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DEPARTMENT

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Annual Update 2019**

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1. EXECUTIVE SUMMARY

The State of New Mexico Human Services Department (HSD) is in the process of designing, developing, and implementing a replacement Medicaid Management Information System (MMIS). The goal of the Medicaid Management Information System Replacement (MMISR) project is to replace the outdated monolithic system which has been in service since 1996, and replace it with a modular one that meets the Center for Medicare and Medicaid Services (CMS) requirements. In March, 2012 CMS outlined the Medicaid Information Technology Architecture (MITA) 3.0 initiative detailing the framework that states are required to follow when updating or enhancing their Medicaid Enterprise systems. HSD realized the value and potential of MITA and set out to replace their current MMIS with a modular approach that blends technology components with Business Process Outsourcing (BPO) solutions. MMISR is being designed in context of an overall State initiative called HHS 2020, which is a multi-year, evolutionary plan to create an ecosystem where all New Mexico HHS departments can share infrastructure, shared services, and data. The goals and objectives for MMISR are in alignment with MITA 3.0 Framework and the Seven Conditions and Standards (7C&S). HSD views this approach as one that will allow for traceable business, information, and technical capabilities, extensive Service Oriented Architecture (SOA) based enterprise information systems, and ultimately improved healthcare outcomes for the citizens of New Mexico.

MITA 3.0 Framework Overview

CMS has developed the MITA 3.0 Framework to aid states in efforts to modernize operations and management of their Medicaid programs. The framework provides guidance and recommendations for states in the planning and operation of their Medicaid programs and systems. The guidance is based on best practices from industry and government, and also addresses specific issues created by the policy and funding structures of Medicaid involving cooperation and collaboration of entities at both the federal and state levels. Figure 1 portrays the MITA 3.0 Framework as a whole, and demonstrates how the three architectures, Business Architecture (BA), Information Architecture (IA) and the Technical Architecture (TA), form the overall State Self-Assessment (SS-A).

The MITA Framework requires all states to perform a SS-A, present the results to CMS at the conclusion of the SS-A, and maintain the assessment results on an annual basis. All Advance Planning Documents (APDs) that request funding from CMS must be accompanied by a current SS-A, and the APD is used to describe how the expenditures are expected to advance the MITA Maturity of the Medicaid Enterprise. MITA Maturity is measured via capability matrices that assess individual qualities of the business, information, and technical architectures across ten business areas. In order to obtain a particular level of maturity, the State Medicaid Agency (SMA) must have accomplished all of the defined capabilities for that level.

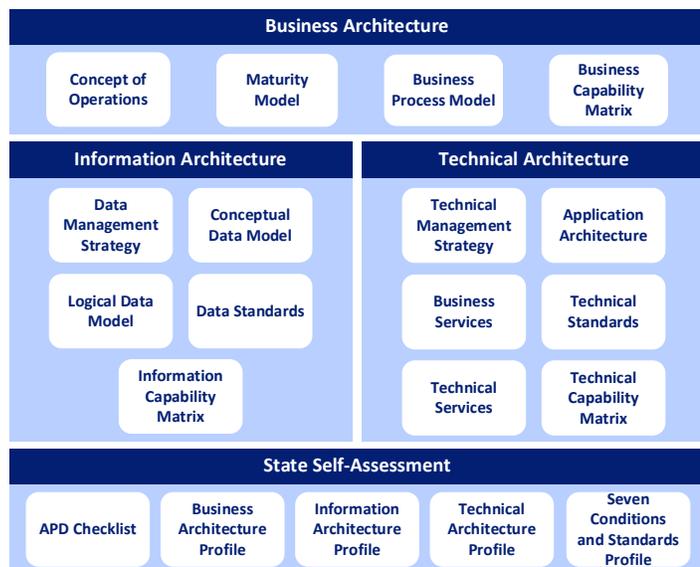


Figure 1: MITA 3.0 Framework

MITA Maturity Model

CMS developed a maturity model describing the capability expectations of each maturity level within each architectural perspective. The MITA Maturity Model (MMM) is described in MITA Framework 3.0, Part I, Chapter 3 MITA Maturity Model, and is summarized in this section. The MMM serves as a reference model for definitions of Medicaid Enterprise capabilities. The MMM establishes boundaries and measures used to determine whether a state’s capability has a clear and concise definition. The MMM consists of five levels of maturity, assigned to each of the capability matrix questions. The varying levels represent a progression of maturity of quality improvement standards for the business, technical, and information architectures for Medicaid programs. The table below describes the basis for each maturity level as it progresses from level 1 to level 5.

Table 1: MITA Maturity Model (MMM)

MITA 3.0 Maturity Levels	
Level 1	The SMA focuses on compliance with regulatory requirements for providers and members, as well as payments of claims within a specified timeframe to encourage the participation of providers, thus promoting access to care.
Level 2	The SMA’s main focus is so that improved health care outcomes are a by-product of new, creative programs which are primarily focused on managing costs, e.g., managed care and waiver programs.
Level 3	The SMA focuses on coordinating and collaborating across intrastate health care programs, contributing to improved outcomes. There is a widespread adoption and use of national standards for administrative data, and sharing of business services that provide a better base for comparing outcomes.
Level 4	With widespread and secure access to clinical information, the SMA is able to focus on interstate information exchange and business services. All stakeholders now have access to clinical data that produces a major leap forward in analysis of health care outcomes, which empowers members and providers to make decisions affecting outcomes.
Level 5	The SMA has reached national interoperability. Agencies have access to necessary data to compare across other agencies and states.

