



Executive Office of Health and Human Services

Strategic Plan for 2022 – 2030

September 2024 Update

Submitted By:

Richard Charest, Secretary of Health and Human Services

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I. Executive Summary

Advancing outcomes, increasing accountability, and stabilizing systems through planning.

The need for our state to be able to support Rhode Islanders and their families each and every day has never been more apparent than now, in the aftermath of a global infectious disease pandemic. Since the formation of the Executive Office of Health and Human Services (EOHHS) in 2006, Rhode Island has experienced changes to and pressure testing of its health and human services systems, jeopardizing vulnerable populations, stressing our healthcare systems, and challenging the public health system's ability to provide essential services. Moving forward this year, EOHHS will continue our focus on advancing outcomes, increasing accountability, and stabilizing systems through planning to achieve our strategic priorities. We will work together to strengthen and support the state's health and human services system to save lives and protect against both known and emerging challenges that can make being healthy, safe, and well on a daily basis difficult for so many of our Rhode Islanders.

Building on the [accomplishments](#) of the past year, this internal strategic plan serves as an eight-year, inward-facing framework to continue the implementation of Governor McKee's 2030 Plan and 2024 Secretariat priorities. Whether managing the state's health care system and Olmstead planning initiatives, strengthening the state's healthcare workforce, or addressing homelessness, the behavioral health needs of children and adults, the opioid epidemic, or an aging population - the purpose of this document is to harmonize, in one place, EOHHS' current and projected activities that align with our mission, vision, and organizational aspirations.

Establishing EOHHS' Strategic Plan formalizes the agency's intent to continually evaluate and adjust the strategic direction of EOHHS, given our strategic priority-based approach and monitoring of emerging challenges. Adjustment and alignment of our key programs and activities can inform additional planning needs, generate performance results, evaluate risks, influence legislative approaches, justify additional needs within budgets, and advance research and evaluation agendas. By doing so, EOHHS aims to clearly demonstrate the value of our work and progress made towards our goals, in line with Governor McKee's Rhode Island 2030 plan, to improve the lives of all Rhode Islanders. The remainder of this plan reiterates the vision for the future state of our health and human services system and delineates key EOHHS activities for the next several years.

RICHARD CHAREST | SECRETARY
Rhode Island Executive Office of Health and Human Services

For questions about this plan, please contact: Director of Strategy and Innovation (James.C.Rajotte@ohhs.ri.gov).

II. Preface

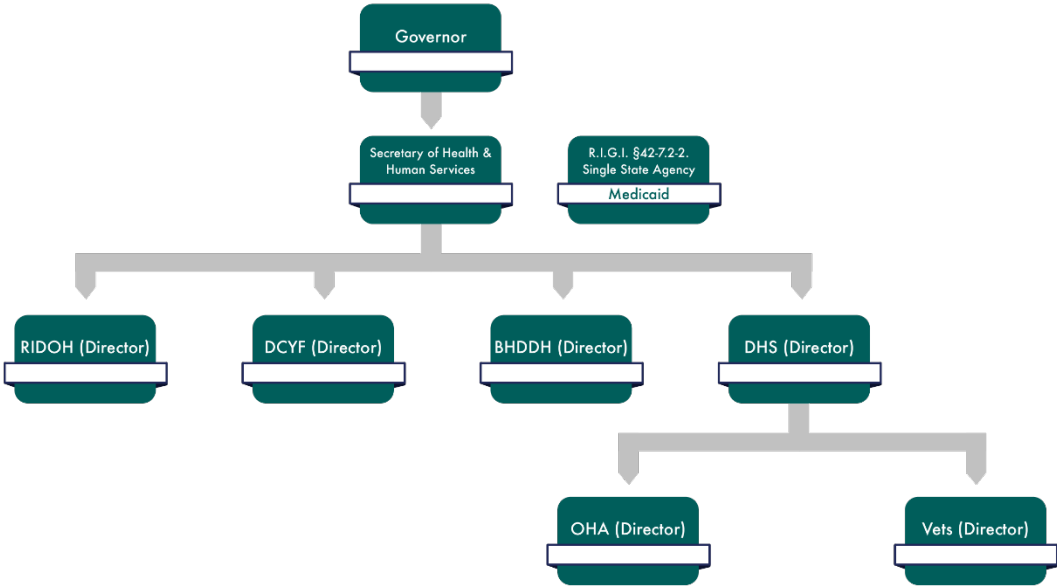
An Overview of the Executive Office

The Executive Office of Health and Human Services (EOHHS) serves as the principal agency of the executive branch of state government (R.I.G.L. §42-7.2-2) responsible for overseeing the organization, finance and delivery of publicly funded health and human services. In this capacity, EOHHS convenes a Health and Human Services Cabinet to establish priorities and ensure progress toward state-wide health and human services goals. The agency mission is to foster and strengthen a community-driven, equitable, comprehensive, responsive, and high-quality health and human services system in Rhode Island.

EOHHS directly administers the State Medicaid Program and provides strategic support and direction to Rhode Island's other health and human services agencies, including:

- Rhode Island Department of Health (RIDOH);
- Department of Human Services (DHS);
- Department of Children, Youth, and Families (DCYF);
- Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals (BHDDH);
- Office of Health Aging (OHA); and
- Office of Veterans Services (VETS).

EOHHS and its member agencies provided direct, safety-net services to over 350,000 Rhode Islanders in every city and town, every day. Collectively, these agencies also ensure an array of regulatory, protective, and health promotion services to Rhode Island's communities. Health and human services benefits represent \$6.3 billion in spending per year, or over 40 percent of the entire state budget, thus requiring a robust strategic plan to guide the work of the agency and its member agencies.

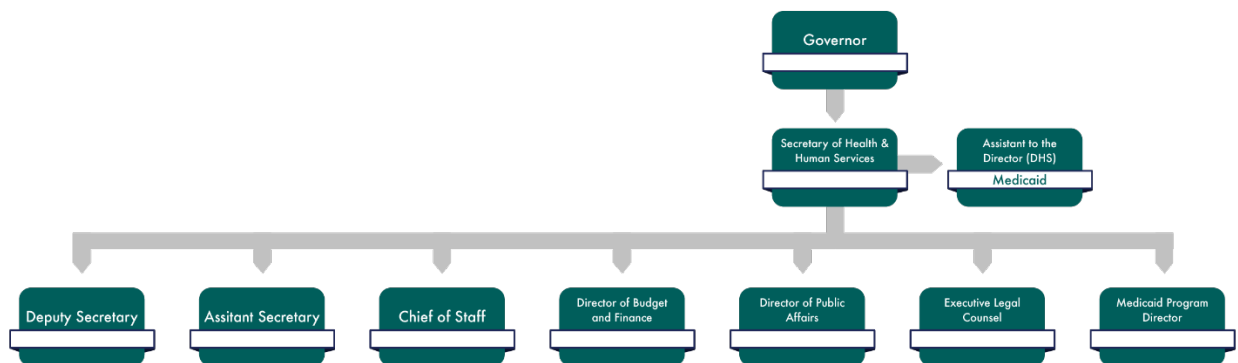


In addition to providing strategic guidance and oversight of the Departments contained within the Secretariat, EOHHS is comprised of two **programs**: (1) Central Management and (2) Medicaid Benefits Administration. The following comprises the two EOHHS programs:

1) Central Management:

EOHHS is organized into ten “core function” divisions in addition to Medicaid. Each division consists of teams that work toward specific objectives that support our organizational mission and priorities. Continued alignment of organizational resources to create capacity for these core functions is an ongoing process.

