

Maximizing Enrollment Transforming State Health Coverage

The Road to the “Next Generation” IT System: Navigating Eligibility & Enrollment Changes

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Session agenda

- Taking stock of states issues (LD)
 - What realities and variables shape how states need to be positioned for effective IT systems implementation?
 - What issue is keeping you up at night about eligibility and enrollment/IT systems and 2014?
- Advice for navigating IT systems changes (JB)
 - A seasoned expert offers key considerations and factors for success as states tackle major IT system changes
- Addressing major priorities (LD, JB, States)
 - Discussing time sensitive, strategic and threshold issues
 - Comparing notes, problem-solving
 - States' TA needs

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Setting the Stage – Taking Stock

The evolving ACA context: Hope and heartburn (or factors influencing potential pathways to redesigned E&E systems)

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An Evolving ACA Implementation Landscape

- “Carved in stone” requirements
- Evolving Federal guidance and resources
- State movement
- Contingencies
 - Impact of waivers?
 - Timelines
 - CMS: rulemaking, compliance and transition periods
 - Political and economic factors

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Implications for States E&E IT Efforts

- \$\$ follows the E&E system design (FFP match)
- New design paradigm (consumer centric, more access locations, more standardization, expanded scope of interoperability)
- Distinct pressures on States to deliver
 - Attention on Medicaid, Human Services and HIX (but the rest of the information system also has to produce e.g. clinical, population, performance, risk information)
- No more business as usual (channeling the capital investments for E&E systems is only part of the issue)

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Forces (and resources) at work to influence and support states and IT

- CCHIO Innovator grants
- CCHIO HIX planning & implementation grants
- CMS enhanced FFP for MMIS (proposed)
- CMS Innovation Center – health home
- CMS Medicaid EHR Incentive Program
- ONC State HIE Cooperative Agreement Program
- ONC Regional Extension Center program
- ONC Beacon Community Program
- HRSA Community health center supports
- Private sector/foundation efforts

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From where states are now, how far and fast can they travel?

- 8 MaxEnroll states – 3 Innovator grant awardees out of 7 (11 states total)
- Innovator grantee states – 2 year fast track to accelerate spread across all states
 - Medicaid/MMIS based strategies: NY, OK
 - Insurance Exchange platform: MD, OR
 - Multi-state Exchange strategy: MA (with RI,ME,VT,CT)
 - Multi-state cloud strategy: KS w/MO

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Charting a course for E&E systems...from different spots on the map

- Varying state positions
 - Advanced modernization efforts to date that can be expanded to necessary scale and robust functionality
 - More limited modernization efforts to date, lacking robust business needs assessment, technology asset/gap analysis and planning needed
- Varying state assets for managing major system changes
 - History, track record, readiness
 - Leadership, knowledge, other human capital

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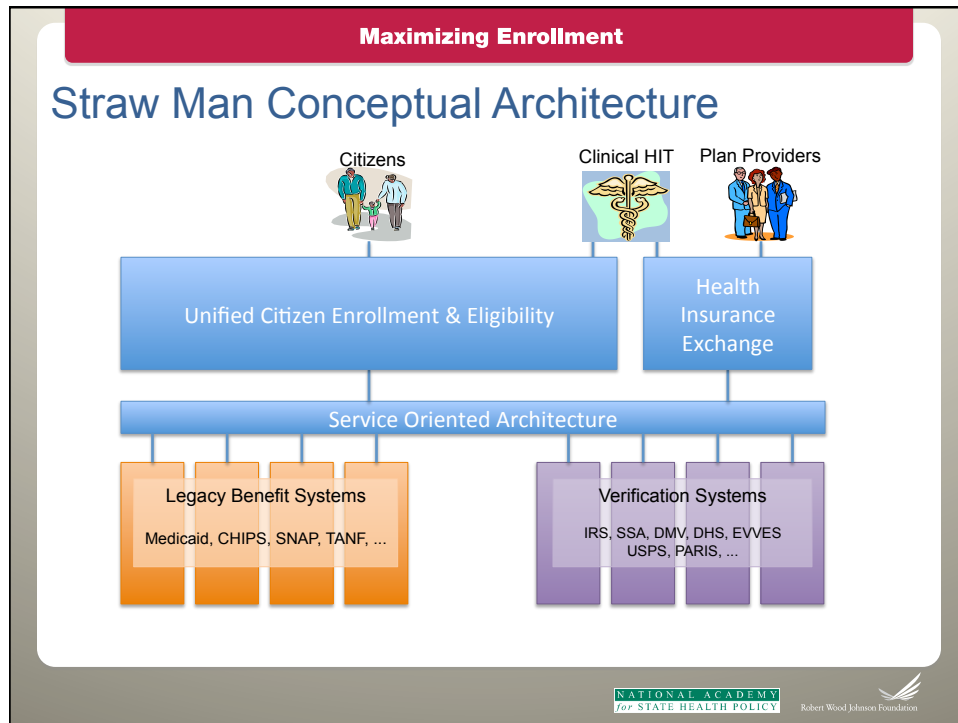
Navigating the Road to the “Next Generation” IT System

