs or move from welfare to work.

- Provider readiness will significantly impact eventual success and timing of full HIPAA implementation.

- The aggressive implementation schedule for HealthMatch software development will require proactive risk mitigation strategies to minimize impact on schedules and programs. Significant risk is evident in the following areas:

1. Availability of resources for software development will contend with ongoing operations and legislative initiatives.

2. Interfaces and bridges to existing legacy systems, and new software development initiatives to integrate client identification and management, will potentially impact schedule and resource allocation.

3. The inevitable conflict between scope, deadline and contractual expectations must be managed aggressively. Competition for limited Medicaid-knowledgeable contractors in the marketplace is impacting the HealthMatch development project.

MMIS[1] Expenses for FY 04

Expenditures by Category (in thousands)	
Personnel	$21,032
Professional/Technical Services	3,812
Computer & System Services	11,106
Communications	4,795
Equipment & Supplies	2,482
Other	2,644
TOTAL[2]	$45,871

Source: DHS Major Systems Projected Financial Status dated October 2004

[1] Includes HealthMatch and HIPAA

[2] For FY2004, MMIS Federal Financial Participation (FFP) breaks down this way:

    -- 90% FFP for federally approved development (except automated eligibility determination systems)

    -- 75% FFP for routine maintenance operations

    -- 50% FFP for development, maintenance and operation of an automated eligibility determination system

PRISM (CHILD SUPPORT ENFORCEMENT SYSTEM)

Purpose

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

Impact on Consumers/Clients

PRISM supports service to 406,000 parents and their 262,895 children within Minnesota and across the nation. State staff involved with child support enforcement, plus staff from all 87 counties, are direct users of PRISM. The system receives data entered by workers or through 15 interfaces with other state and federal agencies. The use of PRISM has automated many routine functions to locate missing non-custodial parents, implement income withholding with employers and enforce child support orders. Among the highlights for the year are:

- Child support collections for families and government agencies totaled more than $590 million in state FY 2004.
- An integrated voice response system (IVR) averages 161,000 calls per month, making case and financial information available for child support clients 24 hours a day, 365 days per year.
- PRISM directly deposited approximately $377 million in child support payments to authorized custodial parent bank accounts, saving custodial parents time at the bank and ultimately getting funds to children sooner.
- New hire reporting matches averaged 178,200 each month. Cases that match are updated with new information. This begins income withholding sooner and helps child support continue without interruption when parents change jobs.
- Minnesota Child Support On-Line (MCSO) provides parents access to case and payment information via the Internet. As of June 30, 2004, parents accessed their cases an average of 53,000 times per month.

County Participation

The Child Support Enforcement Division has a long history of county participation in the development of a vision and work plan for automating child support policies and procedures.

- The Child Support Advisory Board meets bi-monthly and plays an active role in high level planning and implementation of PRISM changes;

- County workgroups representing the functional areas of PRISM meet with state staff as needed to discuss ideas and proposals for system changes. Members of the workgroups consist of volunteer line staff and management staff from county child support offices. This staff brings the perspective of real life into the change process. Staff also plays a role in helping the state determine the priority of changes; and,

- The Child Support Enforcement Division and county child support enforcement agencies established a five-year strategic plan through a series of meetings in order to develop a new, more focused mission for the future of Minnesota's child support program. The strategizing team continues to meet regularly to review the direction of the plan in light of changes within the program, the economy and other influencing factors.

Pending Issues for PRISM

- If changes to the current Minnesota child support payment guidelines are proposed and passed, implementation efforts will be significant;

- Implementation of Phase II of the child support recovery fee must be done by July 1, 2005. It continues to be a complex structural change that impacts many subsystems.

- PRISM is an asset to be further leveraged in exploring approaches and techniques that allow for rapid development and delivery of new, Web-based applications that meet the demands for quicker and more direct access to data and services. Phase III of MCSO was added to develop an employer application to better meet employers' needs.

- The Diversionary Work Program was passed during the 2003 legislative session. Even though this is a change to the TANF program, it has a direct impact on the child support program and PRISM since it impacts how cases are classified in the DHS system for purposes of TANF reimbursement. This effort continues to grow and become more complex.

PRISM Expenses for FY 04

Expenditures by Category (in thousands)	
Personnel	$12,405
Professional/Technical Services	1,582
Computer & System Services	5,463
Communications	2,245
Equipment & Supplies	452
Other	2,200
TOTAL[1]	$24,347

Source: DHS Major Systems Projected Financial Status dated December 2004

[1] For FY2004, Child Support received 66% Federal Financial Participation

SOCIAL SERVICES INFORMATION SYSTEM (SSIS)

Purpose

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

Impact on Consumers/Clients

- For children who are abused or neglected, SSIS provides a quick, automated way to refer cases for investigation. SSIS annually tracks 25,000 children who are alleged victims of abuse or neglect;
- For children in need of protection who require a number of services, SSIS provides simultaneous information in different parts of the county agency;
- County social workers have a comprehensive case management system;
- County social services agency administrators have expanded availability of information for managing programs;
- SSIS has reports that monitor 18,000 out-of-home placements so these children do not drift in foster care; and,
- DHS has available more accurate/timely statewide data on child welfare programs and improved reporting capabilities to the Legislature and federal agencies.

