



# A One Stop Shop: Minnesota's Integrated Eligibility Determinations, Person Centered Planning & Rate-Setting All in One Application

# MnCHOICES Introduction

- What is MnCHOICES – purpose, history and goals
- Who uses MnCHOICES
- Who do we serve – population served and services provided
- Why move to a new system
- Timelines and metrics
- Lessons Learned
- Demo

# Purpose of MnCHOICES/Long-term Care Consultation

- Purpose and goal (MN Statute 256B.0911):
  - (a) The purpose of long-term care consultation services is to assist persons with long-term or chronic care needs in making care decisions and selecting support and service options that meet their needs and reflect their preferences. The availability of, and access to, information and other types of assistance, including long-term care consultation assessment and support planning, is also intended to prevent or delay institutional placements and to provide access to transition assistance after placement.
  - Further, the goal of long-term care consultation services is to contain costs associated with unnecessary institutional admissions. Long-term care consultation services must be available to any person regardless of public program eligibility.

# History of Community-Based Services in MN

## Home and community-based services

- Since the early 1980s
- Programs developed independently
- Each used own assessment criteria/tool

## Vision shortly after 2000

- Use a uniform assessment and support planning process
- For all people/programs and services
- Greater consistency for determining eligibility and providing long term services and supports (LTSS)

# People and Populations

- Target Groups

- Alternative Care (4,000)
- Brain Injury (1,100)
- Community Alternative Care (800)
- Community Alternatives Disabled Individuals (40,500)
- Developmental Disability (24,000)
- Elderly Waiver (32,000)
- Personal Care Assistance (25,500)
- Moving Home MN (aka Money Follows the Person) (120)

# Pre-MnCHOICES

**Disability  
Waivers**



**Aging  
Waivers**



**Personal Care  
Assistance**



**Developmental  
Disability  
Services**



**MFP**



# What is MnCHOICES?

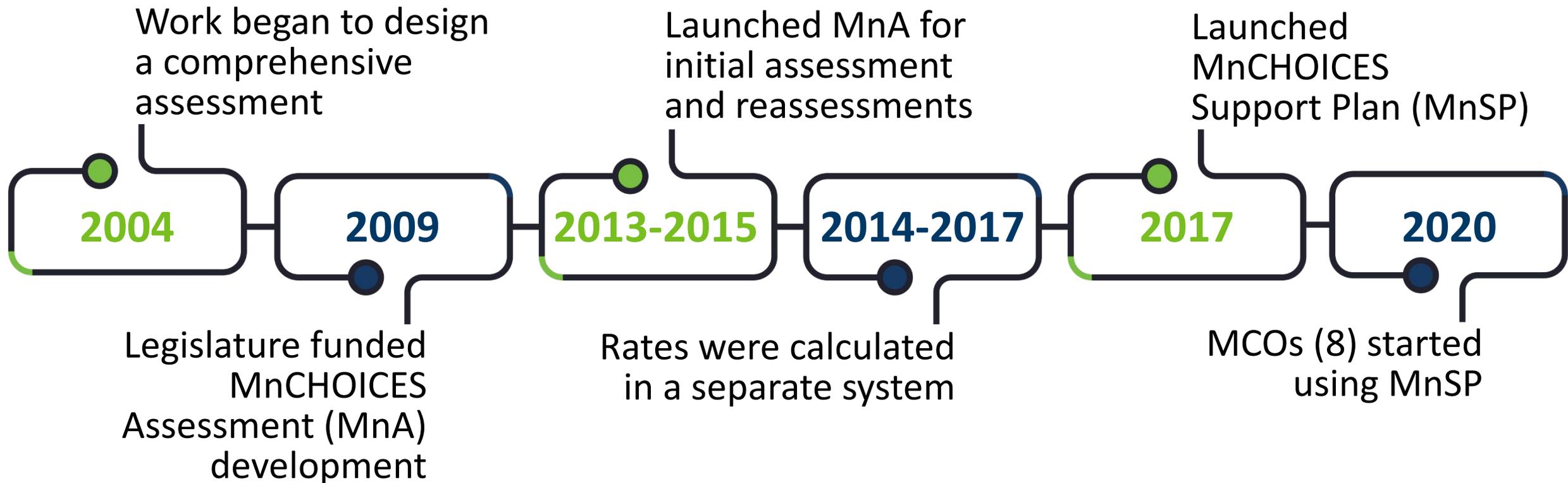
- MnCHOICES means both the computer application used by lead agencies to complete LTSS assessments, support plans, and health risk assessments, and the assessment conducted to determine eligibility for long-term services and supports.