Key Considerations for States and Leaders of IT System Change Initiatives

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Key Considerations


- Business Capability Needs Drive the Plan
- Phase the Work – smaller steps reduce risk
- Plan for Learning
- Align Scope to Governance
- Look for help - Sources and Financing
- Business change requires People, Process and Technology





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Business Capability Needs Drive the Plan

- What business capability changes are essential to unifying enrollment?
 - When do you need them?
 - Why do you need them?
 - How must IT change to enable these capabilities?
- Start with business needs, not perceived IT limitations
- Simplify then automate



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Phase the Work

- Focus on urgent, high value-add capabilities first
 - The smaller the phase, the higher the success rate
 - Early delivery of high-value change sustains momentum
 - Business value, not technical elegance, is a primary goal
- Define what business success looks like by phase
- Early phases require early details, later phases can be better detailed over time.

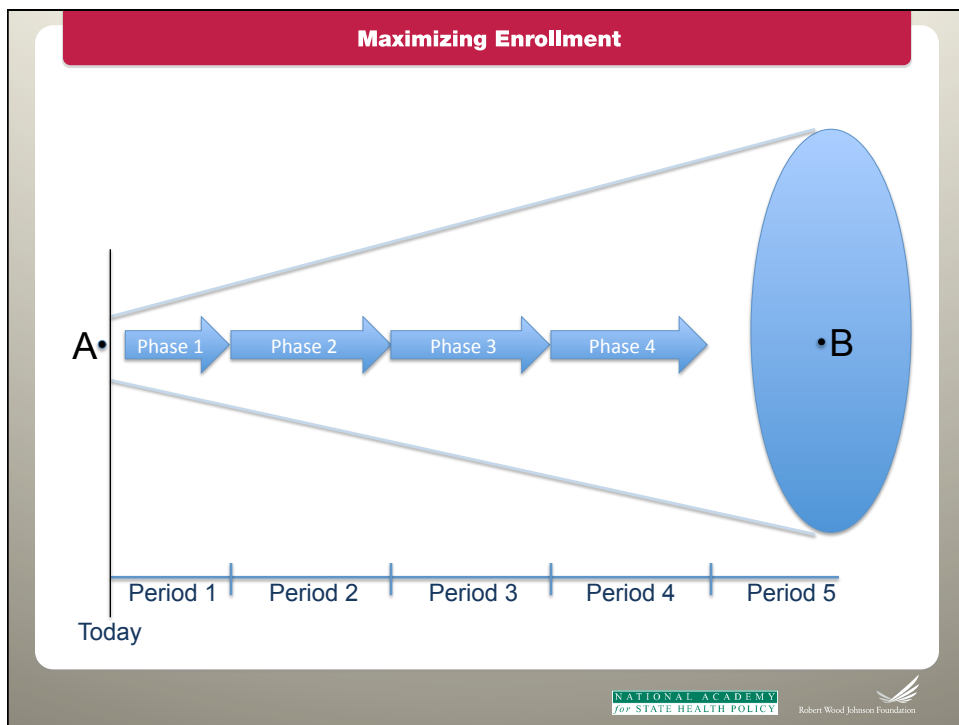
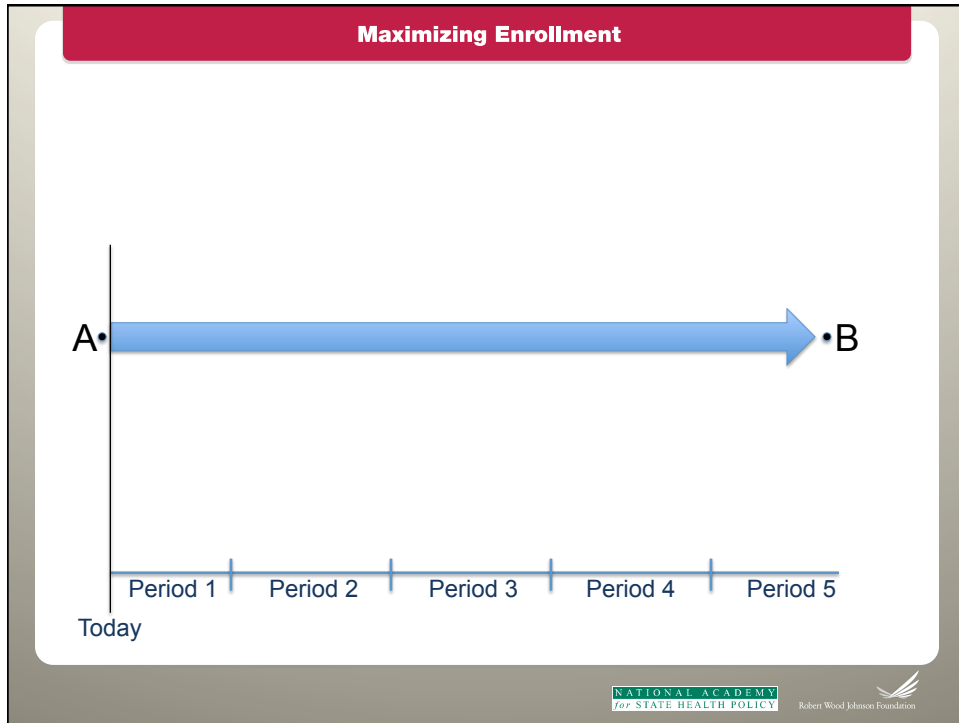


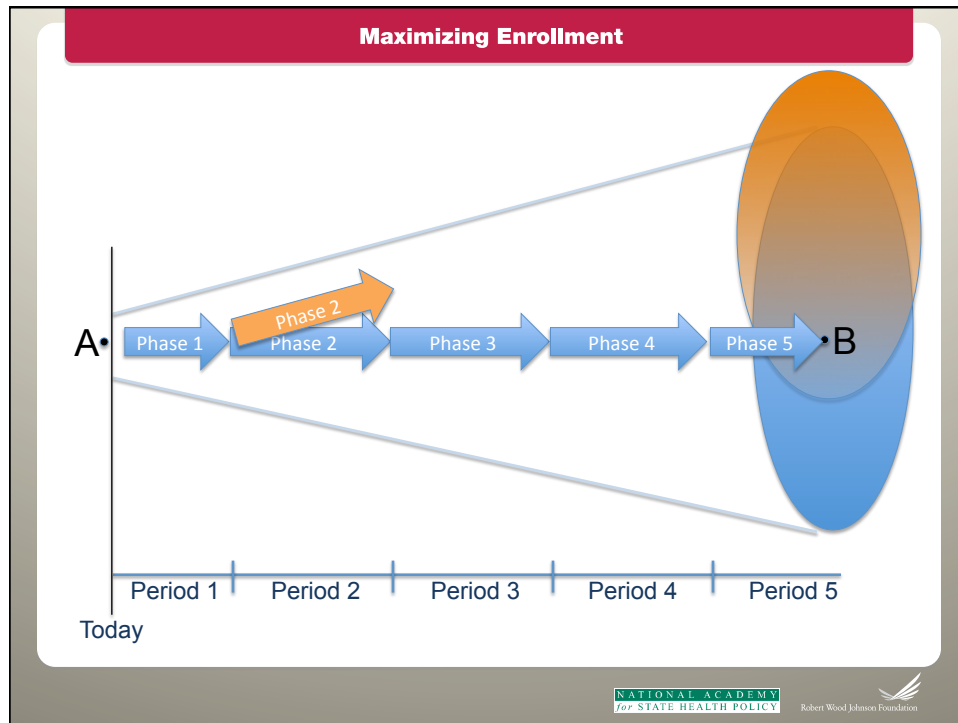
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Plan for Learning

