



DHS IT Systems Overview: Legacy Systems and Future Direction

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Human Services Technology: Where we are, where we need to go

- Like all states, Minnesota is highly dependent on IT systems to deliver human services
- This dependency extends to counties due to the state-supervised, county administered environment we operate in
- Transformation of how we deliver human services is dependent on transformation of our IT systems
 - No wrong door access
 - Apply, update, communicate online/mobile; share documentation
 - Integrate data to support service delivery and outcomes

Human Services Systems Transformation and Modernization

Driving Factors:

- Person-centered transformation of human services delivery system
- Outdated and antiquated systems based on differing technologies making it difficult to share information across systems
- Technical challenges of making changes as a result of program/legislative changes
- Limited availability of expertise and loss of key staff
- Compliance with state and federal requirements as well as court mandates
- Providing safe treatment services in secure settings

Human Services IT Systems

Several large and complex technical systems serve as the backbone for counties, tribes, and DHS staff to:

- Determine program eligibility and enrollment
- Ensure program integrity and compliance
- Manage client data, provider data, cases and referrals
- Pay for services

Used by over 31,000 county, tribal and state workers, as well as over 450,000 health care providers, and 1.7 million clients

Provide support for the direct care of over 13,000 clients in treatment annually, many being served within secure 24 hours/7days operations throughout Minnesota

\$216 million of the DHS's overall FY2021 operating budget supports the operations of these IT systems

DHS Major IT Systems Overview

- **MMIS** Claims payment and provider management
- **MAXIS** Eligibility for cash and food programs
- **PRISM** Child support enforcement
- **SSIS** Case management for social workers
- **MyAvatar** Patient records for Direct Care and Treatment
- **METS** Eligibility and enrollment for public and private health care
- **MEC²** Eligibility and payment for child care assistance

Medicaid Management Information System (MMIS)

- **Purpose:** Processes health care claims and payment to providers and managed care capitation payments to the DHS-contracted managed care organizations. MN-ITS and MPSE are the provider facing front ends to MMIS
- **Inception:** 1994
- **Users:** Over 490,000 State and county workers, enrolled providers, and contracted vendors
- **Serves:** 1.5 million Medicaid and MinnesotaCare members
- **Processes:** 87 million claims annually and 28 million capitation payments MCO's
- **Pays** \$12 billion to enrolled providers, counties, tribal governments, and MCO's annually

Eligibility System for Cash and Food Programs (MAXIS)

- **Purpose:** MAXIS supports eligibility for cash, SNAP, some health care programs and Title IV-E foster care programs.
- **Inception:** 1989
- **Users:** 9,500 state agency, county and Tribal Government users, and 73,000 providers
- **Serves:** over 1 million Minnesotan's receiving cash, food, certain health care programs and Title IVE foster care
- **Pays:** \$90M in cash and nutrition assistance each month
- **Processes:** 2.5 million online transactions per day
- **Sends:** over 230,000 notifications each month

PRISM (Providing Resources to Improve Support in Minnesota)

- **Purpose:** PRISM is a federally mandated computer system that supports Minnesota's child support enforcement program. Minnesota Child Support Online (MCSO) is the client/employer facing front end to PRISM
- **Inception:** 1997
- **Users:** 4,300 county staff users, 120,000 clients, and 24,000 employers
- **Serves:** PRISM supports approximately 230,000 children, and 331,000 parents
- **Pays:** PRISM makes over \$550 million in payments annually
- **Processes:** 1.2 million online transactions daily
- **Creates:** over 2 million legal documents and notices annually

SSIS (Social Services Information System)

- **Purpose:** Social Services Information System (SSIS) is a case management system for county social workers supporting child protection, foster care, adoption, children's mental health, adult maltreatment reporting, waiver claiming and other child and adult services.
- **Inception:** 1994
- **Users:** 12,000 county, case aides, tribes, and state staff
- **Serves:** 260,000 individuals per year
- **Receives:** MN receives more than 75,000 reports of child maltreatment per year
- **Interfaces** with other major systems including MAXIS, PRISM, MMIS

MyAvatar (Patient records for Direct Care and Treatment)

- **Purpose:** DCT's Behavior Health Medical Record, myAvatar, implemented about 15 years ago is used for providing care for clients/patients
- **Inception:** 2004
- **Users:** 2,500 DCT employees
- **Serves:** approximately 12,000 active clients/patients
- **Service Areas:**
 - Forensics
 - Community Based Services
 - Minnesota Sex Offender Program
 - Mental Health and Substance Abuse Treatment Clinics
 - Ambulatory Services

MEC² (Minnesota Electronic Child Care)

- **Purpose:** MEC² is used to determine eligibility for Minnesota's Child Care Assistance Program (CCAP) as well as provides provider and case management tools. MEC² Pro provides capability for Child Care Providers to submit their bills electronically.
- **Inception:** 2007
- **Users:** 7300 State, county and Tribal Nation users, and 5800 Child Care Providers (MEC² Pro)
- **Serves:** MEC² / MEC² Pro supports providing child care assistance services for over 29,000 children and over 14,000 families in an average month. Approximately 36,000 child care providers who provide child care services
- **Interfaces** with MAXIS, PRISM, DHS Licensing
- **Pays:** Over \$245 million in Child Care Assistance annually. The average total monthly assistance per family was approximately \$1600