# MnCHOICES Acronym

- **Mn** Minnesota
- **C** Community engagement
- **H** Health and well being
- **O** Own home
- **I** Important relationships
- **C** Control over resources
- **E** Employment and stable income
- **S** Support preferences

# History of MnCHOICES 1.0



# MnCHOICES 1.0



# Who Uses MnCHOICES

- Counties
- Tribal nations
- Managed care organizations
- Contracted agencies  
(of counties and MCOs)



# MnCHOICES Revision project

**Project purpose:** To further enhance the current MnCHOICES through a technical redesign, resulting in efficiencies and improved experience for all while complying with mandates/requirements

- Improve the experience and outcomes for individuals
- Bring managed care organizations and other interested tribal nations into the application
- Support person-centered assessment and support planning practice
- Provide lead agencies access to data and information via reports

Now All  
Under One Roof

Support Plan and  
Rate Calculations

LTSS Evaluations

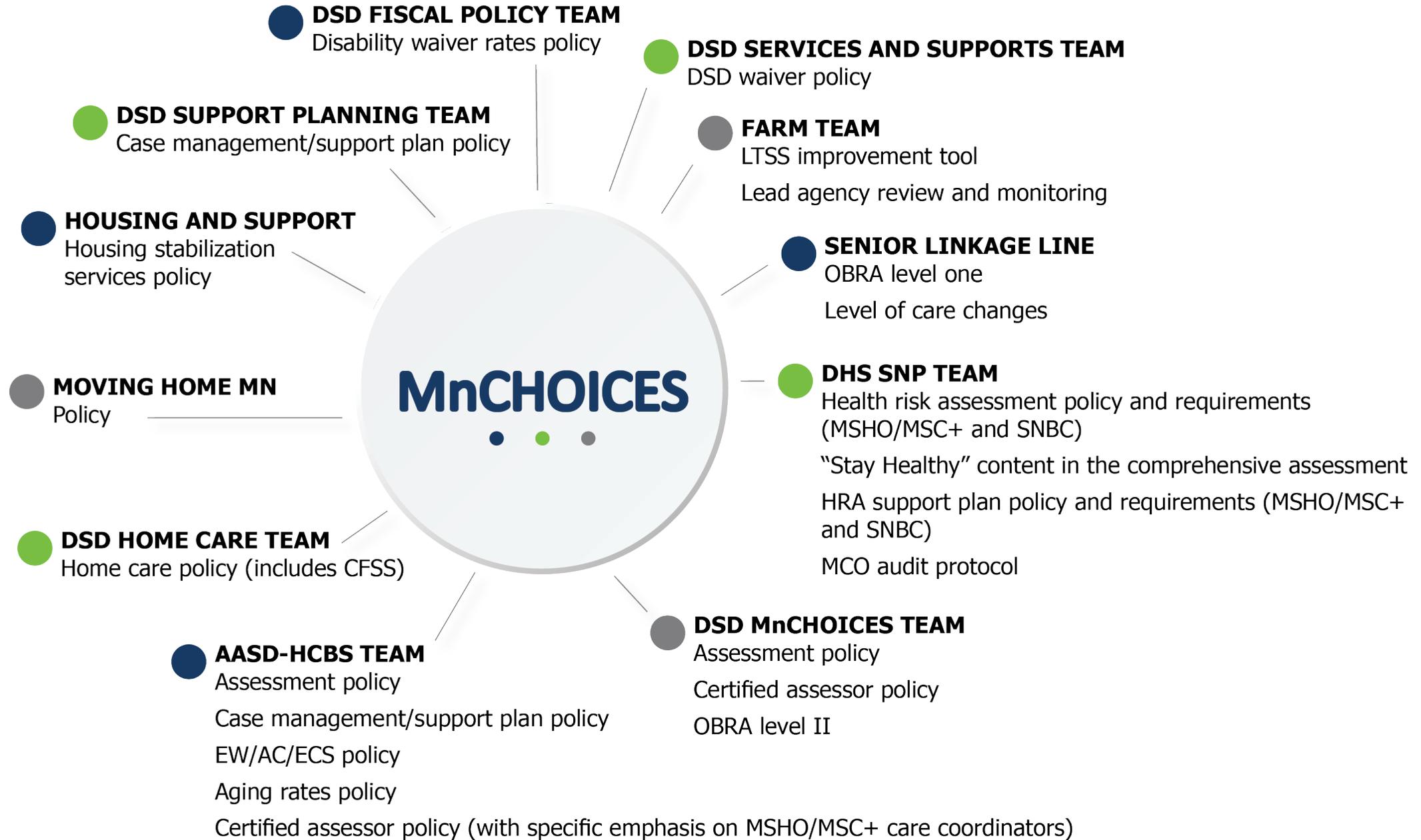
**MnCHOICES**

• • •  
*current platform*

**Assessments**

Health Risk Assessment (HRA),  
MnCHOICES Comprehensive Assessment,  
and Assessment Summary

# It Takes a Village



# MnCHOICES Project Timeline

- **Project kickoff** | September 2020
- **Training zone created** | July 2021
- **Functional testing** (Sept-Oct 2021)  
16 lead agency users
- **Assessment & support plan accuracy** (March 2022)  
15 lead agency users
- **User acceptance testing** (December 2022)  
25 lead agency users

# Rolling Launch Schedule

- **April 2023**  
Production site is live
- **Phase 0 (May 2023)**  
28 lead agency staff provided access to training zone
- **Phase 0 (June 2023)**  
28 lead agency staff provided access to production
- **Phase 1 (July 10 – Sep 29)**  
Statewide launch. Lead agencies aim to have up to 10% of users in the production environment.
- **Phase 2 (Oct 2 – Nov 30)**  
Lead agencies aim to have up to 30% of users in the production environment.

# Rolling Launch Schedule

- **Phase 3 (Dec 1 – Feb 29, 2024)**

Lead agencies aim to have up to 100% of users in the production environment.

- **Phase 4 (Mar 1, 2024 – May 31, 2024)**

Lead agencies start all new assessments in MnCHOICES Revision and finish all assessments and support plans in MnCHOICES 1.0 (also other assessment/support planning tools) by end of this period.

- **After June 1, 2024**

MnCHOICES 1.0 is retired