- Strive for early phases that offer learning opportunities
 - example, integrate enrollment for just two programs
 - Look for pilot/beta opportunities
- Recognize that plans will evolve as program proceeds
 - We always have permission to get smarter.







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Align Scope to Governance



- Projects stumble or fail when their mandate exceeds the authority of their sponsor
- Ultimately, enrollment modernization will require cross-agency governance structure
- Two Governance levels
 - Deciding – e.g., steering committee chaired by one or more affected executive sponsors
 - Working – cross-agency task force that makes recommendations to steering committee
- Governance can start small if aligned with early phases

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Look for Help - Sources and Financing

- Custom vs. “package”
 - Solutions from other states or consortiums are similar to packages
- State-operated vs. Contractor operated
 - Infrastructure
 - Application development and support
 - Business operations (e.g., call center)
- State-financed vs. contractor-financed (Transaction pricing)



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People, Process and Technology

- While technology enables change, it is rarely sufficient
- People & Process changes require equal attention and can be harder to execute



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Key Considerations Review

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- Phase the Work – smaller steps reduce risk
- Plan for Learning
- Align Scope to Governance
- Look for help - Sources and Financing
- Business change requires People, Process and Technology

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Discussing States' Issues and Priorities

Considering your route

Strategies to tackle major issues

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Getting it right – business needs analysis for technology planning

- How do you balance the time and political effort required for collaborative multi-stakeholder analysis with focus on the urgent short term priorities?
- Who are the essential players who need to provide input on business processes and technology planning?
- How do you make decisions about Medicaid and Human Services when the HIX is not yet established and in decision making mode?
- What is the role of an aligned and empowered governance structure for carrying out business needs assessment
- What are examples of effective business analysis and technology planning?

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Medicaid integration

- How are states leveraging Medicaid MMIS
 - as the foundation for ACA/HIE E&E systems?
 - as a component, linking to another master E&E system?
- What factors influence what strategy you pursue?
- Given state budget planning cycles, match requirements and ongoing IT system support needs, what financing strategies are states using to leverage Medicaid?

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Technology plan

- How do you design and sell an approach that might change e.g. go to the cloud?
- How do HIT and E&E systems relate?
- How do you know whether to rip or replace or re-use?
- What will it mean to take use other states' "products"?
- What criteria can be used to assess various products and platforms ?

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Sources and Financing

- How do the state vs non-government entities define and structure their roles as partners in supporting E&E IT systems? E.g. state's HIO (HIE network), HIX.
- What are the implications of the new IT ecosystem e.g. open source and service oriented architecture in terms of levels of state investments on an ongoing basis?
- What are the essential personnel/sources of expertise you need, when, to manage E&E systems changes as part of the states' overall IT efforts ?
- What are the emerging procurement strategies that need to be considered in terms of scale, feasibility, resources e.g. across states, regions?
- How do you use contractors effectively?

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Effective governance

- Who needs to be involved?
- How do you get sufficient ongoing support and empowerment (e.g. sufficiently supported and insulated from politics etc) over the time horizon needed to fully implement the systems changes
- What are effective methods to get buy in to establish necessary governance structures
- Options/examples of effective governance structures – keys to making them effective?