HSD MITA SS-A 2019 Update: Overview

In 2015 HSD completed a MITA 3.0 State Self-Assessment (SS-A), followed by a subsequent 5-year Roadmap update in 2017. In order to meet the requirements set forth in the MITA SS-A 3.0 Framework, HSD contracted with CSG Government Solutions, Inc. (CSG) to assist in completing an updated MITA SS-A for 2019. This document provides an update to New Mexico’s MITA Concept of Operations. Through this SS-A update, both HSD and CMS gain a clear picture of the accomplishments of the HHS 2020 initiative to date with regard to advancement in MITA Maturity and HSD’s To-Be vision of MITA maturity level 4. The MITA SS-A update package consists of the following components:

Updated MITA Concept of Operations (COO)

The Concept of Operations is the foundational document utilized by HSD to describe the transformation plan for the Medicaid Enterprise to move from its current state (As-Is) to the vision for the future (To-Be). This document builds upon the MITA maturity levels assessed during that 2015 SS-A. HSD's vision for the future is to achieve a MITA maturity level of 4 across their Medicaid Enterprise. HSD has taken on numerous initiatives, identified in their MITA Roadmap (described below), aimed at improving MITA maturity. This COO update document serves as an input to the 5-year MITA Roadmap, by identifying gaps and recommending projects that would aid HSD in achieving a To-Be maturity level of 4. The CSG MITA team leveraged previous assessment information and project artifacts (e.g., RFPs, BTC Journeys, etc.) as inputs to the MITA COO update.

Updated MITA 5-year Roadmap

Another key component of the MITA SS-A package is a MITA Roadmap. The roadmap identifies and describes current and planned initiatives that are the enablers and drivers moving the New Mexico Medicaid Enterprise toward HSD's vision for the future, and addresses the goals and objectives of HSD. The roadmap is a rolling 5-year outlook and is updated annually as part of the MITA SS-A update.

Updated MITA Maturity Profiles

MITA maturity profiles summarize the assessed MITA maturity levels of the Medicaid Enterprise for each architecture grouping (BA, IA, TA, and 7C&S). The MITA maturity profiles are presented at the business area level and summarize the detailed assessment results collected by using the capability matrices aligned with each particular architecture.

HSD MITA SS-A 2019 Update: Approach

The HSD MITA 3.0 SS-A update was conducted over approximately a four-month time frame, between late June and early October 2019. The approach to conducting the MITA SS-A update consisted of the CSG MITA team collecting project artifacts, analyzing the input information, leveraging the capability matrices questions, validating the assessed MITA maturity, and producing the SS-A. The overall goal of the update was to assess MITA maturity progress made over the last four years in accordance with the initial 2015 assessment and 5-year MITA roadmap, while also minimizing impact on stakeholders. CSG MITA team performed the following key activities to complete the SS-A update:

- Prepared and conducted a MITA Kick-off presentation on July 18th, 2019
 - ✓ Introduced the update project, process, and approach to appropriate stakeholders
- Prepared and conducted a MITA 101 presentation on July 30th and July 31st, 2019
 - ✓ Provided an overview of MITA, establishing a foundation and common understanding of the project
- Coordinated, collected, inventoried, and analyzed artifacts to inform the 2019 assessment
 - ✓ Leveraged the 2015 SS-A, 2017 Roadmap update, existing BTC Journeys, RFPs, and contracts
- Validated assessment through targeted questions catalogued and distributed to HSD SMEs
- Produced updated project artifacts: MITA Concept of Operations, 5-year MITA Roadmap, and MITA Maturity Profiles

HSD MITA SS-A 2019 Update: Results

The following table provides a summary view of the results of the 2019 MITA assessment. It demonstrates MITA maturity at the business area level, where each of the three MITA architectures were in 2015 compared to that of 2019. The comparative results are representative of the 'As-Is' progress, continually working towards HSD's To-Be vision of maturity level 4.

Table 2: Overall MITA Assessment Results

Architecture: MITA Defined Business Area	Business		Information		Technical	
	2015 As-Is	2019 As-Is	2015 As-Is	2019 As-Is	2015 As-Is	2019 As-Is
Business Relationship Management	1	2	1	2	1	1
Care Management	1	1	1	2	1	1
Contractor Management	1	2	1	2	1	1
Eligibility and Enrollment Management	1	2	1	2	2	2
Financial Management	1	2	2	2	1	1
Member Management	1	2	1	2	1	1
Operations Management	1	1	1	2	1	1
Performance Management	1	1	2	2	1	1
Plan Management	1	1	1	2	1	1
Provider Management	1	2	1	2	1	1

Due to the structure of the MITA Framework, it is possible that although progress has been made, that progress may not be reflected in the assessed maturity level seen in the table above. This document is organized to reflect and demonstrate the progress achieved at a detailed level. Each MITA architecture, as well as the 7C&S, has a dedicated section below. Within each dedicated section is the detailed assessment results, including progress analysis, and gap analysis providing recommendations for continued MITA maturity advancements.

2. DOCUMENT OVERVIEW AND PURPOSE

The purpose of the document is to provide the results of the 2019 MITA SS-A update. It also serves as an update to the HSD MITA COO. The COO lays the foundation for HSD to outline goals and objectives for the Medicaid Enterprise, as well as conceptual plans for transformation through the identification and analysis of the current state (As-Is) and desired future state (To-Be). The bullet points below outline each document section and describe its role in the 2019 SS-A update.

- **Section 1, Executive Summary** – Describes the intent of the 2019 MITA assessment, the purpose of this document, and provides an at-a-glance view of the New Mexico Medicaid Enterprise’s assessed MITA maturity in comparison to that of the 2015 assessment.
- **Section 2, Document Overview and Purpose** – Details the purpose of this document, outlines what to expect in each document section, and details the approach and methodology used for performing the 2019 MITA SS-A and producing the update MITA SS-A package.
- **Section 3, Business Architecture** – Provides assessment results for each of the 10 MITA Business Areas comprised of its associated business processes. Business processes are evaluated utilizing the Business Capability Matrix (BCM), which asks on average 10 to 12 questions related to various aspects of the business process, such as accuracy, timeliness, effectiveness, and efficiency.
- **Section 4, Information Architecture** – Provides the assessment results for the IA, reviewing the capabilities of the Medicaid Enterprise related to Data Management Strategy, Data Models, and Data Standards. These categories were evaluated utilizing the Information Capability Matrix (ICM), asking a total of 70 questions.
- **Section 5, Technical Architecture** – Provides the assessment results for the TA, reviewing capabilities of the Medicaid Enterprise related to Access and Delivery, Intermediary and Interface, and Integration and Utility. These categories each contain 5 subcategories of capability, asking a total of 150 questions.
- **Section 6, CMS Seven Conditions and Standards** – Provides the assessment results for the CMS-defined 7C&S, reviewing capabilities of the Medicaid Enterprise related to each condition or standard. This analysis is done across each of the three architectures (BA, IA, TA).
- **Appendices** – Provide supplemental MITA SS-A update information.
 - ✓ **Appendix A, MITA Maturity Profiles** – The third component of the MITA SS-A package, the MITA maturity profiles provide a summary glance at the MITA maturity of the 10 business area across each MITA architecture BA, IA, and TA.
 - ✓ **Appendix B, SS-A Update Inputs** – Provides a catalog of inputs used to inform or assess the MITA maturity of the New Mexico Medicaid Enterprise.

