

# Human Services Administration

## Update to 2007 Evaluation Report

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### Problems Identified

- **Program Complexity.** Statutory changes have contributed to much more complicated human services programs, and this has reduced administrative efficiency and increased the risk of noncompliance.
- **Inconsistencies in Services.** Service access, cost, and outcomes often vary significantly around the state, partly reflecting differences in county practices and funding levels.
- **Ineffective State Supervision.** Minnesota has a “state-supervised, county-administered” human services system. But the Department of Human Services’ (DHS) supervision of counties has been inadequate, with limited performance measurement, uneven technical assistance, and minimal tools for holding counties accountable.
- **Diseconomies of Scale.** Too few multicounty administrative agencies serve Minnesota’s less populous counties. Also, some services now administered by counties might be administered more efficiently or effectively by DHS.

### Changes Implemented

- **Performance Reporting Initiated.** In 2008 and 2010, DHS collected and distributed statewide data on county performance. In 2009, the Legislature created a Steering Committee on Performance and Outcome Reforms for the purpose of developing outcome standards for essential human services. According to DHS, this committee’s work will now take the place of DHS’s county performance measures.
- **Authorized “Service Delivery Authorities” and Accountability Mechanisms.** The 2009 Legislature authorized counties to establish “service delivery authorities” for the purpose of redesigning existing services and improving cost-effectiveness. The 2009 Legislature also authorized remedies that DHS can implement if counties or service delivery authorities do not achieve minimum performance outcomes.

### Action Needed

- **The Legislature Should Consider Simplifying Health Care Administrative Requirements.** As required by 2009 legislation, DHS must issue a report by September 2010 recommending to the Legislature more uniform standards and procedures for administering health care services under Medical Assistance and MinnesotaCare.
- **Counties Should Redesign Human Services Administrative Arrangements.** So far, no counties have established “service delivery authorities,” although the 2009 Legislature appropriated \$350,000 to foster service redesign by these authorities. Also, no counties have recently created multicounty administrative units for human services.
- **DHS Should Assess the Need to Transfer any Responsibilities between DHS and Counties.** State law required DHS to report by January 2009 on the need for such transfers, in consultation with a statutorily prescribed advisory committee. The advisory committee was inactive in the past year, and DHS did not issue a report.