

# Minerva 2.0

# CBO Requirements

Welcome to the Washington State Health Care Authority (HCA) Division of Behavioral Health and Recovery (DBHR) substance use disorder prevention and mental health promotion online reporting system—Minerva 2.0! Minerva 2.0 is a performance-based, compliance-focused online reporting system. It supports prevention and health promotion professionals in collecting and reporting data to meet state and federal requirements.

This checklist is for Community-Based Organizations (CBO) to support timely, accurate, and unduplicated reporting that aligns with contractual obligations, and includes: [System Access Requirements](#), [Training and Technical Support Requirements](#), [Timeline Requirements](#), [Annual Reporting Requirements](#), and [Monthly Reporting Requirements](#).



This icon indicates a task or resource that requires the user to be logged into Minerva 2.0.

## System Access Requirements

Access to an account in Minerva 2.0 for designated staff and back-up staff requires compliance with the following steps, also found The Athena Forum, [Minerva page](#):



- Designate staff and back-up staff** for Minerva 2.0 data entry.<sup>1,2</sup>
- A signed "**User Agreement on Non-Disclosure of Confidential Information**" for each staff with access to Minerva 2.0.<sup>3,4</sup>
- SecureAccess Washington (SAW)** accounts for staff with access to Minerva 2.0; the *Primary Email* used for SAW is an individual, non-group email address.<sup>5,6</sup>
- A completed and approved "**Minerva 2.0 Access Request Form.**" The email provided must match the *Primary Email* used in SAW. The form must be approved in writing by the contract entity, and an HCA Prevention Manager.<sup>7,8,9,10</sup>
- Register designated staff and back-up staff for the next scheduled virtual **Quarterly New User Training** on The Athena Forum, [Calendar page](#).

### Recommendations



- Watch the video "**Minerva 2.0 Explained: Access**" available on The Athena Forum, [Minerva page](#).

## Training and Technical Support Requirements

Required and optional resources are available to support navigating and reporting in Minerva 2.0:

- Watch the video "**Welcome to Minerva 2.0**"  in Minerva 2.0 under Help, on the Training page, as a prerequisite for attending a Quarterly New User Training.<sup>11</sup>
- Complete the **New User quiz**  as a prerequisite for the Quarterly New User Training.<sup>11</sup>
- Designated staff and back-up staff for Minerva 2.0 data entry must **attend at least 80%** the next scheduled virtual Quarterly New User Training.

### Recommendations

- Save the scheduled **Minerva 2.0 Technical Support Calls** on The Athena Forum, [Training and Event Calendar page](#) in your calendar and attend as needed or recommended by your HCA Prevention Manager.
- Set aside time in your **monthly check-in** with your HCA Prevention Manager to discuss Minerva 2.0 related updates and reporting compliance.
- Review and bookmark **The Athena Forum, [Minerva page](#)**.
- Download the **Minerva 2.0 User Guide** and other PDFs in Minerva 2.0 under Resources, on the State Resources page. 
- Watch optional **on-demand videos** in Minerva 2.0 under Help, on the Training page. 

## Timeline Requirements

Meeting the timelines set forth in the contract for reporting in Minerva 2.0 requires:

- Report **monthly data by the 15<sup>th</sup>** of the following month.<sup>12, 13</sup>
- Report **annual data** from an approved Action Plan **within 30 days of approval**.<sup>12, 13</sup>
- If special circumstances arise and the Contractor is unable to enter the data by the reporting deadline(s), the Contractor shall request extensions to reporting deadlines in writing and send the request directly to a Prevention Manager via email five (5) business days before the report due date. The maximum extension request permitted is ten (10) business days.<sup>14, 15</sup>

### Recommendations

- Schedule a calendar reminder in your calendar for the Minerva 2.0 reporting deadlines.
- Schedule time in your calendar for reporting in Minerva 2.0; it is recommended to schedule near a Minerva 2.0 Technical Support Call, or a check-in with an HCA Prevention Manager.

## Annual Reporting Requirements

Monthly accurate, complete, and unduplicated reporting in Minerva 2.0 requires:

- Review, report, and/or update **Logic Model(s)** in the Plan Channel as they appear on an Action Plan within thirty (30) days of approval.
- Review, report, and/or update **Programs & Strategies** in the Plan Channel as they appear on an Action Plan and Budget within thirty (30) days of approval.