# What's Gone Well?

- No lag time
- Working through an assessment is straight forward
- Able to successfully use offline
- Process flowed from start to finish
- Navigating through the application seems easy to do
- Processing and moving around the tool is getting easier as I get familiar
- Excited for others to get into it and start working within it

# What's Gone Well?

- Excited to work in the system – I only do Health Risk Assessment (HRA) so it will be nice to have all in the same system.
- The Dashboard is user friendly.
- It will be so nice to do the same assessment as the counties have been doing since we'll all be working in the same system.
- The dual screen list of items on the right and “Completion Requirements” list is user friendly

# What are Some Frustrations?

- Learning curve is steep
- Lots of training/guidance documents; hard to keep track of them all
- Many workarounds; hard to remember them all
- Challenges with learning online/offline functionality
- Difficult to get data out of the system (MCOs)

- [Rolling launch stats](#)

# Vision for the Future

- Adding Moving Home MN forms and users (Money Follows the Person)
- Continue to transfer e-docs into system such as financial eligibility forms used for Alternative Care program
- Person and provider access
- Lead agency access to their own data (i.e. APIs)
- Integration with MMIS (Medicaid Management Information System)
- Replace local case management notes systems

# Lessons Learned: What Other States Should Know

- Define roles between vendor and state early
- Document key decisions and agreements in writing between vendor and state
- Policy specific use cases are critical, not just functional use cases
- Spend time on change management with project staff as well as end users; engage end users in testing and other aspects of development
- Develop a governance group to assist with prioritization of system changes; include users in the governance group
- Define configuration vs customization with State staff
- Ensure your maintenance & ops plan is complete before launch

# Lessons Learned: CMS Certification

- Plan early
- Joint workplan between business and IT for CMS requirements
- Ensure asks of vendor are in contract to avoid additional costs
- Obtain resources for certification that are outside project
- Clarity with CMS on deliverables and due dates

- [Demo from the UAT site](#)

# Thank You!

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