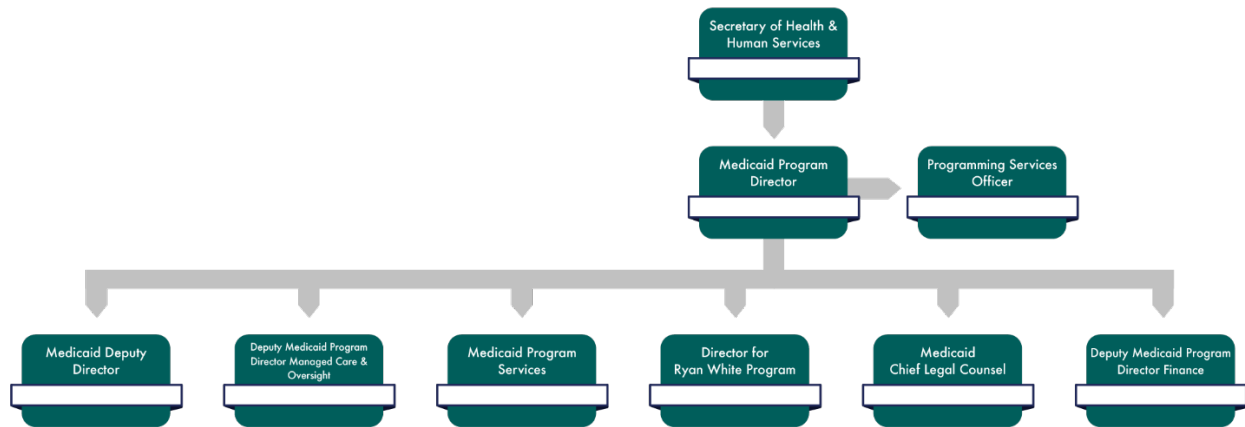
- Assistant Secretary—including:
 - Strategy and Innovation
 - Health and Human Services Policy
 - Healthcare System and Workforce Planning
 - Overdose Response Coordination
 - Race Equity and Community Engagement
- Chief of Staff—including:
 - Internal Operations and Interagency Support
 - Project Management Support (and Interagency Special Projects)
 - Legislative and Constituent Affairs
 - Data Integration and Analysis
- Central Management (Budget and Finance)
- Public Affairs
- Executive Legal Counsel



2) **Medicaid Benefits Administration:**

EOHHS is responsible for ensuring access to high-quality, cost-effective Medicaid funded services, coordinating the organization, finance, and delivery of those services statewide—in addition to administering the program in accordance with federal and state laws and regulations. EOHHS is also the principal agency in the executive branch with responsibility for implementing Rhode Island's Section 1115 Waiver Demonstration and the Medicaid State Plan, which provide the necessary federal authorizations to operate the program. The Medicaid Program is currently organized to include the following major units:

- *Medicaid Deputy*
- *Medicaid Finance, Planning, and Policy*
- *Medicaid Compliance*
- *Managed Care and Contract Oversight*
- *Program Operations*
- *Clinical Operations and Programs*
- *Long-Term Services and Supports*
- *Technology and Systems Development*



Note: Organizational charts are living documents and may change between plan updates.

III. Future State of Health and Human Services

To provide context for the EOHHS Strategic Plan, this section presents the mission and vision of the agency. To reinforce EOHHS' commitment to seeking a future state for improved health and human services, guiding principles, core values, and an organizational aspiration have been developed.

Mission and Vision

The following **mission** statement of EOHHS has been established:

Our mission at EOHHS is to foster and strengthen a community-driven, equitable, comprehensive, responsive, and high-quality health and human services system in Rhode Island.

The strategic plan fortifies the mission in two respects. First, the need to advance the quality and comprehensiveness of vital services is reflected within our mission and strategic plan. Second, the health and human service system in Rhode Island must be community-driven and responsive to the complex and shifting needs of Rhode Islanders, requiring not just the fair delivery of such services, but the design and execution of equitable services for consumers.

EOHHS also has a **vision** statement:

Resilient, equitable, and just communities nurturing the health, safety, wellbeing, and independence of all Rhode Islanders.

In this vision, EOHHS aims to operate in partnership with communities to center and advance equity, resilience, and justice for all community members. In this vision, Rhode Islanders are thriving in opportunity that promote health, safety, wellbeing, and independence and minimize the need for safety-net interventions. To reach this vision and provide Rhode Islanders with the keys to a bright and successful future, interagency alignment remains essential as we recover from unprecedented times and focus on

OUR VISION
Resilient, equitable, and just communities nurturing the health, safety, wellbeing, and independence of all Rhode Islanders.

OUR MISSION
To foster and strengthen a community-driven, equitable, comprehensive, responsive, and high-quality health and human services system in Rhode Island.

strengthening the core functions of our health and human services delivery system. This plan assumes and builds upon these tenets.

Guiding Principles and Core Values

EOHHS recognizes the importance of having **guiding principles** that provide a foundation for how the organization performs the essential work associated with achieving a comprehensive health and human services system in Rhode Island. To maintain fidelity to EOHHS' vision, the following three guiding principles have been adopted across the enterprise:

- *Listening to consumer, provider, and community voice to improve outcomes is critical;*
- *Ensuring choice and being responsive to the uniqueness of every individual remains a priority; and*
- *Achieving equity for all in our systems is a result of collaborative policy and decision-making.*

These three guiding principles are the basis for EOHHS' **core values**. These core values depict the organization's character and sets expectations about business behavior. EOHHS's three core values are:



1. **Voice:** Ensure that the voices of our communities are heard and respected without assuming we know what is best. Intentionally involve community members in programs and policies from the onset and purposefully ask "what is needed?" throughout the process. Create a new balance of power by committing to transparency, accountability, and partnerships.
2. **Choice:** The needs and aspirations of individuals, families, and community are heard, valued, and respected. The whole person, the family unit, and the community in which they live are recognized. Policies and systems have options that allow people to exercise choice and make healthy decisions.
3. **Equity:** Ensuring that all Rhode Islanders have the resources and opportunity to achieve their full potential. Meeting the needs of all people regardless of gender, gender identity, sexual orientation, race/ethnicity, age, and disability status. Asking "what role, if any, is race, racial discrimination, and social injustice playing in our decision making?"

Organizational Commitment

Articulating what EOHHS looks like once a vision is realized is important for ensuring the organization is working collectively to achieve a common ambition. Through an overarching commitment highly effective, mission driven EOHHS can be conceptualized and communicated to others. The organizational aspiration of EOHHS is denoted here:

EOHHS aspires to coordinate, administer, and safeguard the highest quality health and human services system in the country while providing exemplary strategic support and direction to Rhode Island's Health Cabinet—and in partnership with the EOHHS Independent Advisory Committee. This includes:

- *Facilitating collective impact across agencies improves outcomes on the local level.*
- *Planning across sectors and systems reduces siloes, barriers, and impediments to care.*
- *Promoting public health and the need to address social determinants of health is vital.*

- *Assisting families in escaping poverty requires an all-hands-on deck approach.*
- *Protecting children, aging adults, and the differently abled as a programmatic focus.*
- *Nurturing quality of life, including physical, behavioral, and social health.*
- *Providing financial stewardship, sharing best practices, and promoting innovation.*

EOHHS's commitment is one of the main influencers of the strategic intent developed by leadership to assist in achieving an improved future state for our health and human services system. In coordination with the **EOHHS Independent Advisory Committee**, EOHHS and its member agencies aim to deliver an effective array of regulatory, protective, financial, analytic, economic support, health promotion, and healthcare services to Rhode Islanders.

