Agency Purpose

he Minnesota Department of Human Services (DHS) helps people meet their basic needs so they can live in dignity and achieve their highest potential.

Ensuring basic health care for low-income Minnesotans, DHS administers

- Medical Assistance (MA), Minnesota's Medicaid program for low-income seniors, children and parents, and people with disabilities.
- MinnesotaCare for residents who don't have access to affordable private health insurance and don't qualify for other programs.
- General Assistance Medical Care (GAMC), primarily for adults without dependent children.

Helping Minnesotans support their families

DHS works with counties and tribes to help low-income families with children achieve self-sufficiency through programs such as the Minnesota Family Investment Program (MFIP), the Diversionary Work Program (DWP), child support enforcement, child care assistance, food support, refugee cash assistance, and employment services.

Aiding children and families in crisis

DHS supports families to ensure that children in crisis receive the services they need quickly and close to home so they can lead safe, healthy, and productive lives. DHS guides statewide policy in child protection services, out-of-home care, and permanent homes for children.

Assisting people with disabilities

DHS promotes independent living for people with disabilities by encouraging community-based services rather than institutional care. DHS sets statewide policy and standards for care and provides funding for developmental disability services, mental health services, and chemical health services. DHS also provides services for people who are deaf or hard-of-hearing through its regional offices in Bemidji, Duluth, Mankato, Moorhead, Rochester, St. Cloud, St. Paul, St. Peter, and Virginia.

Direct care services

DHS provides an array of programs serving people with mental illness, developmental disabilities, chemical dependency, or acquired brain injury and people who pose a risk to society. These services include 16-bed psychiatric hospitals being developed in Alexandria, Annandale, Baxter, Bemidji, Cold Spring, Fergus Falls, Rochester, St. Peter, and Wadena; a mental health crisis center in Mankato; Anoka-Metro Regional Treatment Center; Minnesota State Operated Community Services, which provides day training, habitation, and residence services to people with disabilities; and Community Support Services,

At A Glance

Health care programs

- Almost 662,000 people served in FY 2005
- ♦ Medical Assistance (MA) 483,000 people
- ♦ MinnesotaCare 142,000 people
- General Assistance Medical Care (GAMC) 37,000 people

Economic assistance programs

- Food Support 250,000 people per month
- Minnesota Family Investment Program (MFIP) and Diversionary Work Program (DWP) cases — 40,000 families
- General Assistance 14,100 people
- More than 407,000 parents assisted through Child Support Enforcement
- \$595 million in child support payments collected in FY 2005
- 16,900 families received child care assistance for 30,000 children in FY 2005

Child welfare services

- Of more than 14,700 children in out-of-home placement in 2005, more than 10,500 children received care from foster families.
- About 6,000 children were cared for by adoptive parents or relatives who receive financial assistance and support for children's special needs in calendar year 2005.
- 732 children under state guardianship were adopted in calendar year 2005.

Mental health services

- 108,040 adults received publicly-funded mental health services in 2005.
- ♦ 41,524 children received publicly-funded mental health services in 2005.

Operations and two-year state budget

- FY 2006-07 \$8.2 billion General Fund budget
- FY 2006-07 \$17.8 billion all funds budget
- 87% of DHS' general fund budget is spent on health care and long-term care programs and related services
- ♦ 43,000 health care providers
- 41 million health encounters and claims processed
- Approximately 97% of DHS' budget goes toward program expenditures
- Approximately 3% of DHS' budget is spent on central office administration

which supports people with disabilities in the community and in crisis homes. DHS also provides treatment for people civilly committed as sexual psychopathic personalities and/or sexually dangerous persons in the Minnesota Sex Offender Program at Moose Lake and St. Peter; people committed as mentally ill and dangerous at the Minnesota Security Hospital in St. Peter; and people who are developmentally disabled and present a risk to society at the Minnesota Extended Treatment Options Program in Cambridge.

Promoting independent living for seniors

DHS supports quality care and services for older Minnesotans so they can live as independently as possible. Quality assurance and fiscal accountability for the long-term care provided to low-income elderly people, including both home and community-based services and nursing home care, are key features.

Operations

DHS has a wide variety of customers and business partners, including the state's 87 counties and 43,000 health care providers. DHS provides significant operational infrastructure to Minnesota's human services programs, most of which are provided at the county level.

DHS licenses about 26,400 service providers, including group homes, treatment programs for people with chemical dependency, mental illness, or developmental disabilities, child care providers, and foster care providers. DHS also monitors their compliance with Minnesota laws and rules, investigates reports of possible maltreatment, and completes background studies on individuals who provide direct care.

DHS' operations support other providers who directly serve Minnesotans. DHS oversees significant computer systems support for: MAXIS, which determines eligibility for economic assistance programs; PRISM, the child support enforcement system; the Medicaid Management Information System (MMIS), which pays medical claims for publicly-funded health care programs; the Social Service Information System (SSIS), an automated child welfare case management system for child protection, children's mental health, and out-of-home placement; and MEC², the Minnesota Electronic Child Care system.

Budget

DHS is one of the state's largest agencies, comprising 34.4% of the state's total spending from all sources. DHS's FY 2006-07 budget from all funding sources totals \$17.8 billion. Of the total budget for the biennium, \$8.2 billion comes from general fund tax dollars. The remaining \$9.7 billion comes from federal revenue and other funds, such as the Health Care Access Fund, Enterprise Fund and agency fund. Approximately 6,350 full-time-equivalent employees work for DHS.

<u>Contact</u>

Minnesota Department of Human Services Cal R. Ludeman, Acting Commissioner P.O. Box 64998 Saint Paul, Minnesota 55164-0998 Phone: (651) 431-2709

World Wide Web Home Page: http://www.dhs.state.mn.us

General Information: Phone: (651) 431-2000 TTY/TDD: (800) 627-3529

For information on how this agency measures whether it is meeting its statewide goals, please refer to http://www.departmentresults.state.mn.us.