

State Government

State Agencies call on Dr. Oliver to help them on a path of innovative change. Incremental happens every day in healthcare and social services agencies. However, when the Commissioner or Secretary, Governor or Legislature need to turn things around, Dr. Oliver brings a fresh new approach:

- Performance assessment: big data, “customer” data, financial data, quality measures, balanced scorecard
- Real change: process improvement, a new direction in policy, change that really happens—not change that sounds good in a report
- New ideas: finding and assessing best practices at other agencies, bringing into state government new ways of thinking based on approaches that have proven successful in the private sector

Innovation can a path to greater success, but only if it is done right. Dr. Oliver has helped both private and public companies manage successful innovation for decades.

Arkansas – The Bureau of Legislative Research needed help supporting the 2016 session, during with the legislature will determine how to revamp public healthcare in the state. Dr. Oliver’s team is supporting the legislative task force through this fundamental re-thinking of the opportunities. In the



end, new legislation will likely dramatically expand the role of managed care in the state. During the roll out of the Affordable Care Act, Arkansas got CMS approval to use an innovative “Private Option” for the expansion population. To garner the needed support, the legislation provided for a full sunset of the program at 12/31/2016. Dr. Oliver’s team provides the resources the Legislature needs. This began with a thorough assessment of the performance of both Medicaid and the Private Option. During the assessment Dr. Oliver provided ground breaking data analysis. He obtained the first claims data Arkansas had from insurance companies. He used that data to evaluate tough questions including how claims costs compared across the two programs. Within Medicaid, Dr. Oliver evaluate several questions about the use of behavioral health services. For example, Dr. Oliver’s team found that 30% of claims were for services that seemed to overlap on the same day—an opportunity to tighten policy at least, and possibly enforcement. After the initial assessment, Dr. Oliver’s team has been working with the legislative task force month-by-month to support the legislative process

Texas – The Commissioner of Texas’ Department of Family and Protective Services as Dr. Oliver’s team developed an improved approach to delivering Child Protective Services. The Agency had been given over \$40 million of one-time supplemental funding three years earlier. Yet, turnover remained high, families kept complaining, and kids kept falling between the cracks, some dying while in the system. Dr. Oliver’s team fist conducted a strategic assessment. This covered every aspect from recruitment and training to policy to management and monitoring. The result was 140 recommendations as part of a proposed “CPS Transformation.” This became the roadmap for Agency management over the coming years. A testament to the success of Dr. Oliver’s team is that the Agency has kept at it. Now eighteen months later, the progress continues. Results are showing up. The state has a new Safety-based decision making process. Training has been transformed from classroom to in the field, where it is needed. Turnover has been



greatly reduced, stopping the huge loss of young, trained workers. There is a new way of thinking in the Agency from top to bottom.

Mississippi – Mississippi’s Department of Human Services Commissioner knew many of the problems— he came up through the ranks. However, he did not know the best path forward for the agency. Dr. Oliver’s team conducted an assessment of Child Support Enforcement which led to a series of recommendations including conducting a pilot outsourcing of 16 offices. This has led to an on-going relationship in support of the Commissioner. This included facilitating a strategy off site for the whole of MDHS. It included assessing performance of the results of the first year of CSE outsourcing.



Florida – Dr. Oliver led teams to assist the new Commissioner of Florida’s Department of Children and Families to Transform the Agency. This started with leading three teams to design the business case for change. The teams represented a broad range of middle and upper management as well as rank-in-file. The teams developed a new design for Child Protective Services: recruitment and training, decision making, communicating in the field and supporting field case workers with information. It led to a new call center and a legislative request for \$100 million in new systems.



Following success with CPS, Dr. Oliver’s team assisted DCF to improve claims integrity across the range of support cases that were suspected of waste, fraud and abuse. Dr. Oliver’s assessment demonstrated that the processes used required major redirection. The team found that quality of record keeping was so bad that over half of the transactions in the system were correcting previous errors. The team found that over \$40 million in claims had not been investigated, even after over a year in some cases. The team found that the DCF integrity agency was not collaborating with other parts of government. After the assessment, Florida hired Dr. Oliver’s team to conduct a SWAT program on the backlog of cases. In three months, a team of six temporary hires cleaned up over 18 months of backlog – work that the state team of over 100 could not complete.

South Carolina – the state Unemployment Insurance and Workforce Commissions were not cooperating. The state needed a better way of organizing and managing services to the workforce. Dr. Oliver’s team conducted an assessment that led to a new strategy. Ultimately it paved the way for combining the two organizations to more effectively serve South Carolina’s workers and employers. The assessment involved going into the field and documenting the actual work and management process in different offices around the state. In addition, Dr. Oliver’s team assessed organization, systems, management reporting and federal compliance. Perhaps the most important findings related to weak policy—that allowed workers to claim well beyond what the law anticipated. The assessment led to a series of recommendations presented not only to the client agency, but to the legislature. This resulted in sweeping changes to policy as eventually to reorganization of the two factious agencies.



Ohio – Ohio has been facing unusual issues with unemployment. One adverse effect has been straining the Unemployment Compensation system. The Ohio Chamber of Commerce saw the work Dr. Oliver and his team did in South Carolina and asked for help developing a strategy for improving UI management in Ohio. Dr. Oliver’s team found that the agency was not



managing UI claims well; it found excessive quality issues and little focus on quality of claims approval. Most importantly, Dr. Oliver's team found that the method by which the state adjusted rates rewarded companies for "playing shell games" in a way to avoid paying full UI premiums. As a result, some companies had caused the system to pay hundreds of millions of UI compensation beyond what they had paid into the system. Dr. Oliver was asked to testify to the legislature about his team's findings – and the Chamber of Commerce was able to change the direction of state UI management.

Missouri – Dr. Oliver's team helped the Department of Social Services Commissioner to improve the performance of the Family Support Division. Dr. Oliver's team reviewed processes, organization, performance metrics, systems and vendor contracts to develop a strategic assessment. This assessment included a unique application of linear regression to determine the cost of individual processes. It also included process documentation in field offices all across the state. The workers were so enthusiastic about Dr. Oliver's recommendations that they asked to present the findings to agency leadership themselves.



Dr. Oliver's team was then introduced to the governor, who was looking for new and innovative ways of saving money while improving state services. Dr. Oliver's team looked nationally at the best examples of state-wide efforts to save money and recommended to the governor the best 26 methods of reducing cost, outsourcing to improve performance, partnering with the faith-based community and improving performance internally.

Indiana – The new Secretary of Indiana's Family and Social Services Administration had clear direction from the (also new) governor: improve the process of managing social services, even if it involves innovative use of outsourcing. Dr. Oliver led a team of 60 professionals to assess the opportunity for dramatic change. It found that FSSA had systems and processes that were fundamentally not prepared for major improvement. In response, Dr. Oliver managed a team to conduct one of the largest-ever outsourcing procurements in social services--\$1 billion in services over 7 years. In addition, Dr. Oliver's team revamped eligibility process and policy. It reviewed the claims adjudication process and found many opportunities for eliminating waste, fraud and abuse.