04/24/20 **REVISOR** BD/CH 20-8410 as introduced

## **SENATE** STATE OF MINNESOTA **NINETY-FIRST SESSION**

A bill for an act

relating to human services; establishing a Human Services Transformation

S.F. No. 4559

1.1

1.2

1.3

(SENATE AUTHORS: DRAHEIM and Rosen)
DATE
05/04/2020
6078 Introduction and f OFFICIAL STATUS

Commission; requiring reports; appropriating money.

Introduction and first reading
Referred to Human Services Reform Finance and Policy

1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. FINDINGS.
1.6	The legislature finds that it is necessary to reform the Department of Human Services.
1.7	The legislature finds that a Human Services Transformation Commission should be
1.8	established to recommend changes to Minnesota's human services delivery system. It is
1.9	necessary to redesign and transform human service programs in Minnesota to:
1.10	(1) promote better outcomes for Minnesotans;
1.11	(2) improve the department's program efficiencies and reduce expenditures;
1.12	(3) increase the department's administrative efficiencies and promote program
1.13	simplification;
1.14	(4) improve the department's partnership with counties, tribes, and private entities that
1.15	provide services to residents;
1.16	(5) create the department's capacity to govern complex service delivery networks;
1.17	(6) modernize the department's data collection and data sharing agreements with counties
1.18	and provider partners.

Section 1. 1 Sec. 2. HUMAN SERVICES TRANSFORMATION COMMISSION.

2.1

<u>Su</u>	abdivision 1. Membership; compensation; chair. (a) The Human Services
Trans	formation Commission consists of 14 members:
<u>(1</u> )	) eight members appointed by the governor, two of whom must be current Minnesota
count	y commissioners with leadership experience in health and human service programming
one of	f whom must be a current county human services administrator, one of whom is selected
o rep	resent Minnesota tribal nations, two of whom must be business leaders with experience
n hea	alth and human services program design, and two of whom must have experience
nana	ging large business enterprises that deliver health and human services programming
<u>(2</u> )	) three members appointed by the senate majority leader; and
<u>(3</u> )	) three members appointed by the speaker of the house of representatives.
<u>(b</u>	) The senate majority leader and speaker of the house must appoint individuals with
xper	ience in health and human service programming, technology reform, and complex
usin	ess enterprises. Appointees must not be current legislators or state agency heads.
<u>(c)</u>	The commission shall select two members as cochairs.
Su	abd. 2. Administrative and research support; ex officio membership. The
comn	nissioners of human services and health, or their designees, shall serve as ex officio
nemb	pers of the commission. The commissioner of human services and other state agency
eads	, as requested by the commission, shall provide access to subject matter experts; any
lata r	equested by the commission consistent with federal and state data practice laws,
ncluc	ling data that can be anonymized to allow for it to be shared; and analytical support,
o fac	ilitate the work of the commission.
Su	abd. 3. Staff; office space; equipment. The commission shall select a director to serve
as the	chief administrative officer of the commission. The director may hire advisors,
consu	ltants, and employees, as authorized by the commission, and prescribe their duties.
Empl	oyees shall be state employees serving in the unclassified service. The commissione
of adr	ninistration shall provide to the commission office space and access to office equipmen
and a	dministrative services.
Su	ubd. 4. <b>Duties.</b> (a) By April 1, 2021, the Human Services Transformation Commission
shall	complete an assessment of Minnesota's current human services delivery system,
includ	ling a description and evaluation of the effectiveness of the system. The final assessmen
shoul	d include a comparison of how the overall design of Minnesota's human service delivery

system compares to that of other states, as well as an assessment of Minnesota's response