The MITA 3.0 SS-A update also entails the BA, IA, and TA assessments, and the alignment of each architecture with the CMS 7C&S. The results of the MITA 3.0 SS-A are incorporated into the COO and the 5-year MITA Roadmap. The finalized SS-A package provides the artifacts required by CMS describing New Mexico’s alignment with the MITA Framework, including recommendations for progressing in MITA maturity.

2.1 CMS MITA Initiative and Framework

The CMS MITA Initiative defines the boundaries of the Medicaid Enterprise and the MITA missions, goals, and objectives as represented in the figure to the right. The MITA Initiative also defines guiding principles and key business and technical architecture features to apply to the New Mexico Medicaid Enterprise.

The MITA 3.0 SS-A focuses on the approach taken by a Medicaid Enterprise to the planning and management of Medicaid and related operations, and is not intended to probe into the details of individual business activities. It provides a high level assessment of business qualities and technical capabilities, and results in recommendations for strategic improvements to the organizations that comprise the enterprise.

CMS has also established the 7C&S that define their expectations for overall performance of Medicaid operations and systems. The purpose of the 7C&S is to define key principles and requirements for Medicaid operations and supporting technologies to qualify for enhanced funding (90%) provided by CMS. The 7C&S are assessed as part of an SS-A.

MITA Maturity is measured via capability matrices assessing individual qualities and capabilities of the business, information, and technical architectures across the ten business areas. BA is further broken down into 80 business processes, as shown below.

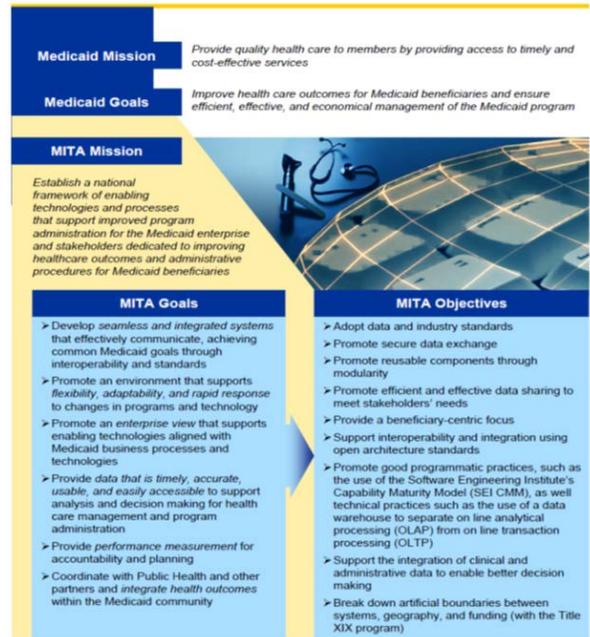


Figure 2: MITA Initiative

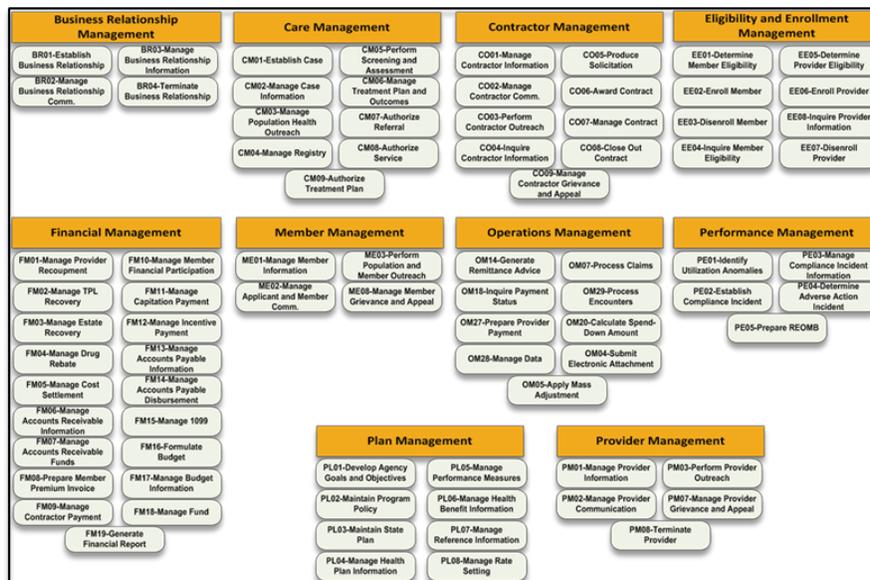


Figure 3: MITA Business Areas

2.2 Approach and Methodology

The MITA 3.0 SS-A update was conducted in accordance with the CMS MITA 3.0 Companion Guide, following the goals, methodology, and guidelines. The MITA Initiative focuses on the Medicaid Enterprise and defines MITA context as three spheres of influence:

- The domain where federal matching funds apply
- The interfaces and bridges between the SMA and Medicaid stakeholders, including providers, beneficiaries, other state and local agencies, other payers, CMS, and other federal agencies
- The sphere of influence that touches, or is touched by, MITA (e.g., national and federal initiatives, including the Office of the National Coordinator for Health IT (ONC), Development Standards Maintenance Organizations (DSMO), and other federal agencies such as the Internal Revenue Service (IRS))

HSD is currently in the middle of a large and complex modernization effort, HHS 2020. This modernization effort, which began in 2014, is a multi-year, evolutionary plan to create an ecosystem where all New Mexico HHS departments can share infrastructure, services, and data. HSD is also focused on adopting and leveraging the MITA Framework in order to accomplish their modernization goals and objectives, listed below.