County Participation

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

- Focus groups and work groups, consisting of county workers and SSIS staff meet to address issues that arise in system implementation and operation. SSIS also receives, on a regular basis, county input and guidance on three formal levels: strategic, county operations and technical/network feedback;
- For the next year (2005), county representatives will be active in design and acceptance testing of the integration of the Community Services Information System (CSIS) functions of payments, MA claiming and state reporting into SSIS;
- Counties have invested significant financial resources in the development, implementation and ongoing operations of SSIS, and are responsible for training 3,000 workers statewide; and,
- SSIS allows county workers to manage their case work, helping them with assessment and eligibility, case assignment and plans, requests for service, reviews, resource management, provider information and tracking licensing status/issues. SSIS will also connect county workers, in accordance with data privacy laws, to state-level client and offender indexes.

Pending Issues for SSIS

- In order to meet federal Statewide Automated Child Welfare Information System (SACWIS) and HIPAA requirements, the CSIS functions will have to be integrated into SSIS as soon as possible.

- SSIS is developing a module to replace the current paper-based method used by the state adoption unit. The new module will include Electronic Document Management and will provide web-based access for tribes and adoption agencies.

- Because the remainder of the social services program areas are not fully developed in SSIS, county workers have to use multiple systems to manage their work and the state does not have a complete picture of services, costs, and outcomes for all family members and programs.

SSIS Expenses for FY 04

Expenditures by Category (in thousands)	
Personnel	$3,570
Professional/Technical Services	1,499
Computer & System Services	455
Communications	52
Equipment & Supplies	419
Other	454
TOTAL[1]	$6,449

Source: DHS Major Systems Projected Financial Status dated December 2004

[1] For FY2004, SSIS received 50% Federal Financial Participation (FFP). Counties received 50% FFP for eligibility costs related to hardware, network and personnel for training and support.

DHS INFORMATION AND TECHNOLOGY CHALLENGES

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

- Improving direct citizen access to information and services.
- Implementing strong data privacy and network security protection measures.
- Supporting client efforts to be more directly active in achieving self-sufficiency.
- Promoting the sharing of services across the enterprise and across state agencies.
- Pursuing innovative solutions.
- Assuring that information technology goals stem from client needs, program directions and business goals.

During FY2004, DHS has continued to work on cross-Department technology efforts, facing a number of challenges that will have an impact on the future of the Department's systems and how they affect clients and county/tribal partners. Among these are:

Maintaining System Viability

The Department's top IT priority is to maintain the viability of its major service delivery systems and infrastructure. DHS systems must respond to citizen demand for improved access to services, as well as keep up with new regulations and changes in technology. DHS must make sure that the systems are well maintained in order to continue to provide the necessary services to DHS customers.

Health Insurance Portability and Accountability Act (HIPAA)

The State of Minnesota, including DHS, along with all other public and private health organizations with access to individually identifiable health data, must comply with federal HIPAA mandates. The regulation consists of three separate rules with associated compliance dates:

- April 2003 for Data Privacy practices
- October 2003 for Electronic Data Interchange (EDI) Transaction Code Sets (TCS)
- April 20, 2005 for the Security Rule

In particular, the Security Rule specifies Administrative/Management, Physical and Technical safeguards that must be in place. At a high level, these include:

- An overall Security Management process and assigned security responsibility.
- Security training and awareness.
- Business Continuity and Disaster Recovery planning.
- Facility, work area and workstation access control.
- Proper destruction/erasure of unneeded media.
- Encryption.
- Computer system access control, authentication and auditing.

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

- Appropriate protections for personal data on individuals and the computer systems in which this is contained.
- Accessible information to providers and payers to help ensure effective and efficient service delivery to Minnesota consumers.
- Compliance with federal and state law.
- Protection of private health information for all citizens.
- Continued ability to do electronic business with health care providers.

HealthMatch

DHS continues to work to improve the automation of health care eligibility determination to make it more efficient and accurate. HealthMatch will provide improved and easier access for citizens, assist in sorting through the variety of possible programs to determine the best fit and help streamline the application process. DHS is working closely with counties and tribal governments to ensure their participation in the project.

HealthMatch will not only increase efficiency for some of the State's most costly programs but also advance a sound long-term vision for Minnesota's publicly funded health care programs.

For county and state health care eligibility workers, HealthMatch will:
- Improve program integrity by administering the Minnesota Health Care Program (MHCP) eligibility rules more accurately and consistently statewide.
- Streamline eligibility determination functions and processes, allowing workers more time to focus on helping Minnesotans get and retain health care coverage.

For Minnesotans, HealthMatch will:
- Improve consumer access to publicly subsidized health care programs and services
- Provide a tool for consumers to more easily apply for health care programs over the Internet
- Improve communication about eligibility for, and enrollment in, public health care programs.

By fully automating MHCP eligibility determination, the State will maximize federal dollars used for the health care program and further ensure that only qualified individuals receive benefits.

DHS anticipates that the savings and data improvements from HealthMatch will result in a complete return on the development investment within the first five years of operation. Federal matching funds are being leveraged with 50% match for programming related to eligibility functions, and an additional 75% and 90% match for other portions of the project.

HealthMatch is scheduled for pilot in 2005 with a staged implementation across counties in 2006.

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

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

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

- Bring efficiencies to DHS system operations.
- Improve effectiveness by increasing coordination of services and improving client outcomes.
- Establish ways of communicating data so that DHS does not need to continue building unique interfaces and data extracts on a county-by-county and system-by-system basis.

DHS has included the Ramsey County CAFÉ project and similar projects in other counties in meetings and user-oriented design sessions, and will continue to do so as the SMI begins the pilot process during calendar year 2005.

Minnesota Electronic Child Care System (MEC²)

MEC² is a web-based application used for the management of Minnesota's Child Care Assistance Programs. Counties use the system to determine eligibility, pay providers and track child care expenditures.

In a reorganization of the executive branch of Minnesota government in the spring of 2003, the MEC² system was transferred to DHS from the Department of Children, Families and Learning, along with the child care assistance program and other community services. The system was in mid-implementation, with about half of the counties having begun transition to the system. Through FY04, DHS worked with counties to address problems preventing the statewide rollout of MEC².

A DHS project team, in conjunction with the MEC² County Advisory Committee, prioritized a list of problems DHS needed to address to stabilize the system. The resulting project plan extended into 2008 and would resolve only half of the identified system problems.

Consequently, DHS decided it would be more cost effective to integrate MEC² into the MAXIS database and infrastructure while preserving a Web-based graphical interface for child care programs. This approach leverages the State's investment in a stable, effective eligibility system. It will provide a more robust statewide automated childcare eligibility system in less time and at less cost. It also will eliminate issues of duplicate entry between systems. County response to this approach has been very positive.

Electronic Government Services (EGS)

DHS continues to make the most of the opportunities that technology presents in helping increase the effectiveness and efficiency of Department programs. DHS was able to expand its electronic transaction capabilities to implement:

- Applications that program clients can use to directly participate in managing their cases, such as:
  - o Allowing parents working with Child Support Enforcement to see their collection and payment information, and
  - o Allowing MinnesotaCare clients to pay fees over the Internet.
- An economical and timely means of distributing, receiving and processing printed materials, application forms and program information, and making many of them available in multiple languages for easy downloading, and
- Methods of communicating and exchanging data with business partners, including other government agencies, such as establishment of web sites for use by health care providers and county agencies to conduct business with DHS.

DHS is now using EGS access as a core way of doing business with the public, program clients, business partners and other government agencies.

Common Challenges Among Systems

All major systems at DHS must address these challenges:

- Renovating and incorporating new technology to meet the increasing need for data exchanges among systems and flexibility in service delivery.
- Keeping qualified staff and providing training to keep current with software advances in light of diminishing financial resources. This is an issue because of the increasing demand for access to information and more efficient customer service options through Web-based applications and new technologies.
- Working cooperatively across systems to develop and implement the Shared Master Index (SMI) and other initiatives to integrate processes across DHS systems. These processes include service delivery functions and technology coordination to secure operating efficiencies.

CONCLUSION

The Department's major information systems operate efficiently and effectively, and provide the expected services to state, county and citizen clients. DHS remains committed to operating information systems that promote client and county partner access to state government.

Partnership remains vital in both the design and implementation of the major systems. With county participation and feedback, DHS has developed and maintained systems that are integrated and coordinated to maintain communication, improve the delivery of programs and services, and ultimately improve clients' lives.

The challenge for DHS over the next year will be to maintain stable operations in the fact of several large developments, including HealthMatch, HIPAA, MEC^2, in addition to the adaptations required to the major systems due to changes in state and federal law.

While DHS applies solid principles to managing its risk, the Department faces a strong challenge as it maintains stable ongoing operations and executes successful new development.

Cost of preparing this report:

Minnesota Statutes, Chapter 3.197, requires the disclosure of the cost of preparing this report.

Report preparation: $162

Six (6) copies of this report have been provided to the Minnesota Legislative Reference Library

Alternative formats

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