- Review, report, and/or update **Cohort(s)** in the Plan Channel as they appear on an Action Plan within thirty (30) days of approval, or before the implementation of services.
- Review, report, and/or update **Campaign(s)** in the Plan Channel as they appear on an Action Plan within thirty (30) days of approval.
- Review, report, and/or update **Partners(s)** in the Build Capacity Channel as they appear on an approved Action Plan within thirty (30) days of approval, or before the implementation of services.

### Recommendations

- Review, report, and/or update **Collections and Populations** in the Assess Needs Channel as they appear on an approved Action Plan within thirty (30) days of approval.
- Review, report, and/or update **Media Outlet(s)** in the Build Capacity Channel as they appear on an approved Action Plan within thirty (30) days of approval.
- Review the **Minerva 2.0 User Guide**, in Minerva 2.0 under Resources, on the State Resources page and use Ctrl F to find relevant guidance.
- Review **Minerva 2.0 Quarterly New User Training** slides and script, under Resources, on the State Resources page.

## Monthly Reporting Requirements

Monthly accurate, complete, and unduplicated reporting in Minerva 2.0 requires:

- Review, report, and/or update **Staff Member(s)**, including *Staff Eligibility*, under Account, on the Staff Member page to be current and complete, and **notify HCA of staff transitions** that affect system access within 5 business days.<sup>16, 17</sup>
- Review, report, and/or update **Participants** in the Plan Channel to be accurate and complete, with attention to *Status* based on current enrollment in services.<sup>18, 19</sup>
- Close finished **Cohort(s)** in the Plan Channel.<sup>20</sup>
- Open **Cohort Completers** in each closed Cohort in the Plan Channel and review attendance.<sup>21</sup>
- Close finished **Campaign(s)** in the Plan Channel.<sup>20</sup>
- Report each service delivery as an **Implementation Activity** in the Implement Channel with either Participant attendance or *Detailed Demographic* population reach, as appropriate.<sup>22, 23</sup>
- Report the month's service delivery as a single **Implementation Activity** "roll-up" for information dissemination services only, if applicable.
- Report each training as a **Capacity Activity** with the *Activity Type, Training* in Build Capacity Channel, if applicable.
- Report each technical assistance as a **Capacity Activity** with the *Activity Type, Technical Assistance* in Build Capacity Channel, if applicable.
- Report each *Service Type* as a **Capacity Activity** with the Activity Type, Development in Build Capacity Channel, if applicable.<sup>24</sup>
- Report the month's **tests/surveys** submissions in the relevant Cohort in the Plan Channel for all reoccurring service, for all participants in recurring program groups in which most participants are younger than ten (10) years old on the date of that group's first service.<sup>25, 26</sup>
- Run **Outcomes Reports** in the Evaluate Channel to evaluate for "positive outcomes."<sup>27, 28</sup>

### Recommendations

- Review the **Minerva 2.0 User Guide**, in Minerva 2.0 under Resources, on the State Resources page and use Ctrl F to find relevant guidance.
- Review **Minerva 2.0 Quarterly New User Training** slides and script, under Resources, on the State Resources page.
- Run **Ad Hoc Reports** in the Evaluate Channel to review service delivery data.
- Run the **Program Implementation Monitoring Report** in the Evaluate Channel to review service delivery data.
- Run a **Program Services Report** in the Evaluate Channel to review service delivery data.

### Requirements Compliance Monitoring

Minerva 2.0 is used to demonstrate and verify service delivery and contract compliance. The Health Care Authority (HCA) reviews reporting to ensure it meets the requirements outlined in the contract:

- The HCA Prevention Manager, following the 15<sup>th</sup> of each month, reviews annual, quarterly, and monthly data for accuracy, completeness, and non-duplication. The Contractor shall record staff hours, training events, test/survey records, home medication lock boxes or bags distribution, and monthly prevention activities with all required demographic information for individual participants and population reach.<sup>29</sup>
- If special circumstances arise and the Contractor is unable to enter the data by the reporting deadline(s), the maximum extension request permitted for an HCA Prevention Manager to allow is ten (10) business days. Contractors with three (3) or more consecutive months of data entry extensions or late reporting or four (4) or more program data entry extensions or late reporting within a six (6) month period shall be required by the HCA Prevention Manager to submit a Corrective Action Plan to HCA.<sup>30</sup>
- If fewer than half of the participants in a Cohort report increased or maintained changes, the Contractor shall submit a Performance Improvement Plan (PIP) to the HCA Prevention Manager within forty-five (45) calendar days of notice by HCA. In cases where there are no Cohort(s) with majority increased or maintained changes, the Contractor shall discontinue implementation of that service within the specified geography.<sup>31</sup>
- If the Contractor is found to be non-compliant with requirements, the Contract has five (5) business days of notice by HCA to resolve compliance. If the Contractor is not within compliance within five (5) business days of notice by HCA, the Contractor A-19 invoice vouchers will be denied. To receive payment for submitted A-19 invoice voucher(s), the Contractor must ensure all expenditures are associated with accurate, and non-duplicative Minerva 2.0 data entry.<sup>32</sup>

### Footnotes

<sup>1</sup>Attachment 3: Scope of Work, Section 4.3.1, "Prevention Activity Data Report," Line C

<sup>2</sup>Attachment 4: Data Sharing Terms, Section 2, "HCA System Access Requirements and Process," Line 2.1

<sup>3</sup>Attachment 4: Data Sharing Terms, Section 7, "Data Confidentiality," Line 7.2

- <sup>4</sup>Attachment C: User Agreement on Non-Disclosure of Confidential Information
- <sup>5</sup>Attachment 4: Data Sharing Terms, Section 2, “HCA System Access Requirements and Process,” Line 2.3
- <sup>6</sup>Attachment 4: Data Sharing Terms, Section 2, “HCA System Access Requirements and Process,” Line 2.6
- <sup>7</sup>Attachment 4: Data Sharing Terms, Section 2, “HCA System Access Requirements and Process,” Line 2.2
- <sup>8</sup>Attachment 4: Data Sharing Terms, Section 2, “HCA System Access Requirements and Process,” Line 2.4
- <sup>9</sup>Attachment 4: Data Sharing Terms, Section 2, “HCA System Access Requirements and Process,” Line 2.5
- <sup>10</sup>Attachment 4: Data Sharing Terms, Section 6.1, “Security of Data, Data Protection,” Lines A and B
- <sup>11</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line C
- <sup>12</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line A
- <sup>13</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line K
- <sup>14</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line E
- <sup>15</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line D
- <sup>16</sup>Attachment 4: Data Sharing Terms, Section 2, “HCA System Access Requirements and Process,” Line 2.7
- <sup>17</sup>Attachment 4: Data Sharing Terms, Section 2, “HCA System Access Requirements and Process,” Line 2.8
- <sup>18</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line I
- <sup>19</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line K
- <sup>20</sup>Attachment 3: Scope of Work, Section 4.3.3, “Performance Work Statement/Evaluation,” Line C
- <sup>21</sup>Attachment 3: Scope of Work, Section 4.3.3, “Performance Work Statement/Evaluation,” Line B
- <sup>22</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line A
- <sup>23</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line B
- <sup>24</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line J
- <sup>25</sup>Attachment 3: Scope of Work, Section 4.3.2, “Outcome Measures,” Line A
- <sup>26</sup>Attachment 3: Scope of Work, Section 4.3.2, “Outcome Measures,” Line B
- <sup>27</sup>Attachment 3: Scope of Work, Section 4.3.3, “Performance Work Statement/Evaluation,” Line A
- <sup>28</sup>Attachment 3: Scope of Work, Section 4.3.3, “Performance Work Statement/Evaluation,” Line B
- <sup>29</sup>Attachment 3: Scope of Work, Section 3.9.2, “Secure Prescription Take-Back and Lock Box project,” Line B, ix
- <sup>30</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line G
- <sup>31</sup>Attachment 3: Scope of Work, Section 4.3.3, “Performance Work Statement/Evaluation,” Line C, ii
- <sup>32</sup>Attachment 3: Scope of Work, Section 4.3.1, “Prevention Activity Data Reports,” Line F