Rhode Island's Health and Human Services Cabinet Members:

- *Secretary, Executive Office of Health and Human Services (EOHHS)*
- *Director, Medicaid Program*
- *Director, Behavioral Health, Developmental Disabilities, and Hospitals (BHDDH)*
- *Director, Department of Children, Youth, and Families (DCYF)*
- *Director, Department of Human Services (DHS)*
- *Director, Rhode Island Department of Health (RIDOH)*
- *Director, Office of Healthy Aging (OHA)*
- *Director, Office of Veterans Services (VETS)*
- *Commissioner, Office of the Health Insurance Commissioner (OHIC)*
- *Commissioner, Office of the Post-Secondary Commissioner (RIOPC)*
- *Director, Department of Labor and Training (DLT)*
- *Director, HealthSource Rhode Island (HSRI)*



EMPOWER



PROMOTE



PROTECT

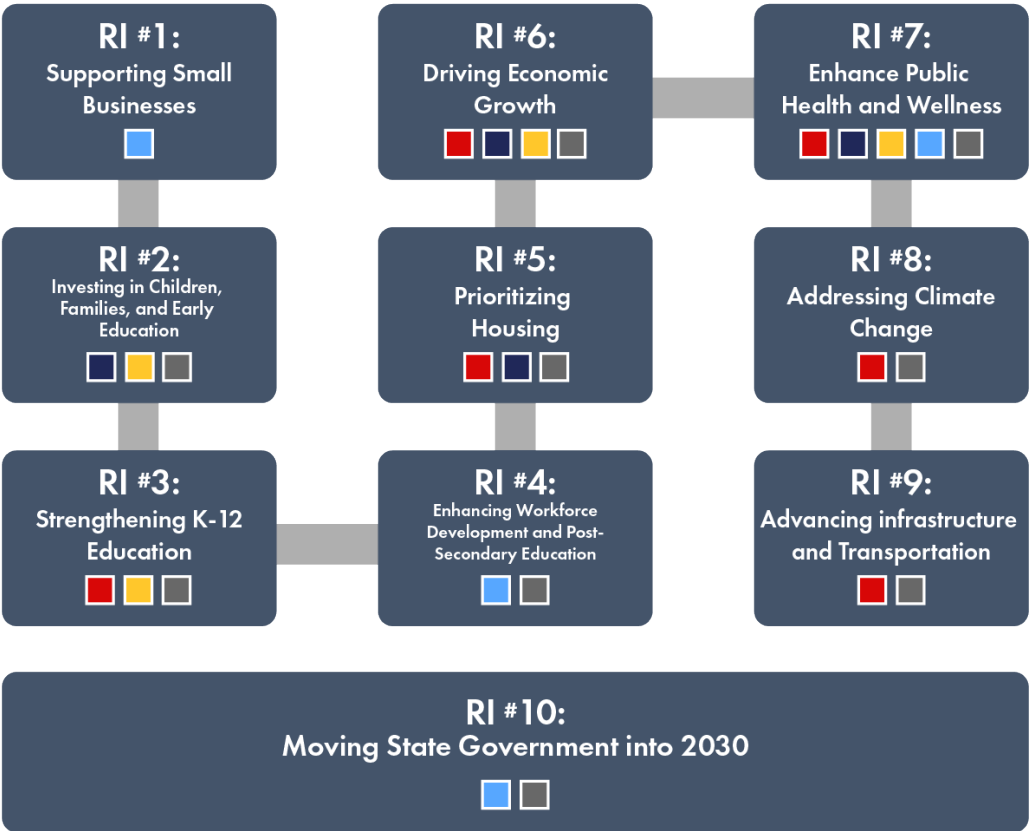
IV. Current State of Health and Human Services

This section identifies EOHHS' approach to strengthening the health and human services system while simultaneously mitigating the many challenges that can inhibit the Secretariat's ability to fully sustain previous efforts and advance the organization's progress towards the outlined future state.

Rhode Island 2030 Aims

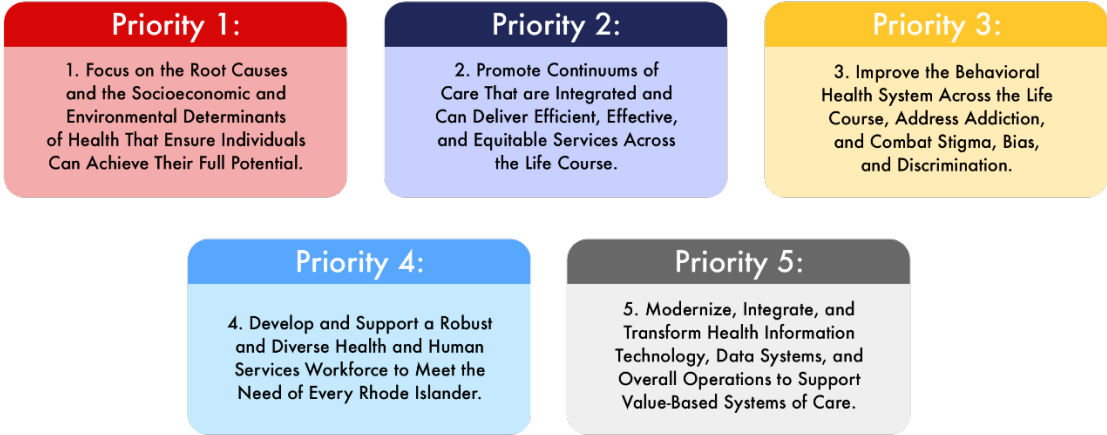
The Offices of the Governor and Lieutenant Governor have provided clear strategic direction in *Rhode Island 2030*, to guide Rhode Island's "once-in-a-generation opportunity to build a more resilient, prosperous, and equitable state for all." To guide the State's economic recovery and drive our health and human services system to meet the needs of everyone, the following Rhode Island 2030 Aims anchor our approach:

Supporting Rhode Island 2030



Health and Human Services Strategic Priorities

While some challenges from years past may remain, new challenges—such as a global coronavirus pandemic, housing crisis, and a vast array of disparities—have arisen that require an increase in strategic direction and coordination within the State’s health and human services community. To mitigate the effects of these challenges, EOHHS uses a **strategic priorities-based approach** for planning and resource allocation. The following priorities-based approach is being applied to guide our work through 2030 and the alignment is shown with the colored boxes in the “Supporting Rhode Island 2030” graphic above.



1. *Focus on the Root Causes and the Socioeconomic and Environmental Determinants of Health That Ensure Individuals Can Achieve Their Full Potential.*

Our health and human services system must proactively plan for and respond to the changing and evolving socioeconomic and environmental factors—including systemic oppression—that limit health and wellness.

2. *Promote Continuums of Care That are Integrated and Can Deliver Efficient, Effective, and Equitable Services Across the Life Course.*

Our health and human services system must develop levels of care that are high-quality and less restrictive while ensuring equity in service delivery—spanning from Rhode Island’s children and youth to our adults and older adults and be inclusive of all abilities across the life span.

3. *Improve the Behavioral Health System Across the Life Course, Address Addiction, and Combat Stigma, Bias, and Discrimination.*

Our health and human services system must safeguard mental health, integrate behavioral health and primary care, reduce overdose death and injury, and eliminate the stigma associated with addiction by embracing lived experience, ensuring access to treatment, supporting recovery, and building social cohesion in our communities.

4. *Develop and Support a Robust and Diverse Health and Human Services Workforce to Meet the Need of Every Rhode Islander.*

Our health and human services system must collaborate with partners and providers across the state to stabilize, build, and diversify the workforce to drive the economy, improve service delivery, and expand the reach of programs and interventions to those most marginalized.

5. *Modernize, Integrate, and Transform Health Information Technology, Data Systems, and Overall Operations to Support Value-Based Systems of Care.*

Lastly, EOHHS must work diligently to use data, technology, and customer experience to evaluate programs and support policies that shift systems of care to value-based models.

In addition to these strategic priorities, EOHHS continues to promote a **health-in-all-policies approach** to combat emerging threats, recover from challenges, and maximize collective impact. This approach is founded in interagency collaboration and integrates as well as articulates health considerations into policymaking across sectors to improve the health of all communities and people. For example, this approach is beneficial in the following scenarios:

- *Emerging Challenges to the Health and Human Services System*—including potential challenges such as health system solvency, healthcare mergers, workforce crises, homelessness, the opioid epidemic, eroding public health infrastructure, or an aging population.
- *Recovery from Service Interruptions and Public Health Emergencies*—including disruptions caused from the coronavirus pandemic, implementation of new technologies, or unexpected closures of essential service organizations.
- *Maximize Collective Impact of Partnerships to Increase Local Community Resiliency*—including aligned investments across sectors and whole-of-government collaboration to further Accountable Entities, Health Equity Zones, Regional Prevention Coalitions, and other place-based solutions.

- *Improving the Economic Mobility of Rhode Islanders*—including through health insurance coverage, human services and child welfare programs, public health assistance, and behavioral health programs.



V. Interagency Goals for Achieving Excellence

This section of the EOHHS Strategic Plan outlines the five strategic priorities of both the health and human services system and the organization. These priorities, when addressed together, bolster the agency’s ability to make significant achievements towards improved health, and more specifically, improved health for those most marginalized—our racial and ethnic minorities, disability populations, and Rhode Islanders with diverse sexual orientations and gender identities.

