

# Position Statement

For 2024 Session

MACSSA has an organizational priority of “Strategic Position Development” with the goal of addressing challenges and leading innovation through thoughtful analysis that incorporates fiscal implications, systemic policy concerns, and legislative strategies in the development of policy and legislative positions.

## Public Healthcare Eligibility: Time for a Unified System that Works

### Proposal

#### Issue:

METS (Minnesota Eligibility Technology System) is the state-wide public healthcare insurance eligibility determination system utilized by the state and counties. In late 2012/early 2013, using a multi-tiered selection and funding process, DHS leveraged time-limited federal and state dollars to engage vendors for a fall 2013 release date for statewide enrollment. Optimization of METS for public insurance assistance determination has yet to reach successful functionality for consumers and county workers. Ten years into the operation of the system, county staff, leadership and policy makers recognize it has yet to reach a level of maturity that allows for efficiency in performing health care eligibility functions. Funding for METS system development allocated in the 2023 Legislative session is focused on compliance changes required by Center for Medicare and Medicaid Services (CMS). This is extremely problematic, because while improvements have been made, analysis indicates that it may be several more years in conjunction with a significant amount of resources for the METS system to achieve operational efficiency.

Now that the federal Public Health Emergency (PHE) ended, the counties are faced with the massive undertaking of reviewing eligibility for all enrollees now extended to a 24 month period. This greatly exacerbated already existing workload issues for county and tribal eligibility workers statewide. Unfortunately, doing so in a system that is not operationally efficient has made this work more difficult. The state has shifted its focus and resources to CMS compliance and this urgency means that plans for necessary system development are sidelined.

#### Implementation:

Counties advocate for a health care eligibility system that serves as a sustainable platform for performing health care functions and fully integrates with other health and human services technology systems. The state should have a plan for sustaining operations in for the MAGI and non-MAGI healthcare eligibility currently on the legacy systems. Concurrently, counties advocate that the state continue to appropriate sufficient funding and resources to maintain the base level of operations, continue critical improvements and development work and secure a long-term resource plan for the METS system.

Counties advocate for policies around health care that are easy to implement and easy for people to use. Counties support policies that simplify service delivery and recommend avoiding policies that make service delivery more complicated. Counties also advocate for significant improvements in data sharing between the various state systems servicing the same human services resident.

**Systemic Priority/Paradigm Trend Alignment**  
**(highlight all that apply and explain why)**

- **Equity:** Promote racial equity and eliminate racial disparities in the human services system for all people across the state. *(systemic priority)*
- **Workforce:** Advocate for strategies to sustain and equip the workforce, and simplify work given the forecasted labor shortages. *(systemic priority/paradigm trend)*
- **Technology:** Collaboratively seek state investment in systems transformation and modernization which must include appropriate county collaboration, oversight, and guidance. *(systemic priority/paradigm trend)*
- **Governance/Partnerships:** Co-create state/county governance that results in clear accountability, appropriate allocation of resources, stabilized service delivery, and improved outcomes for people served. *(systemic priority/paradigm trend)*
- **Resident Service:** Adapt to individual needs to support real choices *(paradigm trend)*

### Operational Priority (Committee) Alignment (highlight all that apply and explain why)

Adult Services  
Behavioral Health

Children's Services  
Equity

Healthcare  
Modernization

Policy  
Self-Sufficiency

#### Why:

METS is the public healthcare system that needs technology modernization to provide more equitable access and outcomes for our residents which helps move them along the path towards self-sufficiency. Policy changes around healthcare would improve the ease of future system development.

#### Rationale/Background:

##### Rationale/Background:

Counties and tribes have been promoting these principles for many years. The below are historic rationales from MACSSA. These principles align with the jointly owned Modernization Strategic Plan.

- Modernization is needed to build in equity within our system and eliminate disparities.
- Form should follow function; design is people-centered. The consolidation and redesign of State information technology organizations should work to maintain and improve the service-orientation of people-serving systems. This “customer-service focus” is balanced with the necessity of ensuring equity of services, maintaining data security, privacy, client safety, reporting accountability and reducing fraud.
- The health and human services system should be architected as a State-County enterprise. Within an enterprise, outcomes are a whole interplay of “policies, processes, and systems throughout the organization”
- Counties are partners in an extended enterprise architecture framework; we are the primary “business owner” of the health and human services delivery system; we are the business customer of the State-County I.T. systems and counties, and our clients and providers are the end-users of state-county enterprise solutions. Counties have representation at many levels within the current governance structure.
- The State and Counties should strategically align; service (business) needs should drive systems, processes, and solutions. Business needs and requirements for the state-county enterprise are legislative and policy mandates; strategic missions, visions, strategies, and desired outcomes within a performance management architecture, as well as preferred administrative (business) processes, which drive technology infrastructure and solutions.
- Digital era government and governance can be facilitated by direct service. The future state of the system is realized when the public has remote access to self-service by “anyone, anyplace, anytime”; the service provider is enabled at the point of service; the taxpayer sees and understands apparent results; intergovernmental transactions are sleek and unmediated; and people-serving agencies and groups connect to one another to collaborate on their programs and services.
- IT service (business) solutions need to be affordable, effective, and sustainable. The current business model for information technology does not meet these criteria. The enterprise architecture should be integrated and inter-operable with reusable solutions. The architecture must also be flexible and scalable.

Modernization efforts should achieve these goals:

- Provide people with more choice and greater control over their services
- Produce a simplified human services system that proactively addresses individual, family, and community needs, while increasing equity
- Support increased use of data to improve service delivery while putting consumers in the driver’s seat as to how they want their data used
- Introduce and enhance modernized technology tools and supports that automate tasks and save time so staff can focus on supporting individuals and families
- Reduce the growth in administrative costs by simplifying, automating, integrating systems and processes
- Provide frequent, incremental improvements to county service delivery capabilities (including continuous improvement of existing systems to meet immediate needs)

**High-level, one paragraph description of the issue and its importance:**

Over 1.5 million Minnesota residents rely on Minnesota health care programs. County workers utilize METS to determine and continue eligibility for many of these residents and need significant improvements in workflow and automation of the METS system to operate efficiently. Funding allocated in the 2023 legislative session was a start, but compliance changes required by CMS shifted the focus away from operational efficiencies. “Straightening the pipes” through policy simplification changes and sufficient funding and resources for service delivery transformation has the opportunity to provide our residents with better outcomes at a lower cost to state and county governments.



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Approved on: