



Center for Public Sector Al

General Prompt Briefs



## **CPSAI & the 2024 Open Call Process**

CPSAI's 2024 open call strategy, developed with Health & Human Services (HHS) leaders nationwide, seeks to leverage emerging technologies to tackle key service delivery challenges within state HHS agencies. This strategy aims to accelerate learning and deployment by maximizing the number of thoughtful pilots and partnerships in state HHS agencies this year.

Since January 2024, CPSAI has collaborated with HHS agency leaders to identify and prioritize the most pressing issues their systems face. This effort has resulted in the creation of 'Prompts' - broad categories outlining areas where technological innovation can enhance HHS systems and the communities they serve:

Enhancing Client
Experience and
Engagement

Workforce Support and Effectiveness Systemic Efficiency and Effectiveness Reducing Administrative and Compliance Burden

These prompts, developed through extensive stakeholder discussions, aim to spotlight nationwide HHS challenges deemed urgent and applicable to technology-based solutions. They are divided into two types:

**Open Call Prompts**: Priority issues selected through the consensus of HHS leaders. Only technologies addressing these prompts will be considered in CPSAI's 2024 Open Call.

**General Prompts:** Issues not prioritized for the 2024 Call but will be cataloged for future exploration by HHS agencies.

The prompts intentionally offer a broad overview rather than specific technological requests. This approach encourages innovative applications of technology to meet HHS challenges without prescribing detailed solutions. CPSAI's goal is to foster creativity and support a variety of technology solutions tailored to the diverse needs of state HHS agencies.

For more information on the Open Call Process, including updates and timelines, visit <u>cpsai.org</u>.



## **Table of Contents**

# Category 1 | Enhancing Client Experience & Engagement

General Prompt Brief 1.3: Language and Cultural Accessibility General Prompt Brief 1.4: Accessibility for Those with Disabilities General Prompt Brief 1.5: Client Ownership of Personal Data

# **Category 2 | Workforce Support and Effectiveness**

General Prompt Brief 2.2: Improved Human Resource Processes General Prompt Brief 2.3: Supervisor Support

# **Category 3 | Systemic Efficiency and Effectiveness**

General Prompt Brief 3.2: Integrating and Managing Datasets General Prompt Brief 3.3: Improving Transactional Outcomes General Prompt Brief 3.5: Reducing Beneficiary 'Churn' General Prompt Brief 3.6: Modernizing Outdated Technology General Prompt Brief 3.7: Eliminating Bias in Service Delivery General Prompt Brief 3.8: Promoting Proactive Healthcare General Prompt Brief 3.9: Improve Client/Workforce Matching

## Category 4 | Reducing Administrative & Compliance Burden

General Prompt Brief 4.1: Adherence to Regulatory Requirements General Prompt Brief 4.2: Improved Data Reporting General Prompt Brief 4.3: Improve Provider Compliance Reporting



# **Category 1 | Enhancing Client Experience & Engagement**

This category solicits emerging technologies focused on improving client experience and satisfaction across all program areas within health and human services systems. This Brief solicits tools that streamline client engagement with HHS services and empower clients to confidently navigate their way through government agencies and services.

Clients often engage with HHS systems through many channels, sometimes physically (within government offices) and other times engaging remotely (through online systems and software, contact centers, or other remote means). A typical case would see a client apply for benefits and/or seek resources online but later visit physical offices to meet with caseworkers, troubleshoot issues with their case, undergo eligibility interviews, or otherwise. From the client's point of view, this 'current model' for engagement with services can be clinical, bureaucratic, illogical, and intimidating. It's notable that for decades, clients' first typical contact with HHS systems has been with the security officers who screen them immediately upon entering office buildings. This often creates an initial feeling of fear, stigma, and hesitation that is carried through clients' engagements with complex and often overburdened HHS bureaucracies and digital systems.

Even when engaging with contact centers or online application systems, clients often face barriers that make them feel stigmatized and problematic

Applying for benefits over the phone often requires clients to wait for extended periods to speak with an HHS employee. Moreover, clients often have to call back multiple times to complete their case application or troubleshooting — with many intermediate calls leading to dead ends. Online applications face similar hurdles, as applying for benefits is complicated, and many clients incorrectly complete applications or submit the wrong personal information and forms, leading to a rejected application and further service delays due to a simple and avoidable clerical error.



In recent years, leaders across the nation have been working to transform the client experience into one that is hopeful, encouraging, and welcoming.

These leaders recognize that many firms in the private sector possess digital portals and customer support technology that provide a better experience to clients seeking services — whether in-person, over the phone, or online. This category seeks to overview how such leaders view opportunities for using emerging technologies to improve client experiences within HHS systems. These leaders hope that such technology can empower clients to quickly and accurately identify their needs and, in turn, how to best navigate the services and systems best equipped to address and support those needs. By focusing on clients' experiences within HHS systems and their customer support systems, this category focuses on a few key problem areas:

Improving HHS systems' customer support systems

Providing clients with diverse points of entry to HHS services

Removing language and education barriers to receiving services

Rendering HHS services accessible to those with disabilities

Providing clients control of their personal data

Each of these areas is a site of friction under the 'current model' of human service delivery. HHS systems across the nation regularly receive very low customer service satisfaction scores (if a given agency measures such data in the first place), and customers often express frustration over how difficult it is to identify the proper channels to address their needs or concerns. At the same time, many Americans eligible for HHS programs never realize they're eligible for HHS services, even when interacting with other government programs or HHS community partners, in turn leading to economically marginalized populations being chronically unsupported and underserved.



At the same time, the same marginalized groups are often overwhelmed by the requirements that must be met to receive HHS services — which include navigating complicated, often legalistic, confusing paperwork and communications that ask clients to repeatedly to provide the same personal data again and again. Likewise, many HHS offices struggle to accommodate non-English speakers or those with intellectual and physical disabilities. In summary, HHS clients often feel exhausted and overwhelmed, while HHS agencies feel illequipped to address clients' core challenges.

Issues such as these create chronic frictions that make receiving services tiresome, frustrating, and discouraging. Consequently, this category asks, 'How might emerging technology alleviate chronic frictions clients face when engaging with HHS systems and thus (A) improve client satisfaction and (B) restore client dignity?'

## **Table of Contents**

General Prompt Brief 1.3 | Language and Cultural Accessibility General Prompt Brief 1.4 | Accessibility for Those with Disabilities General Prompt Brief 1.5 | Client Ownership of Personal Data



## General Prompt Brief 1.3 | Language and Cultural Accessibility

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Improving **Language and Cultural Accessibility**: Summarizing program information in plain language, including translations into languages other than English, to make government services more accessible and less intimidating to diverse populations.

#### **Detail:**

How can emerging technologies summarize vital HHS program information in plain language — particularly by translating key communications and forms into languages other than English — in order to make government services more accessible and less intimidating to diverse populations?

HHS clients are frequently asked to read and navigate complex paperwork, communications, and forms that are written at a high reading level and sometimes unavailable in the languages clients speak. Moreover, such documents regularly include statute references and legal language, creating confusion and hesitation in clients. In this sense, many interfaces with HHS systems contain implicit reading, language, and educational barriers that leave clients feeling incapable and overwhelmed.

HHS leaders are looking for emerging technologies that can help communicate to clients the content of the documents and paperwork relevant to their case(s), i.e., what the document plainly says and what is required to help them move their case forward. Corollary to that is the need for technology that can precisely translate complex forms and communications into languages other than English. Likewise, there is also a need for technology that can perform live translations during in-person or digital meetings with caseworkers who cannot speak their client's language.



# General Prompt Brief 1.4 | Accessibility for Those with Disabilities

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

**Improving accessibility** for those with disabilities, including physical, intellectual, and developmental disabilities.

#### **Detail:**

How can emerging technologies improve accessibility to HHS services for those with physical, intellectual, and developmental disabilities?

As HHS systems and leaders embrace equitable and accessible practices alongside universal design, they are asking how technology might be brought to bear to improve multi-channel interactions between HHS systems and those with disabilities that currently pose substantial obstacles to receiving services, such as visual impairment, hearing impairment, ambulatory impairments, and intellectual developmental disabilities.



# General Prompt Brief 1.5 | Client Ownership of Personal Data

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Allowing individuals to **leverage/consent to utilizing their own data** to streamline their engagement with the systems upon which they are relying for assistance.

#### **Detail:**

How can emerging technologies allow individuals to leverage and control their personal data to streamline their engagement with the HHS systems they rely on for assistance?

Today, when clients engage with government systems, they do not own or have control over the data that government systems collect from them. For instance, if someone applies for housing vouchers with their state's housing authority, their data is not portable to their state's HHS agency if they apply for an HHS service like SNAP. This is symptomatic of government agencies often lacking the necessary data-sharing agreements that would enable different agencies serving the same client to only collect that client's data once, at one agency, and then proceed to share the client's data between agencies. In effect, this burdens clients with having to repeatedly enter the same personal data whenever applying for services from different government agencies — or even when applying for services from different programs within the same agency.

In this setting, how can emerging technologies provide the infrastructure for clients to own their data, consensually use and share their data, and move it around from agency to agency to ease the application process?



# **Category 2 Workforce Support and Effectiveness**

This category seeks innovative technologies to mitigate workforce shortages in HHS by enhancing employee experiences.

Historically, government jobs offered stability, fair pay, and good benefits but have become less appealing recently due to benefits cuts, lagging wages, and challenging work conditions. Particularly in HHS, positions are often traumatic, driving employees to better-paying, less stressful private sector jobs, leading to chronic understaffing and no vision for near-future improvement.

This category asks how HHS systems might leverage technology to improve the experience of working within HHS systems by using emerging technologies to empower and engage employees.

Employees feel empowered and engaged when they can influence their tasks and work environment and feel their contributions are valued. This sense of ownership and personal investment in their work fosters hope, equipping them with the tools, support, and motivation to achieve and set new goals.

# Hope is both an individual and collective phenomenon.

To change workplace culture, we need to alter the systems and norms that affect it. This category seeks technologies that enhance individual work experiences and the broader workplace culture, asking how emerging technologies can empower HHS workforces to collectively achieve their goals. Expected outcomes include:

Lower Employee Burnout Reduced Post-Traumatic Stress

Increased Retention Decreased Turnover Rates



Boosting employee hope involves equipping them with essential tools and support for their roles, offering clear pathways to success, and setting goals that promote progress and achievement. Employees also gain hope from seeing their work's positive impact on their communities. How can technology give HHS employees transparent insights into their work's social impact by providing access to metrics showing their individual contributions to the community and linking their efforts to the broader HHS mission?

This category focuses on a few key problem areas:

- Improving employee engagement with day-to-day workflows
- Providing HHS systems with the means to detect and proactively support employee burnout and overburdened employees
- Providing HHS agencies' human resources departments with the means to streamline hiring processes and improve regular employee performance reviews
- Providing HHS supervisors with improved training and support

These are the vital sites where the implementation of emerging technologies can meaningfully foster employee hope and empowerment.

# **Table of Contents**

General Prompt Brief 2.2: Improved Human Resource Processes General Prompt Brief 2.3: Supervisor Support



## **General Prompt Brief 2.2 | Improved Human Resource Processes**

'Open Call Prompts' will be carried forward through the 'Open Call Process.'

### **Prompt Title:**

Improving **human resource processes**, including hiring, onboarding, training, and retention of employees to reduce turnover and promote workforce stability.

#### **Detail:**

How can emerging technologies improve HHS human resource processes — including hiring, onboarding, training, and retention of employees to reduce turnover and promote workforce stability?

The process of being hired by a government agency is comparatively prolonged and inefficient. Months elapse between posting a job description, receiving an application, and finally offering a job and fully onboarding an employee.

HHS leaders across the country are aware that the private sector possesses technology that renders the hiring process more efficient through strategic automation and streamlined administrative workflows. One central question this prompt poses is 'How might HHS systems leverage emerging technologies to streamline and automate their hiring and onboarding processes similarly?'

That said, this prompt also considers how emerging technologies might streamline other key HR processes. For instance, many HHS HR departments issue employee's regular performance improvement plans as part of annual (or more frequent) performance evaluation processes. How might contemporary technologies assist HR departments in tracking employee progress, satisfaction, success, and so on? How might they help HR connect such plans to concrete employee performance metrics?

By allowing human resources divisions to quickly and regularly link employee evaluation more concretely to employee performance metrics, the empowered employee gains more control and understanding over their job performance and the goals they can reasonably attain. At the same time, HR is empowered to work constructively with employees, using concrete worker performance metrics to create clear, realizable pathways to job success — crucial steps to building employee hope and reducing employee turnover.



# **General Prompt Brief 2.3 | Supporting Supervisors**

'Open Call Prompts' will be carried forward through the 'Open Call Process.'

## **Prompt Title:**

Providing agency **supervisory support**, including but not limited to supervisor coaching and performance management support.

#### **Detail:**

How can emerging technologies support staff supervisors in managing their team's performance?

It is not uncommon for 15-20% of HHS workforces to be made up of a critical supervisory layer. Supervisors play a crucial role in directing work teams, setting employee goals, providing coaching and decision-making support, supporting individual employees, and acting as liaisons between individual employees and agency/divisional leadership.

Yet, many supervisors within HHS systems feel that the resources provided to them are inadequate for leading and uplifting their teams. Further, many supervisors are elevated to the role of supervisor because they have served as exemplary front-line workers — a position whose skill\_set doesn't necessarily reflect the skills needed by a supervisor.

Consequently, this prompt asks how emerging technologies might support supervisors — perhaps by allowing supervisors to more efficiently and effectively measure and act on employee metrics or, alternatively, by developing training modules that could help supervisors develop the managerial skills necessary for their work.



# Category 3 Systemic Efficiency and Effectiveness

This category seeks emerging technologies to enhance HHS systems' day-to-day workflows, covering data management, quality control, fraud prevention, payment, and eligibility determination.

It aims to explore how these technologies can integrate with existing HHS infrastructures to optimize operations and magnify their effectiveness.

This category is wide-ranging, covering both digital and non-digital systems across HHS programs and services. It focuses on data usage and subjective decision-making. Examples of some key systems relevant to this category are:

- Systems that govern eligibility determinations for clients seeking benefits
- Systems that govern the issuance of licenses to HHS partners (such as childcare centers)
- Systems that govern critical case determinations in child welfare and child protective services
- Data storage and management systems, as well as the systems that organize and utilize in-house data for case management and determinations
- Systems that manage in-office waiting lists and times
- Systems that manage over-the-phone waiting times
- Systems that ensure accurate and timely issuance of benefit payments
- Benefit fraud detection systems (particularly regarding detecting EBT card fraud)
- Systems that detect (and/or correct) case documentation errors
- Systems that improve HHS systems' capability to match clients seeking work to suitable employers and/or career paths

Additionally, this category seeks emerging technologies to develop or enhance existing HHS systems, aiming to equip the workforce with new capabilities.



## Examples include:

- Systems that monitor critical decision-making processes throughout HHS programs to identify and counteract incidents of systemic or subjective bias
- Systems that identify cases at risk of lapsing (i.e., losing benefits due to case expiration)
- Systems that identify Medicaid clients at risk of developing chronic, costly health conditions to facilitate a preventative approach to healthcare
- Systems that detect faulty software in legacy HHS systems

Today, most HHS agencies have extensive data that is often difficult to access and utilize. This category explores how to integrate this data into daily workflows, enhancing decision-making, responsiveness to regulations, and identifying biases within HHS systems. It questions how modern technologies can organize and leverage this data, enabling workers to make informed and proactive decisions. Additionally, it considers how emerging technologies can analyze HHS data for insights, identifying and addressing systemic biases and errors in documentation, payments, and other areas.

In summary, how can emerging technologies use HHS data to empower workers to make more informed, proactive decisions? How can they help HHS systems take more responsibility for the accuracy, timeliness, efficiency, and fairness of the services they provide?

## **Table of Contents**

General Prompt Brief 3.2: Integrating and Managing Datasets General Prompt Brief 3.3: Improving Transactional Outcomes General Prompt Brief 3.5: Reducing Beneficiary 'Churn' General Prompt Brief 3.6: Modernizing Outdated Technology General Prompt Brief 3.7: Eliminating Bias in Service Delivery General Prompt Brief 3.8: Promoting Proactive Healthcare General Prompt Brief 3.9: Improve Client/Workforce Matching



# **General Prompt 3.2 | Integrating and Managing Datasets**

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Integrating and **managing diverse data** sets to improve service delivery, including turning raw data into meaningful information, analyzing outcomes, and updating eligibility rules effectively.

### **Detail:**

How can emerging technologies help HHS systems integrate and manage diverse datasets to improve service delivery, including by turning raw, unstructured data into actionable information and by analyzing outcome data and workforce metrics in an accurate and timely manner?

It's very common for HHS agencies to possess dozens, if not hundreds, of terabytes of raw data across each of their different programs and departments. Moreover, this data often goes back decades, is stored in various formats, and is mostly unsorted and unutilized. Unstructured data currently goes unused within HHS systems and yet could be enormously useful given the proper structure and accessibility. With certainty, the same could be said for other programs beyond child welfare services, such as safety net programs and aging services.

This prompt primarily asks how emerging technologies might assist HHS systems in organizing, standardizing, and mobilizing this data to improve success outcomes.



## **General Prompt 3.3 | Improving Transactional Outcomes**

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

**Improving transactional outcomes** in HHS that might include tackling long wait times, improving documentation processes, and addressing issues of fraud, waste, and abuse. This also includes enhancing payment accuracy and timeliness and other transactional definitions of success in health and human services systems.

#### **Detail:**

How can emerging technologies help improve transactional processes in HHS systems? Such processes include managing program waiting lists and in-person waiting times, improving data documentation and storage processes, ensuring benefit payment accuracy, timeliness, and addressing other transactional definitions of success in health and human services systems.

Of particular concern to HHS leaders across the nation is benefit payment accuracy and timeliness. In recent years, HHS systems have been struggling to ensure benefit payments are issued in a timely manner. At the same time, error rates pertaining to accurate benefit payments or incorrect case documentation are increasing.

This trend is indicative of larger challenges facing HHS systems across the nation. Rising error rates (often stemming from human error in documentation processes) are most likely due to structural factors such as workforce shortages in HHS systems occurring at the same time as HHS systems face historically high levels of demand for benefits in the wake of the COVID-19 pandemic. Understaffed and overburdened, HHS systems are struggling to accommodate increased demand for benefits, and their legacy systems for managing demand are falling behind.



# General Prompt 3.3 | Improving Transactional Outcomes continued

Consequently, HHS offices across the nation are struggling with unduly long inoffice and over-the-phone wait times for case support, with unduly long waiting lists for benefits (due to a lack of employees to serve new cases), with rising rates of payment and case documentation errors, and with collecting and properly logging the necessary data for individual cases. These conditions are chronic and worsening across many HHS programs.