Conditions for Success

To advance the health and human service system in Rhode Island, EOHHS has identified several factors to which adherence are integral for successful execution of its strategy and related activities. The following list of **conditions for success** has been developed:



Key Interagency Goals

For each strategic priority, **key interagency goals** have been established jointly in 2022 by the agencies across the health and human services system that depict initiatives that are essential to move EOHHS towards the articulated future state of excellence. To this end, the following goals—mapped by HHS Priority, Lead Agency, and *Rhode Island 2030* Aims (see page nine)—have been identified and are being implemented across our health and human services system:

HHS PRIORITY 1: Focus on the root causes and the socioeconomic and environmental determinants of health that ensure individuals can achieve their full potential.											
Strategic Goal	Agency	RI1	RI2	RI3	RI4	RI5	RI6	RI7	RI8	RI9	RI10
Improved foundational social determinants of health	BHDDH										
Launching the Family First Prevention Services Act (FFPSA) Plan for children, youth, and families	DCYF										
Enhance access to essential services and address root causes of socioeconomic challenges	DHS										
Centers for Medicare and Medicaid Services (CMS) 1115 Waiver renewal and strategic planning	EOHHS										
Maximize financial assistance to increase access to health insurance	HSRI										
Re-procurement of The Point focusing on person-centric options	OHA										
Continued implementation of Affordability Standards	OHIC										

Improving the well-being of “at-risk” veterans	VETS										
Continuing quality resident care at the RI Veterans Home	VETS										

HHS PRIORITY 2:
 Promote continuums of care that are integrated and deliver efficient, effective, and equitable services across the life course.

Strategic Goal	Agency	R11	R12	R13	R14	R15	R16	R17	R18	R19	R110
<i>Accessible, high-quality, safe, effective, person-centered service systems</i>	BHDDH										
<i>Procuring all service programs for a comprehensive service array</i>	DCYF										
<i>Streamline access to services through improved eligibility, enrollment, and recertification processes</i>	DHS										
<i>Integrate service delivery to ensure continuity and equity across programs</i>	DHS										
<i>Managed care re-procurement and transition planning for duals</i>	EOHHS										
<i>Maintain low levels of uninsurance throughout PHE unwinding</i>	HSRI										
<i>Exceed pre-pandemic marketplace enrollment</i>	HSRI										

Develop Strategic Plan on Aging and Older Adult Data Fact Book	OHA											
Support LTSS No Wrong Door implementation	OHA											
Leverage regulatory structure to achieve delivery system reform	OHIC											
Continue to ensure adequate coverage for COVID testing, treatment, and care	OHIC											
Quality customer service at the RI Veterans Memorial Cemetery	VETS											
COVID-19 reintegration and recovery efforts	RIDOH											

HHS PRIORITY 3:
 Improve the Behavioral Health System Across the Life Course, Address Addiction, and Combat Stigma, Bias, and Discrimination.

Strategic Goal	Agency	R11	R12	R13	R14	R15	R16	R17	R18	R19	R110
Robust substance use prevention, awareness, outreach, and recovery efforts	BHDDH										
Implement a continuum of psychiatric treatment programming for adolescents	DCYF										
Strengthen behavioral health access in social programs	DHS										
Implementation of overdose programs and Certified Community Behavioral Health Clinics (CCBHC)	EOHHS										

Increasing behavioral health access and ensuring parity with medical care	OHIC											
Overdose and other emergency epidemic management	RIDOH											

HHS PRIORITY 4:

Develop and support a robust and diverse health and human services workforce to meet the needs of every Rhode Islander.

Strategic Goal	Agency	RI1	RI2	RI3	RI4	RI5	RI6	RI7	RI8	RI9	RI10
Stabilizing and growing the external and internal workforce	BHDDH										
Achieving accreditation from the Council on Accreditation	DCYF										
Build and sustain a skilled, resilient, and diverse workforce	DHS										
Strengthening the Adult Protection Services (APS) unit	OHA										
Strengthen commitment to veterans and serve as central resource hub	VETS										
Agency operational transformation and Public Health Accreditation	RIDOH										

HHS PRIORITY 5:

Modernize, integrate, and transform health information technology and data systems to support value-based systems of care.

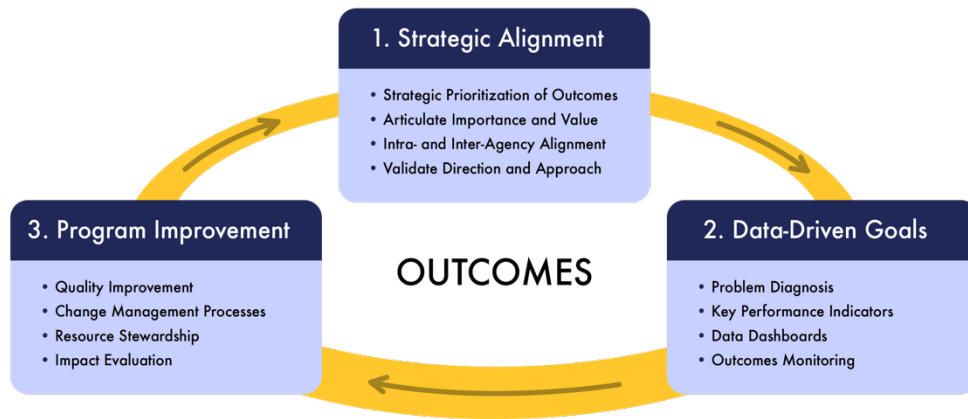
Strategic Goal	Agency	RI1	RI2	RI3	RI4	RI5	RI6	RI7	RI8	RI9	RI10
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- *Measuring outcomes and improving the efficiency of processes*
- *Focusing on strategy alignment, equity lens, and community-engaged design*
- *Reducing risk and waste using data-driven decision-making*
- *Improving cross-functions and cross-agencies collaboration*
- *Ensuring fiscal stability and sustainability plans for mission-critical efforts*

Pulse: Collective Accountability for Outcomes

PULSE is our opportunity to facilitate these items working together regularly and in a standardized way to achieve outcomes.

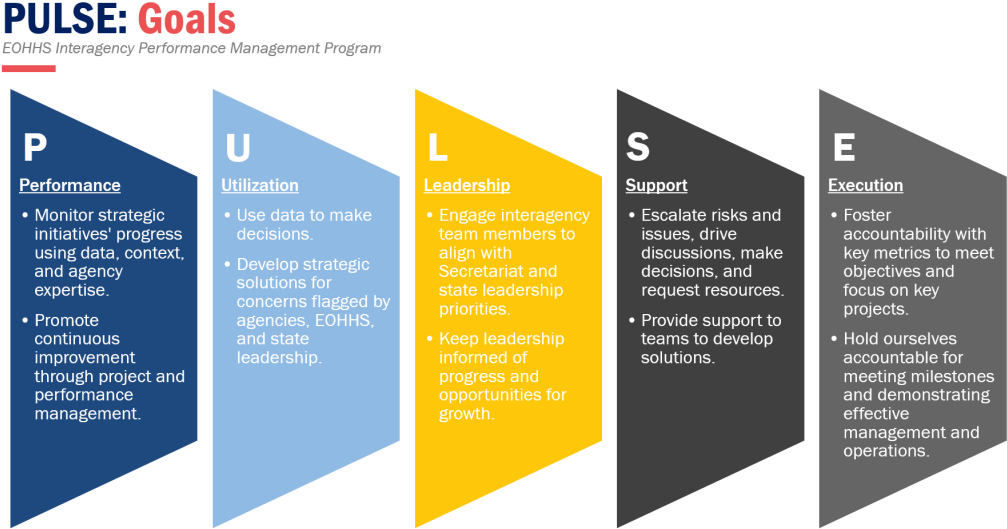
EOHHS Interagency Performance Management Program



The Performance, Utilization, Leadership, Support, and Execution (PULSE) framework is largely driven by the need to define project-specific goals and success measures, in partnership with the Departments, for Secretariat review. PULSE is the enterprise-wide performance management program EOHHS leads to monitor and support the performance of its sister agencies and interagency strategic initiatives. PULSE uses data-driven decision-making, leadership engagement, and interagency collaboration to achieve key objectives. PULSE creates a collaborative and standardized system to empower us to achieve the goals dictated the Governor, the Secretary, the EOHHS Directors Meeting, and EOHHS's statutory mandate. This approach aligns with and satisfies the Office of Management and Budget's performance requirements to avoid duplication. At EOHHS, the PULSE framework has two approaches:

- *Agency-focused, for RIDOH, BHDDH, DCYF, and DHS*
- *Problem-driven, such as Overdose*

The process starts with a review of existing Performance and a diagnosis of problems by Utilizing data. Then Leadership engagement to obtain strategic input and the provision of Supports to develop continuous quality improvement. Co-development of solutions occurs next. Lastly, the process concludes with the Execution of recommended actions (PULSE). The goals of each PULSE vary by agency and topic presented, but generally fall within one of more of the following:

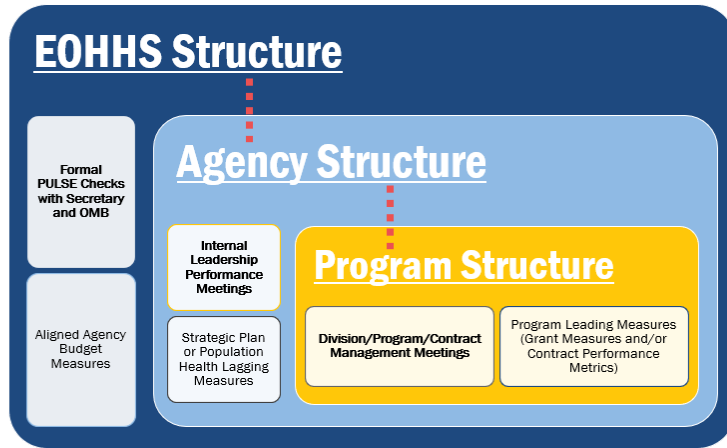


In a desire to move our health and human services systems towards being a **more proactive and less reactive system**, the focus of performance improvement has shifted to planning for performance, alignment with strategic priorities, facilitation of project and resource management, interagency collaboration and supports for action item completion, and a formal and informal hybrid approach to convening. The following best practices assist with outcomes-based facilitation:

PULSE: Best Practices for Outcomes-Based Facilitation

EOHHS Interagency Performance Management Program

- PULSE works best when Agencies layer this work onto existing performance management structures and measurement approaches that become a fabric of agency operations.
- Aligning measures with an agency's strategic plan, specific topical strategic plans, or population health goals (while considering existing reporting requirements) helps reduce duplication of efforts.
- For example, if Formal PULSE Checks occur three times a year, then Department-wide performance management meetings might occur six times a year, and Program/Contract-specific performance meetings might occur monthly.



Strategic priorities, programs, projects, and outcomes metrics are all essential components for measuring performance. PULSE is our opportunity to bring these pieces together, regularly and standardized and show how they work in tandem.



Lastly, EOHHS has the following budget **performance measures** to monitor success towards outcomes relate to the agencies five strategic priorities. Please note: these measures are currently under review for additional revisions in partnership with the Office of Management and Budget.

Strategic Priority	Measure
HHS 1	Number of Non-Emergency Medical Transportation Complaints by Type
HHS 2	Timeliness of Early Intervention Data

HHS 3	Number of Overdose Fatalities and Non-Fatalities
HHS 4	Percent Change in Employment by Agency Type
HHS 5	Percent of Behavioral Health Services Delivered Using Telehealth

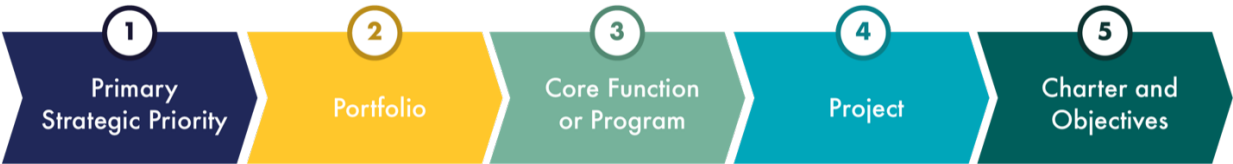
VI. EOHHS Objectives, Projects, and Activities

This section of EOHHS' Strategic Plan describes both the key objectives—currently in development—and major activities, projects, and initiatives that are specific to EOHHS.

Within each priority project, one or more *SMARTIE objective(s)* and annual targets can be created as a means to manage and govern a grouping of activities for the duration of this plan. Developing *SMARTIE* objectives takes time, requires orderly thinking, and helps capture the expected results from program activities.

SMARTIE objectives are specific, measurable, attainable, relevant, and time-bound, inclusive, and equitable.

As the Strategic Plan is completed with the insertion of objectives, responsible staff will have an improved understanding of how a given activity fits into larger organizational goals and aspirations. To summarize this **organizational hierarchy**, a simple reference point is provided below:



A full list of EOHHS priority projects by portfolio and core function/program that are aligned to each strategic priority is available upon request.

VII. Strategic Plan Implementation and Maintenance

This section of EOHHS’s Strategic Plan serves as guidance for further implementation of the strategic framework set forth. Within this section, information about utilizing this plan, including the provision of progress reports is addressed. Lastly, recommendations pertaining to additional plan revisions as well as dissemination to EOHHS staff are provided.

Strengthening Our Core Functions

EOHHS focuses on improving agency performance, achieving greater efficiency across agencies, and breaking down silos between them. Through strategic support and regular oversight, and by ensuring alignment between core Secretariat and Medicaid functions, EOHHS facilitates the modernization of existing systems, the maximization of resources, and the streamlining of service delivery and payment to promote a high-quality, cost-effective health and human service system for Rhode Islanders. EOHHS has recognized the need for formalize and strengthen the following **core functions** internally for a robust interagency implementation of this strategic plan.



- Central Management (Budget and Finance)**

Central Management (Budget and Finance) is responsible for fiscal analysis, preparation, submission, and monitoring of the agency’s operations and capital budgets, fiscal controls, cash management, and federal disbursements and reporting. The fiscal role has evolved over the last several years to reflect the budget policies and priorities of leadership and to anticipate, rather than react to, continuing structural deficits. This has required the Office to work closely with Medicaid Finance, Policy, and Planning, as well as agency and Department staff,

in evaluating the fiscal implications of policy and budget initiatives and in preparing testimony and reports for budget hearings. Under the EOHHS Director of Budget and Finance, teams across the Secretariat convene regularly to standardize and strengthen finance (e.g., audit response, actuals tracking, and reporting) and budget functions (e.g., preparation, alignment, and tracking), to ensure alignment with EOHHS' statutory responsibility to ensure efficient and effective maximization of funds.

- **Public Affairs**

The Public Affairs Office focuses on strategic communications and media relations, issue and crisis management, and digital, social and paid media management. The team provides support for coordination across the EOHHS agencies to develop, implement, and invest in sound policies and programs that meet Rhode Islanders' needs. The Office works to ensure these investments are informed by the people who they are designed to serve, and that Rhode Islanders know what programs are available. This Office strengthens Rhode Island's reputation as a leader and innovator in the health and human services space.

- **Executive Legal Counsel**

The Office of Executive Legal Counsel encompasses the centralization of legal services across the four agencies under the Secretariat. Attorneys in the Office serve as in-house counsel to EOHHS and its departments with responsibilities that include representing EOHHS and its departments in legal hearings and proceedings, conducting labor hearings and arbitrations, evaluating Medicaid resources for eligibility purposes, reviewing documents for Access to Public Records Act (APRA) submissions, reviewing annual accountings for special needs trusts, and responding to subpoenas. The Division oversees the Appeals Team, which is the impartial entity designated to handle administrative level appeals for DHS, DCYF, BHDDH, HSRI, and EOHHS. The EOHHS Appeals Team schedules approximately 100 hearings each week. The attorneys draft and review contracts, review pending legislation and regulations, and assist in the development of new procurements. The EOHHS attorneys recoup significant funds for the state through probate court estate recoveries for Medicaid expenses and third-party liability recoveries for Medicaid expenses and recoupment.