HSD Goals and Objectives

- Modernize the Medicaid Program
- Operate the Medicaid program within budget constraints by controlling costs and focusing on quality over quantity
- Adopt and utilize Health Information Technology
- Improve Program Integrity and combat healthcare fraud, waste, and abuse
- Improve health outcomes for New Mexicans
- Increase administrative efficiencies for the determining participant application and eligibility
- Integrate New Mexico's Behavioral Health System within the changing healthcare environment
- Update and/or replace IT systems for improved simplicity and better efficiencies
- Improve New Mexico's business systems and services

Given the intense nature of the HHS 2020 initiative and surrounding projects, CSG worked with HSD to develop an approach for completing a 2019 3.0 MITA SS-A update while minimizing impact on state resources. The following bullets provide a high-level outline of the steps taken to complete the MITA SS-A update. The sections that follow detail the completion of each task.

1. Planning and Preparation
2. Coordinate, Collect, Inventory, and Analyze Artifacts
3. Performing the Assessment
 - ✓ Determining MITA Maturity
 - ✓ Validating the Assessment
 - ✓ Producing the MITA SS-A 3.0 Package

2.2.1 Planning and Preparation

Starting any successful engagement requires that significant effort go into the planning and preparation of the engagement. CSG is committed to not only the success of our project teams, but also the success of our clients. To accomplish that task, the CSG MITA team completed the following planning and preparation tasks:

- **MITA Boot Camp** – Prior to project initiation, the CSG MITA team gathered at our corporate headquarters in Chicago, Illinois to prepare for, discuss, and plan an approach for completing a MITA SS-A update for HSD. The boot camp also included beginning preparations for the completing a MITA Kick-off Presentation and MITA Training.
- **MITA Kick-off Presentation** – The MITA Kick-off Presentation served as a way for the CSG MITA team to introduce ourselves to leadership and other stakeholders alike. It also served as a forum to learn and set expectations for the project; it also included a brief overview of MITA.
- **MITA 101 Training** – This training is designed to provide a more detailed view into MITA than the Kick-off Presentation. It prepared both leadership and potential subject matter experts for completion of the MITA SS-A by explaining the components of a MITA assessment, and described what their role would be in completing the SS-A.

2.2.2 Coordinate, Collect, Inventory, and Analyze Artifacts

When conducting a MITA SS-A it is common to conduct workshops with state subject matter experts (SMEs). This is done in order to gather information needed to assess the current state (As-Is) capabilities of the enterprise, identify ‘pain points’, and to document the desired future state (To-Be). In order to minimize the impact on state resources, full workshops were not conducted as part of this SS-A. Relying on years of Medicaid and MITA experience, the CSG team collected and analyzed a variety of project artifacts. These artifacts, as seen in the graphic to the right, were used as inputs to inform the 2019 assessment. The bullet points outlined below describe the different types of inputs.

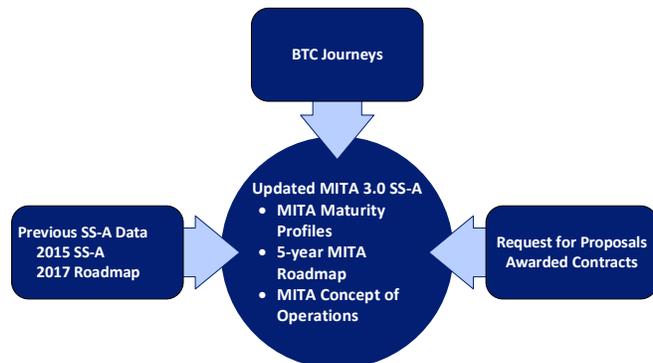


Figure 4: MITA SS-A Inputs 2019

- **Previous New Mexico SS-A Data** – The previous SS-A data (2015) and Roadmap update (2017) were used to establish a baseline of overall MITA maturity. That baseline was then used to help track progress over time, informing the current state (2019) of MITA maturity. Progress was then measured against the HSD vision of MITA maturity level 4.
- **Business Transformation Council (BTC) Journeys** – HSD partnered with an Organizational Change Management (OCM) vendor. As part of that agreement, the OCM vendor is assisting HSD in a business process redesign effort. CSG leveraged Journeys completed at the time of the assessment in accordance with the project schedule. Journeys completed after the close of the document collection window were not taken into consideration.

- **Request for Proposals (RFPs)** – The HHS 2020 initiative requires HSD to procure a variety of modular services. In accordance with their vision set forth in the 2015 MITA Roadmap, HSD has begun contracting with vendors. The CSG MITA team assessed the RFPs that have been released to the vendor community as of August 21st, 2019. The information gleaned from these RFPs was used to inform the 2019 MITA 3.0 SS-A update.
- **Awarded Contracts** – As mentioned, HSD has begun the process of contracting with vendors in order to accomplish their HHS 2020 goals. To date, they have contracted with a System Integrator (SI) and a Data Services (DS) vendor. These are two of the six modules identified in the New Mexico MITA Roadmap. The CSG MITA team reviewed the contracts awarded to each vendor, compared them to the RFP requirements, and assessed MITA maturity accordingly.
- **Additional Project Artifacts** – The CSG MITA team also leveraged additional documents available on the HSD SharePoint site. For example, SI and DS vendor status reports and MMISR update presentations were used during the assessment.

2.2.3 Performing the Assessment

Upon conclusion of the document collection and analysis, the CSG team began synthesizing the gathered information to determine MITA maturity. The primary tools used to evaluate MITA maturity were the **capability matrices**. Each architecture of the Medicaid Enterprise has a dedicated capability matrix, defined by the MITA 3.0 Framework, and associated capability determination questions. The associated matrix for each architecture (BA, IA, TA) details specific areas of capability important to that aspect of the Medicaid Enterprise.

Using the appropriate capability matrix (according to the architecture being assessed), the CSG MITA team reviewed each capability question. Leveraging the project artifacts (e.g., 2015 SS-A, RFP, BTC Journeys, etc.), industry knowledge (CMS MITA 3.0 Companion Guide), and questions validated by SMEs, a determination regarding MITA maturity was rendered for each question asked in the matrices.

The assessment focus was squarely on identifying and documenting where MITA maturity progress had been made. Significant consideration was given to the impact of the HHS 2020 initiative. In 2015, HSD set out to implement six new modularized aspects of the Medicaid Enterprise that focused on improvement of MITA maturity. Based on already-contracted modules (SI and DS), as well as available Request for Proposals (RFPs), maturity levels were adjusted accordingly and in accordance with HSD's vision.

Determining MITA Maturity

As described above, the CSG MITA team utilized the capability matrices as the primary tool for determining the MITA maturity of each architecture defined by CMS. Individual capability questions pertaining to the Medicaid Enterprise were each assessed with a MITA maturity level ranging from level 1 to level 5. In order for the MITA maturity level to advance, all capabilities at a particular maturity level must be met. Often, though progress has been made across a variety of capabilities, one area might be behind the others (e.g., Timeliness) and therefore the overall MITA maturity must be assessed accordingly. For example, within Business Architecture, BR01 – Establish Business Relationship has 10 questions associated with the capabilities of establishing a business relationship. In order for the MITA maturity of BR01 to reach a particular maturity level, all capabilities must be met at both the desired level of MITA maturity, and across all 10 questions asked. So, if 9 of the 10 capability questions were assessed at level 3 maturity, but 1 of the 10 was assessed at level 2 maturity, the overall MITA maturity of the Business Process would fall back to level 2. The same logic applies when examining IA, TA, and the 7C&S.

Validating the Assessment

During the assessment, the CSG MITA team catalogued capability questions that needed further clarification before a MITA maturity level could be assessed. Once completed, the catalog of questions was provided to HSD. Leadership then distributed the questions for review and comment to the necessary subject matter experts. In addition, the approach for completing the assessment and a review of the COO update and 5-year MITA Roadmap was discussed with HSD leadership throughout the course of the assessment activities.

Producing the MITA SS-A 3.0 Package

Finally, the outputs of conducting and validating the assessed MITA maturity were used to develop a progress analysis and a gap analysis view of the HSD Medicaid Enterprise. Based on those results, the CSG MITA team finalized the updates to the MITA COO and leveraged the outputs to develop an updated 5-year MITA Roadmap. The 5-year MITA Roadmap outlines the progression of the current projects and providing recommendations for HSD to achieve MITA maturity level 4. All finalized maturity level determinations were logged into the CSG MITA tool and the MITA Maturity Profiles were produced, completing the SS-A package for HSD to submit to CMS. A brief outline of what each component of the SS-A package entails is provided below.

- **MITA Concept of Operations** – The MITA COO (this document) takes into consideration the goals and objectives of the SMA and provides a framework to describe the vision for transformation of the As-Is (current) operations to the To-Be (future) environment.
- **5-year MITA Roadmap** – Leverages the MITA COO results to identify and plan tangible and achievable projects or enhancements that will drive the SMA towards advancement in MITA maturity. The 5-year MITA Roadmap is updated annually as part of the MITA SS-A update process and is a living document that documents a ‘rolling’ 5-year approach.
- **MITA Maturity Profiles** – The maturity profiles are the summarized view of the results of the finalized MITA SS-A update. They demonstrate the MITA maturity at the Business Area and/or the MITA architecture level.

The following sections provide the results of the MITA SS-A. As previously discussed, the focus of the assessment was on identifying and documenting the progress made in MITA maturity since 2015. Each of the three architectures, as well as the 7C&S, has its own dedicated section. While each architecture is focused on a different aspect of capability, the overall approach to completing the assessment remained the same and the focus of each is to identify and discuss progress analysis and gap analysis.

3. BUSINESS ARCHITECTURE

CMS defines key capabilities for the State Medicaid Enterprise’s Business Architecture (BA) through the MITA 3.0 Framework. This guidance includes key topics related to management of the BA and details the key capabilities required for each level of MITA maturity. The BA consists of 80 business processes divided into 21 categories across 10 business areas, and is structured to identify the capabilities of the Medicaid Enterprise at both the process and area level. Individual components that make up the BA are described below.

- **Concept of Operations (COO)** – Used to describe the current business operations and outline plans for business transformation in the future at a high level.
- **MITA Maturity Model (MMM)** – Describes the five levels of MITA maturity and outlines the measurable criteria needed to achieve an advancement from one level to the next.
- **Business Process Model** – Provides a collection of the business processes common to all states, and provides a basic framework and high-level description of each. This includes a Business Process Template (BPT) and encourages states to develop business workflows.
- **Business Capability Matrix (BCM)** – The BCM is used to evaluate the maturity of the BA. It consists of a range of questions that are applied across each of the 80 business processes and defines the criteria that must be met to achieve a particular level of MITA maturity (1 – 5). The result is 887 data points that inform HSD of the BA capabilities of the Medicaid Enterprise, and inform the assessed MITA maturity.

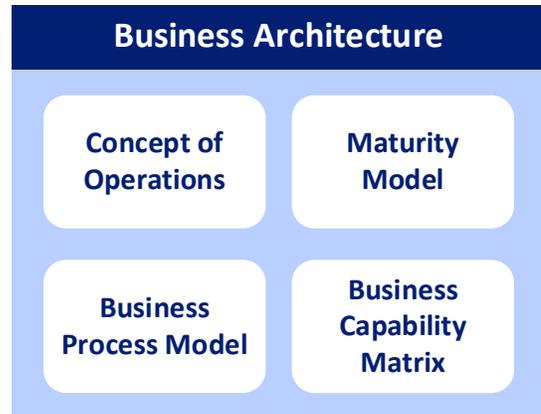


Figure 5: Business Architecture Components Diagram

The BA’s focus is on how the SMA operates their business processes, the day-to-day operation of the Medicaid Enterprise. The BCM focuses on the following capability categories: Timeliness of Process, Data Access and Accuracy, Effort to Perform, Efficiency, Cost Effectiveness, Accuracy of Process Results, Utility or Value to Stakeholders. Questions on the BCM are dedicated to reviewing each category against the MITA Framework established boundaries for BA.

The following sub-sections review the BA capabilities at both the business process (80) and business area (10) level. Using the BCM, the CSG MITA team reviewed the capability questions for each business process and assessed a current (As-Is) MITA maturity level. Based on that assessment, any progress that has occurred since the last SS-A (2015) was recorded.

In addition, the CSG MITA team conducted a gap analysis identifying and outlining key parameters that will need to be addressed in order to advance in MITA maturity from the assessed As-Is MITA maturity to the desired To-Be MITA maturity. The gap analysis provided at the Business Area and Business Process level in the sections below is aimed at highlighting the major themes or areas of focus. However, in order to fully achieve a desired MITA maturity, all parameters in the BCM must be met.

3.1 Business Relationship Management

The Business Relationship Management business area defines the exchange of information and Trading Partner Agreements (TPA) between the SMA and its partners, including collaboration among intrastate agencies, interstate (i.e., another state) agencies, and federal agencies. These agreements contain functionality for interoperability, establishment of inter-agency Service Level Agreement (SLA), Memorandum of Understanding (MOU), identification of the types of information exchanged, and security and privacy requirements. The Business Relationship Management business area has a common focus (e.g., data exchange standards and SLA) and is responsible for the business relationship data store.

The Business Relationship Management business area is comprised of a single business category:

- **Standards Management** – Business activity to ensure business partners are utilizing established standards and methods for information exchange
 - ✓ BR01 – Establish Business Relationship
 - ✓ BR02 – Manage Business Relationship Communication
 - ✓ BR03 – Manage Business Relationship Information
 - ✓ BR04 – Terminate Business Relationship

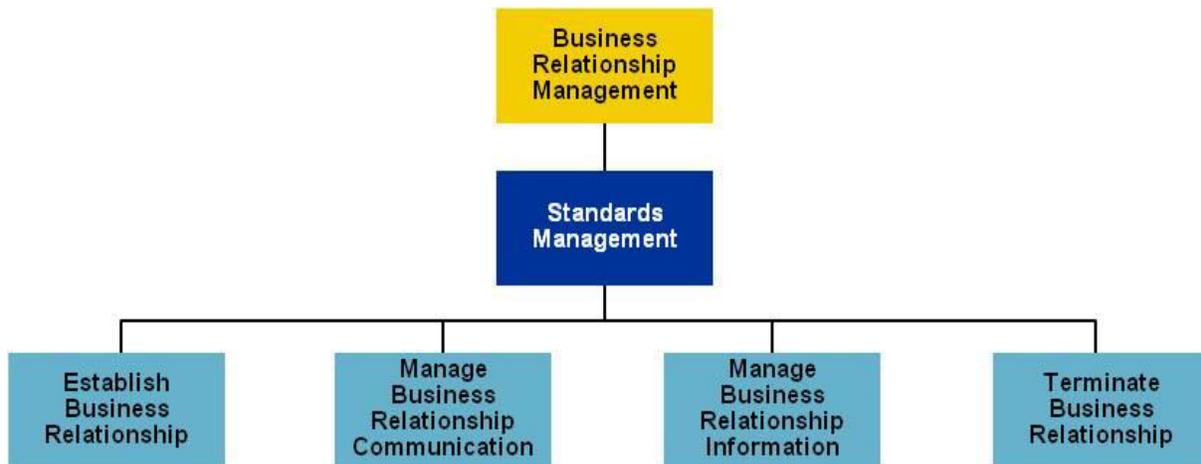


Figure 6: Business Relationship Management Diagram

The following table provides a summary view of the assessed MITA maturity for Business Relationship Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Business Relationship Management	2015 As-Is	2019 As-Is	To-Be
BR01 – Establish Business Relationship	2	2	4
BR02 – Manage Business Relationship	1	2	4
BR03 – Manage Business Relationship Communication	1	2	4
BR04 – Terminate Business Relationship	1	2	4
Business Area Maturity Level	1	2	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Business Relationship Management

Business Relationship Management progressed in MITA maturity due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Increased automation and use of state standards increased productivity, and provides clear and useful information
- Use of a mix of automatic and manual processes are used to gather, communicate, and distribute information
- Use of state standards and defined business rules

Gap Analysis: Business Relationship Management

To achieve a MITA maturity level of 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the processes
- Leverage surveys or questionnaires to ensure stakeholder satisfaction
- Increase automated functionality reducing the time it takes to complete each business process

3.1.1 BR01 – Establish Business Relationship

The Establish Business Relationship business process encompasses activities undertaken by the SMA to enter into business partner relationships. Agreements are between state agency and its partners, including collaboration amongst intrastate agencies, the interstate and federal agencies. It contains functionality for interoperability, establishment of inter-agency service agreements, identification of the types of information exchanged, and security and privacy requirements.

Business Capability Matrix Assessment Results

BR01 – Establish Business Relationship was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 3: BR01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	10	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of BR01 – Establish Business Relationship remains at level 2. However, some progress has been made due to the following:

- Use of both manual and automatic processes to gather, record, communicate, and distribute information to leadership, other state agencies, and participating providers
- Use of electronic information interchange agreements, including Health Insurance Portability and Accountability Act (HIPAA) requirements for information exchange
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Use a formal, standardized SLA with other intrastate agencies and entities (level 3) and interstate agencies and entities (level 4) to adopt national standards, and to develop and share reusable processes including clinical information

- The process completes in 10 business days or less (level 3)
 - ✓ Process completes in five business days or less (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.1.2 BR02 – Manage Business Relationship Communication

The Manage Business Relationship Communication business process receives requests for information, appointments, and assistance from business partners, such as inquiries related to a Service Level Agreement (SLA). This business process includes the log, research, development, approval and delivery of routine or ad hoc messages. Information is communicated through a variety of methods.

Business Capability Matrix Assessment Results

BR02 – Manage Business Relationship Communication was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 4: BR02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	6	10	
Maturity Level 3	1	1	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of BR02 – Manage Business Relationship Communication progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Process timeliness improved through use of automation
- Automation and HIPAA standards increased accessibility of information
- Increased automation and use of state standards increased productivity, and provides clear and useful information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Automate process to the full extent possible across the intrastate (level 3) supporting automatic communication with trading partners via a web portal
 - ✓ Extend automated processes to the fullest extent across the interstate (level 4)

3.1.3 BR03 – Manage Business Relationship Information

The Manage Business Relationship Information business process maintains the agreement between the SMA and the other party such as the intrastate, interstate, and federal agencies. This includes routine modifications to required information such as authorized signers, addresses, terms of agreement, and data exchange standards.

Business Capability Matrix Assessment Results

BR03 – Manage Business Relationship Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 5: BR03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	3	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of BR03 – Manage Business Relationship Information progressed from level 1 to level 2, due to the following:

- Use of a mix of automatic and manual processes are used to gather, communicate, and distribute information related to the process
- Focus on exception resolution improved cost effectiveness, efficiency, and timeliness
- Use of state standards and defined business rules reduce errors and provide clear and useful information, improving accuracy and stakeholder satisfaction
- Use of state-specific and HIPAA standard transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Automate the process to the full extent possible across the intrastate (level 3) supporting automatic updates to SLA governing exchange of health care information
 - ✓ Extend automated processes to the fullest extent across the interstate (level 4)
- Process completes in five days or less (level 3)
 - ✓ Process completes in three days or less (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.1.4 BR04 – Terminate Business Relationship

The Terminate Business Relationship business process cancels the agreement between the SMA and the business partner such as the intrastate, interstate, and federal agencies.

Business Capability Matrix Assessment Results

BR04 – Terminate Business Relationship was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 6: BR04 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	8		
Maturity Level 2	2	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of BR04 – Terminate Business Relationship has progressed from level 1 to level 2, due to the following:

- Use of a mix of automatic and manual processes are used to gather, communicate, and distribute information related to the process
- Focus on exception resolution improved cost effectiveness, efficiency, and timeliness
- Use of state standards and defined business rules reduce errors and provide clear and useful information, improving accuracy and stakeholder satisfaction
- Use of state-specific and HIPAA standard transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

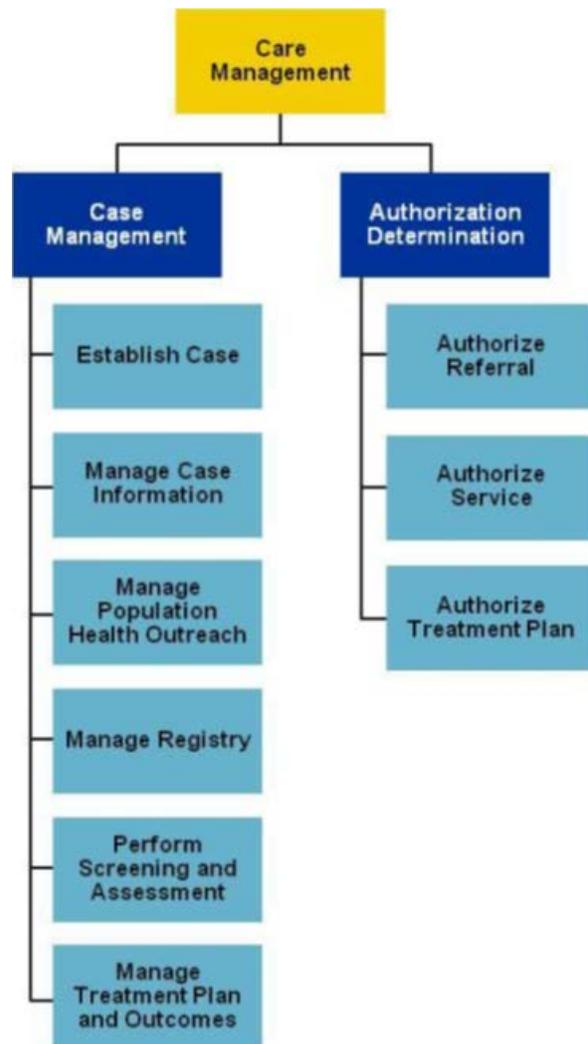
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Process completes on average in one business day or less (level 3)
 - ✓ Process completes on average in 12 hours or less (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)

3.2 Care Management

The Care Management business area illustrates the increasing shift away from the fee-for-service model of care. Care Management collects information about the needs of the individual member, plan of treatment, targeted outcomes, and the individual’s health status. It also contains business processes that have a common purpose (e.g., identify members with special needs, assess needs, develop treatment plan, monitor and manage the plan, and report outcomes). This business area includes processes that support individual care management and population management. Population management targets groups of individuals with similar characteristics to promote health education and awareness. The Electronic Health Record (EHR), Electronic Medical Record (EMR), and Personal Health Record (PHR) are primary sources of individual health information from the Health Information Exchange (HIE).

The Care Management business area is comprised of two business categories:

- **Case Management** – Business activity to establish a health care case for individual or family and monitoring screening and the treatment outcomes
 - ✓ CM01 – Establish Case
 - ✓ CM02 – Manage Case Information
 - ✓ CM03 – Manage Population Health Outreach
 - ✓ CM04 – Manage Registry
 - ✓ CM05 – Perform Screening and Assessment
 - ✓ CM06 – Manage Treatment Plan and Outcomes
- **Authorization Determination** – Business activity to authorize specific referral, service, or treatment plans for an individual
 - ✓ CM07 – Authorize Referral
 - ✓ CM08 – Authorize Service
 - ✓ CM09 – Authorize Treatment Plan



The following table provides a summary view of the assessed MITA maturity for Care Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Care Management	2015 As-Is	2019 As-Is	To-Be
CM01 – Establish Case	2	2	4
CM02 – Manage Case Information	1	2	4
CM03 – Manage Population Health Outreach	1	2	4
CM04 – Manage Registry	1	2	4
CM05 – Perform Screening and Assessment	1	2	4
CM06 – Manage Treatment Plan and Outcomes	1	2	4
CM07 – Authorize Referral	1	1	4
CM08 – Authorize Service	1	2	4
CM09 – Authorize Treatment Plan	1	2	4
Business Area Maturity Level	1	1	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Care Management

Care Management progressed in MITA maturity due to the following:

- BTC process redesign efforts have increased coordination between intrastate agencies
- Use of a state HIE has improved efficiency and cost effectiveness
- Adoption of the MITA Framework industry standards and other nationally recognized standards
- Use of HIPAA standards and EDI transactions
- Issuance of the BMS RFP details requirements that will improve the entire business area

Gap Analysis: Care Management

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - ✓ Collaborate with a Regional Health Information Organization (RHIO)
 - ✓ Confirm that Accessibility of information takes no more than three (3) seconds (level 3)
 - Clinical information processes result in immediate action, response, and results (level 4)
- Incorporate the use of additional x.12 transactions (i.e., x.12 278)
 - ✓ Note: Use of this is requested by the BMS RFP
- Automate decision-making using standardized business rules definitions

3.2.1 CM01 – Establish Case

The Establish Case business process uses criteria and rules to: identify target members for specific programs, assign a care manager, assess the member’s needs, select a program, establish a treatment plan, identify and confirm provider, and prepare information for communication.

