



# Legislative Position

2009

## Topic/Descriptive Title:

## State-County Results Accountability Pilot Project: Chemical Health

## Brief Summary Statement:

The State-County Results Accountability Initiative aims to redesign the structural relationship between the state and counties to promote greater accountability, productivity and results in Minnesota's Human Services delivery system. Transitioning Minnesota's human services delivery system to a "Results Accountability Management System" is critical, but also requires time and thoughtful implementation to assure the best interests of clients and taxpayers remain paramount. MACSSA recommends implementation of the Results Accountability Management System through a pilot project aimed at improving the delivery of chemical health services. The pilot project would grant individual counties or voluntary multi-county entities that so choose, statutory authority to operate with the context of a new state-county governance model for the purposes of delivering chemical health services.

## Problem/Issue Statement:

The Governor, key legislative leaders, the Minnesota Department of Human Services, the Association of Minnesota Counties, the Minnesota Association of County Social Service Administrators, and the Minnesota Office of the Legislative Auditor have all emphasized the critical need to reform the human services delivery system. Such significant system transformation is best accomplished through pilot projects which can effectively lay the foundation for more broad-based system redesign. Administration of chemical health services funded by the Consolidated Chemical Dependency Treatment Fund (CCDTF) is one area well-positioned for redesign as it's overburdened with complex rules, regulations and funding inequities that prevent counties from achieving superior outcomes for clients and taxpayers through the use of innovative best practices.

## Legislative Committee Action Proposed:

This legislative proposal establishes a pilot project that would grant individual counties or voluntary multi-county entities that so choose, statutory authority to operate with the context of a new state-county governance model for the purposes of delivering chemical health services.

Counties or multi-county entities participating in the new governance model would be required to develop a series of binding agreements with the state Department of Human Services that clarify roles, responsibilities, and performance outcomes for the state and participating counties or voluntary multi-county entities.

**Governance Agreement:** A Governance Agreement would redefine the respective authority, powers, roles and responsibilities of the state and participating counties (i.e. "the governance partners"). As part of the Governance Agreement, the participating counties would be held accountable for achieving defined performance outcomes but, through the use of waivers, be granted greater local control and flexibility to determine the most cost-effective means of achieving those outcomes. This may include a waiver to grant greater flexibility in the use of Consolidated Chemical Dependency Treatment Funds.

**Performance Agreement:** An annual performance agreement would additionally be required between the governance partners which defines measurable goals in key operational areas. This agreement could identify: dependencies and requirements for each governance partner to maintain service levels, respective resource commitments, funding or expenditure flexibilities, and essential reporting and accountability measures.

**Service Level Agreement:** Service level agreements would be required between the governance partners specifying the expectations and responsibilities of each regarding administrative and information technology support. Assuring adequate technology and administrative support is critical to the ability of each governance partner to uphold the requirements specified within both the governance and performance agreements.

## Fiscal Implications:

This legislative proposal is either budget-neutral or will produce cost-savings for the state. Participating counties or voluntary multi-county entities agree to assume financial responsibility for any service cost overruns while DHS and the legislature agree to allow counties to maintain any funds not spent as long as agreed upon outcomes are achieved and dollars saved are reinvested within identified and agreed upon service delivery systems.

**Impact If Change  
Is Not  
Implemented:**

The current regulatory system will continue to require compliance and will reward bureaucratic regulatory functions rather than good outcomes of bettered lives and value delivered to Minnesota clients, taxpayers and communities.

**Affected Statute**

254B.05; 254B.06; 254B.051

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