- **Legislative and Constituent Affairs**

The Office of Legislative and Constituent Affairs aligns legislation with EOHHS's priorities and policies. The team coordinates all legislative, interagency, and stakeholder interactions, partnerships, and presentations including legislative testimony in cadence with the Governor's policies and priorities. Additionally, this team triages elevated and more complex constituent affairs inquiries related to

EOHHS, all our sister agencies, Medicare and Medicaid. The team also works to provide administrative and policy support to numerous boards and commissions, and collaborates with federal delegation staff, as requested.

- **Strategy and Innovation**

The Office of Strategy and Innovation conducts emergent, short-term, and longer-term strategic design, planning, and evaluation toward the shared health and human service priorities and interagency goals—and the agency's commitment to eliminate racial, ethnic, and other disparities. The Office's work includes advancing our framework to shift investments towards equity and community, building a comprehensive housing support services strategy that prioritizes interagency alignment and community involvement, innovations such as with Medicaid renewals outreach and oral health systems, transformative initiatives such as Olmstead Planning and strengths-based organizational development, and interagency continuous quality improvement and performance improvement as part of program development throughout the Secretariat. The Office also provides strategic support to agencies to achieve shared goals and supports the facilitation of engagement, change, and innovation.

- **Health and Human Services Policy**

Office of Health and Human Services Policy focuses on a broader set of strategic initiatives, including policy research, development, and analysis, in service of EOHHS' major priorities and issues critical to our interagency and public-private partnerships. Activities include legislative, regulatory, and licensing policy alignment on issues that include strengthening Rhode Island's behavioral health; increasing overall healthcare quality and access, addressing health-related social factors such as access to housing, food security, transportation, etc. The key policy principles of this Office include: (1) Being intentional and clear with policy language (e.g., using language that highlights a person-centered approach to policies and decisions); and (2) Embedding policy mechanisms across HHS agencies and EOHHS core functions to align initiatives, provide reciprocal support, and strengthen collective policy communication and understanding.

- **Healthcare System and Workforce Planning**

The Office of Healthcare System and Workforce Planning is responsible for our core function of data-driven, interagency, and public/private Health Care Planning. This includes EOHHS' work to address cost trends; create a stronger hospital and home and community-based services system; build comprehensive behavioral health systems of care for children and adults; and align healthcare workforce transformation and development across the Secretariat and State Government. This Office abides by key policy principles, including: (1) Creating policies and

policy guidance that serve a diverse audience and account for the uniqueness of each Rhode Islander, meeting consumers where they are; and (2) Enacting statutory change policies that are informed by data and a collective of diverse voices, to avoid policy changes and decision-making based on the 'loudest voice.' The Office of Health Care System and Workforce Planning is charged with implementing Healthcare System Transformation Planning. The Office is implementing detailed, in-depth interagency and public/private planning within five key health care sectors: Behavioral Health, Health-Related Social Factors, Hospital, Long-Term Care and Healthy Aging, and Primary Care.

- **Overdose Response Coordination**

The Office of Overdose Response Coordination is responsible for building on the existing work and successful initiatives of the Governor's Overdose Task Force, state agencies, and community partners to contain this epidemic. The team oversees the development, implementation, and evaluation of a comprehensive strategy to combat addiction and overdose. Additionally, the Office coordinates the Governor's Overdose Task Force and related workgroups, convenes the Opioid Settlement Advisory Committee, and provides oversight to the Opioid Settlement and Opioid Stewardship abatement funds in alignment with all other resources.

- **Race Equity and Community Engagement**

The Office of Race Equity works to implement plans for equity at EOHHS to remove systemic barriers and provide equitable access to opportunities and benefits to Rhode Islanders. Staff do this by improving policy, practices, and operations through collaboration, education, and professional development across our health and human service agencies. EOHHS is working toward achieving this goal by uniting its sister agencies around four areas of focus: (1) Organizational and Policy Changes, (2) Leadership and Professional Coaching, (3) Staff Training and Agency Culture Shift, and (4) Outreach and Community Engagement.

- **Internal Operations and Interagency Support**

The Office of Internal Operations and Interagency Support at EOHHS reports to the Chief of Staff. Internal Operations consists of executive meeting management, liaising with human resources, talent development, and internal process management. A second area of focus is on resource management, including space and facility operations, building management and security, internal emergency response, and continuity of operations planning. In addition, the Office oversees issues management across interagency operations, including partnering with DOA, OMB, and Agency Directors to problem solve and craft solutions to develop and maintain effective management systems and practices that ensure the effective, timely, and cost-effective implementation of risk

management strategies. Lastly, the Office serves as a thought partner for project managers and policy makers in requests for training and budget resources.

- **Project Management Support**

The Office of Project Management Support has instituted governance around project management to track, report and oversee critical EOHHS and interagency work. The team has instituted a monthly reporting cycle to track the status of project milestones, risks and issues. There are currently 29 individuals reporting in on 70+ projects across all five of EOHHS Strategic Priorities. Tracking projects includes chartering and approval of new projects and ad hoc “deep dive” project or portfolio briefings for leadership as needed. The current process provides leadership oversight to support ongoing management of complex and sometimes interagency initiatives. In addition to supporting leadership, the team assists project managers in navigating agency processes and in resolving open issues. The team is currently piloting software to improve tracking and reporting and to expand to a broader scope of projects. Implementation will offer improved collaboration and standardized project management tools, more timely and accessible reporting and enhanced governance for chartering, initiating and closing projects.

- **Data Integration and Analytics**

The Office of Data Integration and Analytics leverages an integrated data system spanning multiple domains to support leadership decision making and promote accountability across state agencies to better serve Rhode Islanders. As Health and Human Service programs become increasingly more complex, it is imperative to develop interagency data systems that can be seamlessly linked to one another and contain information that is relevant to multiple agencies. The primary objective of such data systems is to streamline essential care to vulnerable populations, but the benefits also offer countless administrative efficiencies as well. The technical infrastructure is continuously enhanced to elevate data integration, expand data sharing capacity and inform data-driven decision-making. This work informs data-driven financial and operational strategies that significantly enhance overall performance.

- **Technology and Systems Development**

The Office of Technology and Systems Development is responsible for ensuring interoperability in technology that provides support to achieve operational, programmatic, and administrative goals. Through systems development and management, the Office work with agency leadership and staff to support policy and programmatic implementation, benefits administration, and overall operational issues management. The Office develops and deploys technology

solutions, systems, and data sharing mechanisms to streamline and support benefits eligibility determinations, enrollment, recertification, and claiming, self-service customer operations, health information technology utilization, and program integrity and provider compliance. The team supports special projects within and across the Secretariat agencies to implement interoperable approaches that improve operations, achieve outcomes, promote re-use, and reduce administrative burden. The Office of Technology also manages the state's health information technology platforms and supports innovation in the containment of costs and quality of services.

- **Medicaid Benefits Administration**

EOHHS is responsible for ensuring access to high-quality, cost-effective Medicaid-funded services, coordinating the organization, finance, and delivery of those services state-wide, and administering the program in accordance with federal and state laws and regulations. In addition, EOHHS is also the principal agency in the executive branch with responsibility for implementing Rhode Island's Section 1115 Waiver Demonstration and the Medicaid State Plan, which provide the necessary federal authorizations to operate the program. In the coming year, the Medicaid program's primary priorities include renewal of the 1115 Waiver Demonstration, the planning for the sunset of the Medicaid-Medicare Program by CMS, procurements of managed care, non-emergency medical transportation, and information system planning and implementation. The Medicaid Program is currently organized cross functionally and includes the following major units: (1) Medicaid Finance, Planning & Policy: which includes budget, caseload, rate setting, authority and/other regulatory provisions needed to operate the Medicaid program and administer benefits through State Plan revisions and 1115 waiver renewal, (2) Medicaid Compliance: which includes program integrity, audit and investigations, and quality assurance activities, (3) Managed Care and Contract Oversight: which includes active contract management for all managed care contracts for Medicaid and quality monitoring across the Medicaid program, (4) Program Operations: which includes Medicaid program enrollment, Medicare Payment Premium (MPP) program, Customer Resolution, and Rite Share; (5) Clinical operations and programs: which includes HIV Program, Katie Beckett program, Medicaid FFS clinical operations (behavioral health, pharmacy, and medical), (6) Long Term Services and Supports (LTSS): which includes the Office of Community Programs, home and community based services and nursing home transitions, LTSS re-design and special projects, (7) Systems & Technology: which includes day to day contract management and oversight of all technology and information systems and contracts such as the Medicaid eligibility system and Medicaid Management Information System or MMIS.