Sec. 2. 2

2.33

3.1	to the COVID-19 pandemic. The commission may include recommendations for initial
3.2	enhancements, cost savings measures, structural reforms, or other changes by policymakers,
3.3	the Department of Health and Human Services, external consultants, counties or others.
3.4	(b) By December 1, 2021, the Human Services Transformation Commission shall
3.5	recommend how to change, modernize and transform Minnesota's human service program
3.6	delivery system to effectively meet the needs of Minnesotans for the next 20 years. In
3.7	developing these recommendations, the commission shall:
3.8	(1) consider the advice and recommendations provided by the Human Services Redesign
3.9	Advisors established under subdivision 6;
3.10	(2) consider the work of previous commissions, the Department of Human Services
3.11	integrated services business model and other systems transformation work conducted by
3.12	the department and the legislative auditor;
3.13	(3) describe how the commission's recommendations will improve outcomes, increase
3.14	administrative efficiencies, simplify health and human service program delivery, and improve
3.15	processes, and innovate technology; and
3.16	(4) describe how the recommendations will eliminate conflicting and duplicative roles
3.17	and responsibilities among state agencies, counties, and tribes.
3.18	(c) By October 1, 2022, the Human Services Transformation Commission shall revise
3.19	its preliminary recommendations based on responses from policymakers and stakeholders,
3.20	and develop and present to the legislature and governor an action plan and timeline for
3.21	transforming Minnesota's human service system that includes but is not limited to
3.22	implementation of revised state agency structures; redesign of technology systems and the
3.23	coordination of relevant state agencies to ensure effective implementation of technology
3.24	solutions; realignment of roles, responsibilities, and functions for overseeing, administering,
3.25	and directly providing human services; and realignment of financial responsibility and
3.26	accountability for paying for the costs of programs. This report must provide:
3.27	(1) an outline of implementation timelines and costs;
3.28	(2) principles and expectations for routine user testing of human services technology
3.29	systems by program participants such as the counties, tribes, and private provider partners;
3.30	(3) proposed law changes;
3.31	(4) a set of milestones to track the progress of implementation; and
3.32	(5) criteria for evaluating the success of implementation.

Sec. 2. 3

<u>(d) l</u>	By January 15, 2023, the Human Services Transformation Commission shall develop
and pre	sent to the governor and legislature recommendations on whether the work of the
commis	ssion should continue and, if recommended to do so, a description of what the
addition	nal work of the commission would include.
Sub	d. 5. Research. The commission may contract with the University of Minnesota to
conduc	t a comprehensive study of human service programs in Minnesota.
Sub	d. 6. Human Services Redesign Advisory Council. (a) The Human Services
Redesig	gn Advisory Council shall consist of 17 members:
<u>(1) 1</u>	nine members shall be appointed by the governor, including three county human
service	administrators, two persons representing tribal nations, and four persons who
particip	pate in state human services programs;
<u>(2)</u> :	four members shall be appointed by the senate, two by the senate majority leader
and two	by the senate minority leader; and
(3)	four members by the house of representatives, two by the speaker of the house and
two by	the minority leader.
(b) '	The appointees shall represent a constituency served by federal, state, or local humar
	s programs or entities that deliver human services in Minnesota.
Sub	d. 7. Council duties. The advisory council has lead responsibility for:
	determining the structure of the existing Minnesota human service delivery system
	ng the financial accountabilities of existing human service programs assigned to the
	ment of Human Services and the role of the department, other state agencies, counties
	mealth care providers, mental health and social service providers, and the federal
governi	ment in providing and paying for those services;
<u>(2)</u> a	articulating current human service program design, service delivery systems, program
mplem	nentation and program design, culture, and service delivery system factors that
contrib	ute to outcome disparities;
<u>(3)</u> :	analyzing and describing the key trends impacting the delivery of human services,
includii	ng the influence of demographic, social, cultural, financial capacity, mobility, or
other tr	ends, and advice on how the commission should think about those trends when
develop	oing recommendations to the legislature and the governor;
<u>(4)</u> i	identifying technology enhancements that program participants believe would
streaml	ine and improve human service program delivery and outcomes; and

Sec. 2. 4

Subd. 2. Appropriations. \$...... is appropriated in fiscal year 2021 from the general

fund to the Human Service Transformation Commission for the purposes of section 2 and

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as introduced

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is available until June 30, 2023.

**REVISOR** 

Sec. 3. 5