METS (Minnesota Eligibility Technology System)

- **Purpose:** METS determines Minnesotans' eligibility for all of Minnesota's insurance affordability programs — Medicaid, MinnesotaCare and qualified health programs with advanced premium tax credits.
- **Inception:** 2013
- **Interfaces** with MMIS enrollment system of record for public programs and Get Insured, the enrollment system of record for private programs
- **Users:** Approximately 1.14 million total METS account holders
 - 1,552,323 consumers
 - 8,330 caseworkers/assisters

- These are the primary systems county workers use to deliver human services at the local level
- Ability to innovate and improve service delivery is constrained by outdated systems
- Lack of interoperability between county and state systems increases county administrative costs and results in a poor consumer experience

Working toward the Future

Path Forward: Sustaining, Improving, Planning

- **Sustain our legacy systems:** Replacing aging systems takes time; we need to sustain our legacy IT systems to maintain services, payments, reporting and other critical functionality.
- **Improving:** Not all improvements require fully replacing older systems; we can continue to innovate and improve services to people while we modernize
- **Planning:** We need a roadmap for modernizing service delivery and building an IT infrastructure to support the new model for services

- Sustaining legacy systems is critical to continuity of services, program compliance, fiscal integrity and
- DHS Enterprise Architecture Board (EAB) asked MNIT to provide sustainability plans for all legacy systems (EAB includes DHS, MNIT, County and Tribal representatives)
- This will require us to prioritize resources to ensure these systems continue to function until they can be replaced and/or updated

Improving: Mobile-Friendly tools to improve access to services

MNBenefits: Integrated benefits application that will allow clients to apply for multiple programs on a mobile platform in under 20 minutes.

- DHS, counties, tribal nations and MNIT are joining in partnership with Code for America (CFA), to 4000 total applications completed so far
- Pilot: Median time to complete the application is 12 minutes, 2 seconds

PEBT (Pandemic Electronic Benefit Transfer): Federal initiative to provide food assistance to families with children who lost access to free or reduced priced school lunch or breakfast due to the pandemic

- A new mobile-friendly P-EBT application for applicants was created by CFA for the initial effort for Spring/Summer 2020 benefits
- MNIT, DHS and Amazon Web Services (AWS) collaborated to introduce the use of SMS texting to eligible clients for P-EBT

Improving: METS/MMIS

- **METS** improvements have continued since its launch in 2013. A few notable improvements include updates to the METS/MMIS interface functionality, renewals process improvements, and reduced creation of duplicate personal IDs.
- **MMIS** improvements include Minnesota Provider Screening and Enrollment for health care (MPSE) implementation, critical server and software upgrades for system sustainability, and progress on the roadmap for MMIS modernization.

MYAvatar recent improvements:

- Speech to text dictation devices
 - Dietary software
 - Electronic Forms, Labs, Prescribing & Medication
 - Scanning & document management
 - Client Scheduling
 - Medication Management
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- Additional resources needed to develop fully compliant Electronic Medical Record for DCT

Planning: Integrated Services Business Model

- **Integrated Services Business Model** project - working group across DHS, Counties, and White Earth Nation to develop:
 - Shared understanding of the goals, values and need for service integration
 - Agreed upon integrated, person-centered services business model
 - Framework to ultimately guide IT modernization
- Transformation of how we deliver human services is dependent on transformation of our IT systems
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Planning: Business Readiness

- Business readiness – must be done before we build technology:
 - Partner with service providers (counties, tribes and community-based organizations)
 - Understand the perspective of the people we serve
 - Simplify program rules
 - Design technology solutions that support business transformation
 - Implement shorter implementation cycles to demonstrate success, learn, and engage stakeholders
- This is a key recommendation of the Governor’s Blue Ribbon Commission on Information Technology

Planning: Curam Assessment

- **Purpose of Curam Assessment:** To have an outside, independent vendor assess the future direction of DHS modernization and the role of IBM CuramSolutions.
- Gartner, Inc. has been selected to conduct the assessment.
- **Primary Deliverable:** Based on the assessment and in partnership with the DHS Enterprise Architecture Board (EAB), the vendor will develop a “Go Forward” strategy. It will provide options, incorporate recommendations and provide a roadmap to support DHS and its partners in moving forward.

Planning: Curam Assessment (cont.)

- Define a go-forward roadmap that:
 - Provides a holistic, enterprise level, “future state vision” for DHS’s information and technology systems, aligned with the organization’s business strategy and goals.
 - Assesses the role of IBM Cúram in achieving this future state vision.
 - Minimizes risks and optimizes investments made by DHS and its Federal, County and Tribal partners.
 - Outlines the necessary strategy, structure and steps to achieve the envisioned future state.

- Counties can get better results for the people they serve by moving to an integrated, person-centered service approach
- To make this possible, counties need:
 - administrative simplification,
 - a solid technology foundation,
 - state and county system interoperability a priority,
 - strong state/county partnership and tools to enable service transformation.

- **Questions?**