Norris Codex

Audit-ready 245D documentation for Minnesota home & community-based services providers.

MINNEAPOLIS, MN 55407

PATENT PENDING

PREPARED FOR MINNESOTA 245D PROVIDERS · EVERY FIGURE BELOW IS SOURCED (SEE PAGE 2)

The environment has changed — and it is current.

For a 245D-licensed provider, documentation is not paperwork. It is a condition of the license — written by the workforce hardest to keep, at the moment Minnesota is enforcing it more aggressively than at any point in memory.

$5,000

DOCUMENTATION FINE

Minnesota lets DHS fine a provider when required documentation components are missing — 20% of the claims paid or up to $5,000, whichever is less, and up to the greater of the two for repeat violations.[2]

3,411

PROVIDERS CUT OFF IN 2026

In a federal-deadline "revalidation," DHS terminated Medicaid funding to 3,411 providers — about 61% of those reviewed. Providers and advocates say the rushed process swept up legitimate, established organizations; affected providers may appeal.[1]

65%

CLAIMS REVIEWED PRE-PAY

Prepayment review is already live for high-risk services — a provider has just five business days to produce documentation on request — and from April 1, 2027 it expands to at least 65% of fee-for-service claims.[3]

These are not isolated events. The 2026 revalidation was driven by a federal Corrective Action Plan under which CMS threatened to withhold up to $2 billion from Minnesota's Medicaid program,[4] on a deadline so tight that providers and advocates say it caught legitimate organizations — in some cases for revalidations DHS itself had not finished processing.[1]

DHS attributed the largest share of terminations to documentation, not fraud — of 3,411 terminations, 2,491 were for incomplete or inaccurate administrative data, 916 for failed on-site verification, and only a small number for failed background studies; just 59 of the 5,583 providers reviewed (about 1%) were referred to the Office of Inspector General.[1] The throughline is unforgiving: a provider now must produce complete, audit-ready documentation on demand — measured against the DHS 245D Service Recipient Record Checklist (17 elements under § 245D.095), with incident reports moving within 24 hours under § 245D.06 and maltreatment reported to MAARC under Minn. Stat. § 626.557.[5]

And the record that carries all of this risk is produced, every shift, by the staff least likely to still be there at the next inspection: direct-support professional turnover runs roughly 40–46% a year, about 38% leave within six months, and replacing one DSP costs $2,413–$5,200.[6]

What Norris Codex does

Norris Codex is a Chrome-based workflow engine that turns a worker's rough service notes into an audit-ready documentation draft in under two minutes, working alongside the documentation system you already use — including SSIS — with no system integration, no procurement, and no IT project.[7] It is built for the roles inside a 245D provider: the Designated Coordinators and DSPs who write the notes, the Program Managers and Lead DCs who review them, and the billing reviewers who confirm the note supports the claim.

It never invents facts. When a worker's input doesn't support a required element — a duration, a time, a form name, an observation — Norris Codex marks it `INFORMATION REQUIRED` and prompts the worker to supply it, because a fabricated detail would be a fabricated record. The human supplies every fact; the software enforces completeness; every output ends in one line: *Computational Clarity Instrument — Requires Independent Human Judgment.* That is precisely the failure mode the new fine targets — Minnesota now penalizes missing required documentation components,[2] and Norris Codex enforces their presence at the point the note is written, before it ever reaches an auditor.

What it is — and is not

IT IS	IT IS NOT
A readiness layer on top of your current tools — including SSIS	A case-management system, EHR, billing platform, or EVV system
A drafting & completeness-checking instrument	Fraud detection — and it does not certify compliance
Source-bound — it structures what the worker records	An integration, a screen-scraper, or an autonomous agent
Built for DSPs, Coordinators, Program Managers & billing reviewers	A substitute for professional judgment

What it produces

Case Note

An audit-ready service note in the required fields, linked to the support-plan goal it serves under § 245D.071.[5]

Audit-Readiness / Gap Analysis

Measures a record against the statute itself — § 245D.095, with the DHS 17-element Service Recipient Record Checklist as a cross-reference, not the authority — separating confirmed from uncertain from missing, and flagging incident-report timeliness under § 245D.06 and MAARC reporting under § 626.557.[5]

> *In field validation, documentation that took 15–30 minutes is completed in under two, and supervisor review drops from 15–30 minutes to under five. Pilot organizations measure against their own pre-deployment baselines, not ours.*[7]

Why it survives everything around it

ZERO INTEGRATION

Deploys through Chrome Enterprise policy. No backend, no new IT project — nothing to integrate means nothing to scrape and nothing to breach.