As a result, this prompt asks how emerging technologies can work to improve transactional outcomes, including counteracting high error rates across HHS systems.

At the same time, it also asks how emerging technologies might streamline transactional processes such as managing wait times, issuing timely and accurate benefit payments, and logging accurate data for individual cases within HHS digital systems.



# **General Prompt 3.5 | Reducing Beneficiary 'Churn'**

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Reducing **beneficiary 'churn'** by supporting early identification of potentially lapsing cases to allow for proactive outreach to increase renewal rates, minimizing the burden and cost of redetermination post-lapse.

#### **Detail:**

How can emerging technologies support the identification of cases at risk of lapsing and losing services and, in turn, assist HHS systems with launching proactive outreach efforts to increase program renewal rates and minimize the burden and cost of case redetermination (post-lapse)?

It is significantly more efficient for the government and easier for a client to simply renew benefits before they expire than for a client to lose access to benefits (due to time regulatory time limits imposed on individual cases) and need to, in turn, reapply for services. Notably, the cost of this beneficiary 'churn' is usually born by HHS agencies, which must allocate labor and funds to redetermine a lapsed case rather than pursuing the much briefer and straightforward process of renewing a case that is already active but at risk of lapsing.

Consequently, this prompt asks how emerging technologies might help HHS systems proactively identify clients at risk of losing services due to benefit expiration and assist employees and clients with initiating the renewal process.



# **General Prompt 3.6 | Modernizing Outdated Technology**

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Modernizing **outdated technological systems** and correcting bad code to improve overall process efficiency and technology used in the delivery of health and human services.

#### **Detail:**

How can emerging technologies help modernize HHS agencies' digital systems and software? In particular, how can they be used to detect and correct bad or faulty code already in place in HHS legacy software to improve overall service efficiency and delivery?

HHS systems often rely on legacy technology with troublesome or faulty code. Flaws in such systems become especially relevant as HHS agencies seek to adapt their legacy software to more contemporary purposes, such as dynamic metrics tracking.

Moreover, HHS systems sometimes acquire new software that, when implemented within HHS programs and services, reveals programming flaws that make the technology ill-suited to HHS deployment and use.

This prompt asks whether emerging technologies might be able to help HHS systems identify where there is faulty code in their existing technologies and, in turn, to help correct that code.



# **General Prompt Brief 3.7 | Eliminating Bias in Service Delivery**

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Leveraging technology to specifically focus on **eliminating bias and variability in service delivery** to ensure fair and consistent outcomes for all clients.

#### **Detail:**

How can emerging technologies help HHS systems eliminate systemic bias and unjustifiable variability in service delivery to ensure fair and consistent outcomes for all clients?

Today, human bias manifests in HHS systems at both the systemic and the individual levels. This bias too often results in disparate, inequitable outcomes for the different communities served by HHS agencies.

Might emerging technologies help HHS systems identify human and/or systemic bias in service delivery and case determination processes? Moreover, might they help streamline a process for addressing and counteracting those biases once detected?

As emerging technologies increase the efficiency of HHS systems and workflows, it's of the utmost importance that the same technology does not simply make more efficient the biases already present. Any effort to increase the efficiency of HHS systems via emerging technology must be accompanied by a corollary effort to use emerging technology to identify and repair biases already endemic to HHS systems.



## **General Prompt 3.8 | Promoting Proactive Healthcare**

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

**Promoting healthy interventions** and prevention of rising acuity and higher long-term costs of clients with high Medicaid utilization.

#### **Detail:**

In the face of rising healthcare case acuities and higher long-term costs of clients with high Medicaid utilization rates, how can emerging technologies promote proactive healthcare interventions and preventative measures to make Medicaid spending more intentional and effective?

Medicaid programs often serve clients who consistently require disproportionate spending for their healthcare needs relative to the average client's costs. These clients often face health challenges that are severe, long-term, and costly for HHS systems.