Plan Revisions and Dissemination

The strategic planning cycle is intended to be cyclical, with a new EOHHS Strategic Plan issued every three to five years—and in this case—eight years to align with *Rhode Island 2030*. Annually, an update will be provided to this plan in accordance with Office of Management and Budget deadlines and reviewed by the Executive Leadership Team. The Office of Strategy and Innovation—in partnership with the Secretary and EOHHS core functions—will lead the plan development phases for the next iteration of an internal strategic plan with significant input from senior leadership, champions, and work teams. Any revisions to the current EOHHS Strategic Plan are to be requested in writing to the Secretary for Health and Human Services. Plans, once fully developed and cleared, will be reviewed and disseminated by Public Affairs to leadership, management, and staff. In an effort to remain “green,” this plan will primarily be disseminated electronically, and a public-facing version will be created and displayed on the website.

VIII. Closing

Moving forward, EOHHS remains focused on achieving the agency’s Strategic Priorities, leading to successful transformation of our systems for the benefit of all Rhode Islanders. In the coming year, the following key initiatives will be reviewed and/or implemented:

- *Continuation of the recently established Health Care System Planning (HCSP) Cabinet and the EOHHS Independent Advisory Council to evaluate and propose specific recommendations concerning the implementation of a statewide health care system plan, including potential legislation to implement such a plan.*
- *Completion of an Olmstead Plan for Rhode Island to ensure services are adequately available to those who need them in the safest, most-appropriate, and least restrictive setting as possible as well as convening of the Olmstead Advisory Group per executive order.*
- *Renegotiation of the Medicaid 1115 Waiver with the Centers for Medicare and Medicaid Services (CMS) to pilot and evaluate innovative healthcare strategies, including but not limited to: restorative and recuperative care, home stabilization services enhancements, and health equity.*
- *Participation as one of 10 states in the newest cohort of the federal CCBHC demonstration program that offers the State an enhanced federal match rate for four years to support its implementation of the CCBHC program in October 2024.*

- Exploration of recommendations in response to [Senate resolution 3167](#) for establishing a unified system of care for children's and adult behavioral health moving forward in Rhode Island.
- Full implementation of the [OHIC Rate Review](#) increases for selected Medicaid services and continued evaluation of rates on a periodic schedule moving forward.
- Launch of the Ladders to Licensure Program that will help to increase the capacity and diversity of the health professional workforce by funding partnerships between health care providers and institutions of higher education to support staff who aspire to advance from paraprofessionals to licensed clinicians.

X. Appendices

Appendices

The following appendices have been attached to this plan:

- *Appendix I: EOHHS Strategic Approach to Core Functions*

Appendix I: EOHHS Strategic Approach to Core Functions

The following table represents the strategies EOHHS has outlined to strengthen each core agency function through 2030. By focusing on these strategies, EOHHS will maximize utilization of statutory authority, promote operational efficiency, and ultimately achieve excellence in outcomes.

Core Function	Strategies
<p>Central Management (Budget and Finance)</p>	<ul style="list-style-type: none"> • Ensuring all new budget initiatives proposed will be aligned with the Rhode Island 2030 Priorities and at least one of the five EOHHS Strategic Priorities. • Prioritizing all new budget initiatives using the following criteria: (1) sustainability needs based on the previous fiscal year; (2) natural next step for key program development; (3) major need not included in the previous fiscal year but is required to move strategic initiative forward; and (4) required match to address federally mandated regulations and policy changes. • Requiring that all savings initiatives, budget initiatives, and decision packages contain strong rationale for inclusion and/or resources that facilitate EOHHS' three Conditions of Success for the next several years. • Embedding the EOHHS Core Values of Voice, Choice, and Equity as anchoring principles within any decision package proposed for future budget years. • Redesigning, developing, and realigning budget measures to reflect our HHS Strategic Priorities and anticipated key investments over the next three to eight years. • Collaborating across government to develop, recommend, and analyze program-based and/or population-based budgets for future years (e.g., substance use budget, children's budget). • Promoting comprehensive health and human service system budget monitoring and management through interagency coordination and stewardship.
<p>Public Affairs</p>	<ul style="list-style-type: none"> • Improving community trust in EOHHS by increasing the understanding of EOHHS services and value-add, maximizing the presence and awareness of EOHHS in the community, and moving towards proactive engagement and less reactive communications. • Creating safe environments for engagement with our community that leave community members with a sense of confidence in our work. • Employing different modalities for engagement often and speaking to our audiences frequently and in various languages. • Being active, timely, interesting, and inviting with our brand, our engagements, and our key messages. • Making space for sister agency and cross-government coordination, collaboration, reinforcing public affairs activity, and co-engagement. • Ensuring our stakeholders have clear mechanism for and opportunities to continue to engage with EOHHS.

	<ul style="list-style-type: none"> Identifying and training key staff and community champions to serve as representatives of the agency at public events, on media platforms, and on boards and commissions.
Executive Legal Counsel	<ul style="list-style-type: none"> Maximizing resources for interagency legal affairs, compliance management, risk and lawsuit mitigation, and legal review services. Investing in training and professional development for legal services staff, as applicable. Developing points-of-contact for policy review related to legislation, regulations, and emergency orders. Working to create interagency legal documentation standards and to increase administrative support for legal services. Maintaining efforts focused on state recovery, public records oversight, data breach management, and other related requests. Protecting the agency by navigating potential risk-bearing by the agency and health and human services systems. Prioritizing state compliance with Federal laws and regulations in partnership with other core functions and the workforce.
Legislative and Constituent Affairs	<ul style="list-style-type: none"> Presenting a legislative agenda and subsequent proposals that enhance health and human services system priorities and project implementation in accordance with and under the direction of the EOHHS Secretary and his Executive Leadership Team. Engaging proactively with legislators—both on the State and Federal level—and constituents in a timely manner to be responsive and to offer insight and recommendations regarding legislative, policy, and regulatory proposals. Advocating for improvements in policy, necessary and required changes for programs, and increased capacity for core function and interagency infrastructure. Focusing on comprehensive stakeholder and constituent mapping, information sharing, and—in particular— thorough message development to include all appropriate audiences, especially those may otherwise be as vocal as others. Analyzing agency capacity to maintain compliance with policy in a consolidated way and make comprehensive recommendations for improvement.
Strategy and Innovation	<ul style="list-style-type: none"> Creating a shared vision with stakeholders that assists with driving meaningful, necessary, and sustainable systems and culture changes. Facilitating the development of robust, whole-of-government, and place-based strategies that focus on social determinants of health and are equitable, mutually supportive, and responsive to state partner and consumer needs. Ensuring decision-making is guided by strategy, environmental scans and research, and the application of available evidence-based best practices. Implementing performance improvement continuously across core functions, agency partners, and strategic priorities to increase collective quality, efficiency, and efficacy of employed strategies.