DATA SOVEREIGNTY

Session-level isolation, cryptographic session clearing, and no persistent storage of user inputs.

GEN-AI COMPLIANCE

Non-training, minimal-retention configuration on Amazon Bedrock; U.S. regions only.

BAA-READY

A Business Associate Agreement template prepared by outside legal counsel is available on request.

The bigger picture

The state's documentation stakes are rising on a published schedule — a fine today,[2] and a 65% prepayment-review threshold in April 2027.[3] Norris Codex sits at the one place all of it converges: the daily service note, where documentation either holds up or falls apart. ARRM's member organizations deliver supports to more than 34,000 Minnesotans with disabilities and employ more than 27,000 staff;[8] and across Minnesota, providers licensed under 245D are effectively frozen at the market's current size through the end of 2027 under the statewide licensing moratorium.[9] Every one of them writes the note the fine, the review, and the inspection are measured against — and nearly 40% of the providers swept into the 2026 revalidation were in Hennepin County, Norris Codex's own backyard.[1]

See it transform your own note — bring a note, not a name.

Write a service note the way your staff actually write one — rough, fast, no client names and no protected health information (use "the client"). Watch Norris Codex turn it into an audit-ready draft in under two minutes, with every fact still yours and every missing detail flagged rather than filled.

Early co-design partners — 2026. Norris Codex is activating its first co-design partners at no cost; early partners measure against their own pre-deployment baselines and help shape the product before wider release.

EVERY FIGURE, TRACED TO ITS SOURCE

1. 2026 revalidation results. MN DHS, "Minnesota Revalidate 2026" / DHS Program Integrity (appeals data through June 9, 2026): of 5,583 providers reviewed across 13 high-risk categories, 2,061 revalidated and 3,411 (~61%) notified of termination — 2,491 for incomplete/inaccurate administrative data, 916 for failed on-site verification, a small number for failed background studies; 59 (~1%) referred to the OIG; ~40% of reviewed providers in Hennepin County; 60-day appeal. mn.gov/dhs/program-integrity. Corroborated by KARE 11, CBS Minnesota, KSTP, Rochester Post Bulletin, Minnesota Reformer (June 2026).

2. Documentation fine. Minn. Stat. § 256B.064, subd. 2(g): base fine for incomplete documentation = 20% of claims paid or up to $5,000, whichever is less; repeat violations = up to $5,000 or 20% of claims, whichever is greater. Enacted in the 2026 Human Services law. revisor.mn.gov.

3. Prepayment review. Minn. Stat. § 256B.0447: from April 1, 2027, enhanced prepayment review of at least 65% of fee-for-service medical-assistance claims. Already operating for high-risk services (Exec. Order Oct. 29, 2025; vendor Optum); five business days to respond to a documentation request (DHS MHCP Provider newsletter, June 2026). revisor.mn.gov / mn.gov/dhs.

4. CMS Corrective Action Plan. MN DHS, Medicaid Program Integrity: the revalidation of 5,583 high-risk providers was required under a Corrective Action Plan with CMS, which had threatened to withhold up to $2 billion. mn.gov/dhs/program-integrity.

5. 245D record & reporting. Minn. Stat. § 245D.095 (record requirements; DHS 245D Service Recipient Record Checklist, 17 elements); § 245D.071 (support plan / progress reviews); § 245D.06 (24-hour incident reporting); § 626.557 (vulnerable-adult maltreatment; MAARC). revisor.mn.gov.

6. Direct-support workforce. ANCOR, The State of America's Direct Support Workforce Crisis 2025; U of MN Institute on Community Integration (RTC on Community Living): DSP annual turnover ~40–46%; ~38% leave within six months; replacement cost $2,413–$5,200 per DSP.

7. Performance. Norris Codex field validation. Pilot organizations measure against their own pre-deployment baselines; every output is a draft requiring independent human review — not a guarantee.

8. ARRM scale. ARRM 2026 Sponsor & Partner Guide: members support 34,000+ Minnesotans with disabilities and employ 27,000+ staff statewide.

9. 245D moratorium. Statewide 245D licensing moratorium, Jan. 1, 2026 – Dec. 31, 2027 (MN Exec. Order 25-10; Minn. Stat. § 245A.03, subd. 7a): DHS is not accepting new 245D applications or service-line additions.

DHS enforcement figures (sources 1, 3, 4) are moving numbers; confirm the current DHS figure before quoting. Data current as of June 2026 reporting.

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