Without denying such clients the critical healthcare they need, this prompt asks whether emerging technologies might assist HHS systems in allowing clients and Medicaid programs to take a preventative — and not reactive — approach to healthcare, identifying clients with potential long-term, severe health risks before those risks develop into serious, chronic, and costly conditions. In turn, this prompt also asks whether emerging technology might assist both the client and HHS employees in constructively addressing the client's needs before severe health conditions develop and/or require chronic treatment.

By moving upstream and using technology to identify clients who might be at risk of developing serious, chronic conditions that will need long-term care, HHS systems will be positioned to work in collaboration with clients to improve their overall health, reduce their medical needs, and increase the impact of Medicaid spending across the board.



# **General Prompt 3.9 | Improve Client/Workforce Matching**

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Utilizing contemporary technologies with clients to improve **workforce assessments** and the subsequent recruiting of employers and matching of clients with employment opportunities.

#### **Detail:**

Many HHS programs and caseworkers assist clients with finding stable career pathways. A key part of this process is the standardized workforce assessment, a questionnaire meant to align a client's work history, education, skills, preferences, aptitudes, and family needs with the needs of employers in the client's state. Ideally, HHS caseworkers facilitate a process of compatible matching, bringing clients together with employers who can best use their unique skills and backgrounds.

This prompt asks how emerging technologies might improve this matching process by making workforce assessments and employer matching processes more holistic and accurate (in terms of clients' and employers' needs).

Secondly, this prompt asks how emerging technologies might improve the employer recruitment process. That is, how can emerging technologies expand the scope of employers that HHS programs and caseworkers consider when matching clients to possible careers? How can they help bring new partner employers into contact with the HHS system, facilitating more robust and collaborative relationships between the public and private sectors?

Finally, might emerging technologies be used to help clients prepare and train for the job application and interview process?



# Category 4 | Reducing Administrative & Compliance Burden

Government agencies need to comply with various federal, state, and internal regulations, demanding substantial workforce and financial resources to respond promptly and accurately to regulatory changes. This category seeks innovative technologies to enhance government agencies' administrative efficiency.

HHS systems involve multiple stakeholders, including federal officials who supervise state agency compliance with regulations. Key federal bodies like the Administration for Children and Families, USDA Food and Nutrition Service (overseeing SNAP and WIC), the Center for Medicare Medicaid Services, and the Center for Disease Control set specific reporting requirements for state-level agencies.

State legislatures mandate HHS agencies to submit regular reports on metrics, budgets, and client satisfaction, burdening administrative teams with specialized forms and information requests, especially when staff is limited. Additionally, federal and state courts require HHS agency data when agencies are involved in federal, state, or class-action lawsuits.

State-level HHS agencies commonly establish dedicated departments to manage the high volume of reporting requests from state, federal, judicial, and internal sources.

These departments, needing substantial staff and resources, grapple with complex and inefficient processes for handling large and changing data sets. The frequent reporting demands challenge these departments to meet deadlines, resulting in overburdened, understaffed, and overworked administrative staff. Additionally, outdated data infrastructures and human errors further hinder these agencies' ability to respond accurately and promptly to regulatory and statutory requests.

This category addresses the critical issue of enhancing HHS systems nationwide through emerging technologies. It explores how these technologies can streamline administrative systems, workflows, and workforces to improve regulatory reporting and response to changes. The category questions the potential of emerging technologies to automate and simplify reporting processes using in-house HHS data, focusing on reducing human error, increasing efficiency, and meeting administrative needs more effectively.



## **Table of Contents**

General Prompt Brief 4.1: Adherence to Regulatory Requirements

General Prompt Brief 4.2: Improved Data Reporting

General Prompt Brief 4.3: Improve Provider Compliance Reporting



# General Prompt Brief 4.1 | Adherence to Regulatory Requirements

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Reducing the **administrative load** and ensuring adherence to regulatory requirements, thus streamlining processes for state officials and clients.