	<ul style="list-style-type: none"> Engaging interagency subject-matter experts to continuously monitor, customize, and adapt strategies aligned with RI 2030 aims, HHS strategic priorities, and agency goals to facilitate positive change. Leading opportunities to steward innovative approaches and pilot programs through strategic partnerships—both internally (e.g., Medicaid 1115 Waiver) and externally (e.g., Blue Meridian). Building strategic partnerships to further the reach of health and human services systems and the ability to drive policy, system, and environmental changes.
<p>Health and Human Services Policy</p>	<ul style="list-style-type: none"> Monitoring emerging trends and changes in the health and human services environment that affect overdose directly through homelessness, recovery capital, etc. Building stronger systems to expand services and build connections between transition points. Evaluating activities as a part of the Certified Community Behavioral Health Clinic (CCBHC) Federal Demonstration Project in which Rhode Island is participating, to demonstrate the effectiveness of the prospective payment process for behavioral health care. Enacting community-based and agency policies that are informed by data and a collective of diverse voices, to avoid policy changes and decision-making based on the 'loudest voice.' In addition, carrying out reviews of demographic data to highlight the extent to which there are disparities in the Rhode Island health care system by race, ethnicity, sexual orientation, gender identity, age, disability, or other disparities and a plan to eliminate those disparities. Promoting the appropriate role of technology in improving the availability of health information across the healthcare system, while promoting practices that ensure the confidentiality and security of health records.
<p>Healthcare System and Workforce Planning</p>	<ul style="list-style-type: none"> Improving regulations and licensing requirements, language, and alignment to strengthen the collective health and human services system while streamlining processes and implementation of such policies for providers and systems. Addressing the cross-cutting issues of equity, workforce transformation, value-based care, data and health information technology, and quality across all the key health care sectors. Developing robust and mutually reinforcing healthcare planning documents for system redesign efforts (e.g., the Rhode Island Behavioral Health System of Care for Children and Youth). Achieving workforce transformation by developing data-informed policies and programs to improve recruitment, training, and retention of a skilled, valued, and diverse workforce, including addressing rates and wages, improving working conditions, reducing disparities, expanding career awareness, and providing pre-employment training, workforce pipelines, continuing education, professional development, and career ladders. Assessing the state's healthcare needs and healthcare system capacity that are used to determine the most appropriate capacity of and allocation of

	<p>healthcare providers, services, including transportation services, and equipment and other resources, to meet Rhode Island’s healthcare needs efficiently and affordably.</p> <ul style="list-style-type: none"> • Goalsetting through the establishment of Rhode Island’s long-range healthcare goals and values, and the recommendation of innovative. models of healthcare delivery, that should be encouraged in Rhode Island; • Implementing healthcare payment models that reward improved health outcomes and increase efficiency. • Measuring quality and appropriate use of healthcare services that are designed to evaluate the impact of the health planning process. • Recommending legislative changes and other actions that achieve accountability and adherence in the healthcare community. • Reviewing demographic data to highlight the extent to which there are disparities in the Rhode Island health care system by race, ethnicity, sexual orientation, gender identity, age, disability, or other disparities and a plan to eliminate those disparities. • Recommending effective structures to ensure adequate oversight of the health care delivery system using effective data collection, quality metrics and other measures to assess financial and operational stability of the overall system.
<p>Overdose Response Coordination</p>	<ul style="list-style-type: none"> • Establishing clear goals, objectives, and metrics for measuring progress to combat the addiction and overdose crisis across partners. • Assessing and monitoring available data proposals to expand the utilization of data to inform decisions on the investment of resources. • Increasing pathways and access to harm reduction materials and a comprehensive harm reduction strategy, appropriate treatment, and support for recovery. • Increase awareness of the overdose epidemic, reducing the bias and discrimination associated with substance use disorders, and improving prevention education. • Improving coordination and collaboration with other states, the federal government, and local partners, including nonprofit agencies, hospitals, healthcare and service providers, and academia. • Alignment with the processes and procedures between the Opioid Settlement Advisory Committee and Governor’s Overdose Task Force.

<p>Race Equity and Community Engagement</p>	<ul style="list-style-type: none"> • Establishing community forums and empowering leaders who represent their community with a power-sharing dynamic to inform our health and human services systems transformation across the state. • Supporting community-led efforts and leveraging the experiences of individuals with lived experiences to uproot systemic oppression in our systems, communities, and culture. • Quantifying, evaluating, and sharing the short- and long-term effects of systematic racism on health outcomes exacerbated by the COVID-19 pandemic, opioid epidemic, and other historical wrongs. • Investing in populations, places, and programs that lift up under-resourced communities and historically marginalized with the greatest needs and disparities. • Centering data, strategy, policy, and program on equity, choice, and change to improve disparities and resolve barriers. • Improving recruitment process diversity, equity, and inclusion that builds a staff that is reflective of the community over time. • Identifying the effect of expanding technology in health and human services and developing policies to prevent further marginalization and inequitable access to services.
<p>Internal Operations and Interagency Support</p>	<ul style="list-style-type: none"> • Maintaining efforts to improve logistics—including building needs, resource requests, safety, and other operational activities. • Continuing alignment with core functions such as technology, policy and planning, and legal to ensure effective internal operations. • Working with strategy and innovation, budget and finance, and leadership to develop active resource management strategies and long-term plans. • Keeping focus on the development of a health and human services organizational culture that is asset-based, inclusive, engaging, and transparent. • Partnering with race, equity, and community engagement to strengthen diversity, equity, and inclusion within the workforce. • Collaborating with human resources to resolve administrative barriers, retain and recruit a qualified, diverse, and active workforce, and identify training needs to develop new skills and competencies. • Improving environmentally friendly practices throughout the Secretariat to minimize waste.
<p>Project Management Supports</p>	<ul style="list-style-type: none"> • Developing implementation approaches that consider people, processes, and technology. • Facilitating iterative and incremental project chartering to assess for readiness, identify barriers and facilitators, leverage expertise when needed, and evaluate for and adjust towards fidelity to the planned approach. • Facilitating engagement with key functional, programmatic and other stakeholders to ensure valuable input is taken into account as projects are initiated. • Developing an inventory of standard tools, templates, and processes for project management, quality improvement, and facilitation to streamline operational management across EOHHS and all sister agencies.

	<ul style="list-style-type: none">• Identifying and investing in the development of business process redesign as well as key competencies and skills of project managers to build and strengthen capacity across EOHHS and then to all sister agencies.
<p>Data Integration and Analytics</p>	<ul style="list-style-type: none">• Fostering a collaborative environment among stakeholders, including state agencies and community partners, that enables the alignment of information technology, data sharing, and evaluative research efforts.• Prioritizing integrated systems that ensure data integration and the protection of both privacy and security of information.• Increasing available data through a comprehensive data analytic and reporting strategy that drives action by promoting public access through dashboards, improving data collection, closing data gaps, and adhering to federal and industry standards.• Prioritizing the collection and use of data to understand how institutional, societal, and interpersonal factors differently, and negatively, affect the health, well-being, and economic opportunity outcomes of people due to their gender, gender identity, sexual orientation, race/ethnicity, age, and disability status.• Developing and implementing a robust HHS program evaluation model that includes assessments of health and wellbeing for Rhode Islanders, as well as cost-benefit analyses and returns on investment estimation.• Establishing a statewide HHS learning agenda to prioritize systems development, data collection, evaluation, and research needs.
<p>Technology and Systems Development</p>	<ul style="list-style-type: none">• Facilitating interagency design and user experience processes that includes state agencies and community partners and enables the alignment of information technology, systems architecture, customer interfaces, and interoperability.• Investing in systems development initiatives that have clear uses cases to provide value, are replicable and usable for other needs, and maximize integration with other efforts.• Creating interoperable systems that ensure compliance with Federal and State mandates, protection of privacy, and safeguarding of secure information.• Evaluating, upgrading, and maintaining systems to adapt to new technologies, first-in-class industry standards, and changing demographic data collection needs, and ongoing reporting requirements.• Prioritizing the reduction of provider, partner, and consumer administrative burden to maximize utilization of available technologies that promote operational efficiencies.• Establishing a statewide HHS technology agenda to prioritize systems development and safe use of innovations such as artificial intelligence.

**Medicaid
Benefits
Administration**

- *Paying for value--not volume and rebalancing the delivery system away from high-cost settings through home- and community-based settings.*
- *Coordinating across physical, behavioral, and long-term health by prioritizing coordinated care systems where physical and behavioral health are intertwined and integrated with long-term supports and services.*
- *Funding infrastructure and services that supports not only individual treatment needs, but also preventative care that improves one's quality of life and reduces the potential for costly interventions and care in the future.*
- *Implementing spending plans that are derived from evidence-based practices and innovative pilot programs that improve population health.*
- *Engaging and communicating with community members on proposed plans for spending and initiatives to incorporate community voice and choice into decision making that ultimately promotes efficiency, transparency, and flexibility.*
- *Considering the diverse needs of all populations—especially those most marginalized--over the entire lifespan and across various geographies and setting types.*
- *Embedding continuous improvement, evaluation, and administrative controls throughout planning and implementation.*