#### **Detail:**

How can emerging technologies reduce the administrative load on HHS departments responding to regulatory and statutory requirements? Secondly, how can they help ensure such reporting responses accurately adhere to regulatory and statutory requirements as they evolve?

This prompt is two-pronged. On the one hand, it asks how emerging technologies might streamline administrative processes surrounding regulatory reporting responses. On the other hand, it asks how such technologies might render those responses more accurate, i.e., how administrative reports might be brought closer to regulatory requirements and requests (primarily by countering human error and reducing administrative burden).

A key component of this prompt is rendering administrative departments tasked with handling regulatory reporting more responsive to the *evolving* nature of regulations and statutes. New regulations and statutes — or changes to old regulations and statutes — arise frequently and consistently demand responses from HHS administrative departments. In the current model of health and human services, HHS administrators often struggle to keep up with the pace of change, sometimes leading to inaccurate understandings of the precise demands any new or updated regulation or statute incurs on HHS systems. Coupled with overburdened and short-staffed workforces, this leads to high rates of human error in administrative reports.

In essence, how can emerging technologies assist HHS administrators with understanding frequent policy changes from federal or state bodies and streamline the implementation of those policy changes within HHS systems?



# **General Prompt Brief 4.2 | Improved Data Reporting**

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Equipping human services systems to **improve data reporting** to different stakeholders and regulators that have different reporting requirements while capturing the data once.

#### **Detail:**

How can emerging technologies improve HHS systems' capacity to report internal data to different stakeholders and regulators that have different reporting requirements?

The task of reporting diverse datasets to diverse stakeholders (which all request different data in different formats) takes up an undue amount of administrative capacity in the current model of HHS systems. Administrators work hard to cull, process, and present the data required for regulatory reports and responses. However, this process is often inefficient — particularly given that many HHS agencies rely on legacy software to store and process their internal data — and requires a significant workforce, opening space for human error and untimeliness.

Consequently, this prompt asks how emerging technologies might be used in tandem with HHS agencies' data and software to streamline (or even automate) data reporting processes. In other words, might emerging technologies be used by HHS administrators to automatically harvest relevant and necessary data from internal HHS datasets and efficiently mobilize it to fulfill specific reporting requirements?



# General Prompt Brief 4.3 | Improve Provider Compliance Reporting

'General Prompts' will NOT be carried forward through the 'Open Call Process,' yet responses will be cataloged for HHS agency reference and for future consideration.

## **Prompt Title:**

Improve processes through which health and human services **providers report to agencies** in satisfaction of their own compliance requirements.

#### **Detail:**

How can emerging technologies improve the processes through which HHS service providers report to HHS agencies to satisfy their compliance requirements?

HHS agencies frequently partner with external service providers such as consulting agencies, job readiness and training programs, community nonprofits, childcare providers, and so on. Such external partners are essential to ensure that HHS programs serve clients holistically, providing services HHS agencies are not internally equipped to provide that are nonetheless crucial to the mission, values, and services of HHS programs.

There are many different kinds of external service providers. Some, like consulting agencies, are focused on providing services to agencies themselves — improving agency systems, training agency personnel, and so on. Others, like community nonprofits, are focused on providing holistic, often voluntary services to clients that complement HHS programs by providing personal services often grounded within clients' communities.

When partnering with an external provider, HHS agencies formulate specific, but to an extent standardized, compliance requirements for different kinds of providers. These requirements stipulate which services are expected to be provided, by what deadlines, over what timeframe, and so on. They also stipulate progress reporting requirements and key milestones.

In the current HHS agency model, the entire administrative workforce is dedicated to creating such compliance requirements and ensuring that external providers meet those requirements. This prompt asks whether emerging technologies can streamline this process by rendering compliance requirements more standard for different kinds of providers, rendering the work of ensuring compliance more consistent and accurate.