Business Capability Matrix Assessment Results

CM01 – Establish Case was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 7: CM01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	9	8	
Maturity Level 3	1	2	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of CM01 – Establish Case remains at level 2. However some progress has been made due to the following:

- Use of, and collaboration with a state run HIE

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - ✓ Collaborate with a Regional Health Information Organization (RHIO)
 - ✓ Confirm that Accessibility of information takes no more than three (3) seconds (level 3)
 - Clinical information processes result in immediate action, response, and results (level 4)
- Process must complete, on average, in seven (7) business days (level 3)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% (level 3) 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.2.2 CM02 – Manage Case Information

The Manage Case Information business process uses state-specific criteria and rules to ensure appropriate and cost-effective medical, medically-related social and behavioral health services are identified, planned, obtained, and monitored for individuals identified as eligible for care management services.

Business Capability Matrix Assessment Results

CM02 – Manage Case Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 8: CM02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	3	8	
Maturity Level 3		2	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CM02 – Manage Case Information progressed from level 1 to level 2, due to the following:

- BTC process redesign efforts have increased coordination between state agencies
- Use of a state HIE communication regarding case information has improved efficiency and cost effectiveness

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Eliminate the use of paper applications for waiver Providers
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - ✓ Collaborate with a Regional Health Information Organization (RHIO)
 - ✓ Confirm that Accessibility of information takes no more than three (3) seconds (level 3)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% (level 3) 98% or higher (level 4)

3.2.3 CM03 – Manage Population Health Outreach

The Manage Population Health Outreach business process is responsible for the implementation of strategy to improve general population health. The SMA identifies target populations or individuals for selection by cultural, diagnostic, or other demographic indicators. The inputs to this business process are census, vital statistics, immigration, and other information sources. This business process outputs materials for: enrolling new members, information regarding new health plan or health benefit offerings, and updates or modification to existing health plan or health benefit offerings.

Business Capability Matrix Assessment Results

CM03 – Manage Population Health Outreach was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 9: CM03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	6	9	
Maturity Level 3		1	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

MITA maturity for CM03 – Manage Population Health Outreach progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework industry standards and other nationally recognized standards
 - ✓ CM03 has achieved MITA maturity level 3 with regard to Standards
- The Data Services module contract outlines requirements that impact and improve this business process, measurable improvement will be realized in automation, cost, efficiency, and accuracy

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Automate some decision-making for this process using standardized business rules definitions
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - ✓ Collaborate with a Regional Health Information Organization (RHIO)
 - ✓ Confirm that Accessibility of information takes no more than three (3) seconds (level 3)

3.2.4 CM04 – Manage Registry

The Manage Registry business process receives member health outcome information, prepares updates for a specific registry (e.g., immunizations, cancer, disease) and responds to inquiries with response information. In the context of MITA, a medical registry consolidates related records from multiple sources (e.g., intrastate, interstate or federal agencies) into one comprehensive data store.

Business Capability Matrix Assessment Results

CM04 – Manage Registry was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 10: CM04 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	8		
Maturity Level 2	2	8	
Maturity Level 3		2	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

MITA maturity for CM04 – Manage Registry progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework industry standards and other nationally recognized standards
- Use of HIPAA standards and EDI transactions improved collaboration between HSD and the Central Registry Unit
- Focus on exception resolution fosters increased efficiency and cost effectiveness

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration with the Central Registry at the Department of Health, across the intrastate (level 3), and the interstate (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% (level 3) 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.2.5 CM05 – Perform Screening and Assessment

The Perform Screening and Assessment business process is responsible for the evaluation of member’s health information, facilitating evaluations, and recording results. This business process assesses for certain health and behavioral health conditions (e.g., chronic illness, mental health, substance abuse), lifestyle and living conditions (e.g., employment, living situation) to determine risk factors.

Business Capability Matrix Assessment Results

CM05 – Perform Screening and Assessment was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 11: CM05 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	5	6	
Maturity Level 3		4	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Note: Only 9 of the 10 capability questions were addressed during the 2015 SS-A. The missing question “How accurate are the results of the process?” was included in this 2019 SS-A update.

Progress Analysis

The MITA maturity for CM05 – Perform Screening and Assessment progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework industry standards and other nationally recognized standards
- Increased automation has allowed for more screenings and assessments for treatment and disease management and information is available via the state HIE
- Issuance of the BMS RFP details requirements that impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - Enable automatic decision-making using regional business rules (level 4)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% (level 3) 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)

- ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.2.6 CM06 – Manage Treatment Plan and Outcomes

The Manage Treatment Plan and Outcomes business process uses federal and state specific criteria and rules to ensure that the providers and contractors chosen and services delivered optimizes member and member population outcomes. It includes activities to track and assess effectiveness of services, and ongoing monitoring, management, and reassessment of services and treatment plans.

Business Capability Matrix Assessment Results

CM06 – Manage Treatment Plan and Outcomes was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 12: CM06 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	10		
Maturity Level 2		4	
Maturity Level 3		6	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CM06 – Manage Treatment Plan and Outcomes progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework industry standards and other nationally recognized standards
- Use of and an increase in Managed Care Organizations (MCOs)
- A mix of state-specific and HIPAA standards are applied
- Collaborates with other intrastate agencies for the adoption and use of industry standards and Electronic Data Interchange (EDI) transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - Automate decision-making using standardized business rules definitions
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - ✓ Clinical information processes result in immediate action, response, and results (level 4)

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% (level 3) 98% or higher (level 4)

3.2.7 CM07 – Authorize Referral

The Authorize Referral business process is responsible for referrals between providers that the SMA approves for payment, based on state policy. Examples are referrals by physicians to other providers for laboratory procedures, surgery, drugs, or durable medical equipment.

Business Capability Matrix Assessment Results

CM07 – Authorize Referral was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 13: CM07 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	10	2	
Maturity Level 2	1	9	
Maturity Level 3			
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	1	4

Progress Analysis

The MITA maturity of CM07 – Authorize Referral remains at level 1. However, some progress has been made due to the following:

- Adoption of the MITA Framework industry standards and other nationally recognized standards
- Use of state-specific and HIPAA standards, and EDI transactions
- Use of standards and some automated business rules

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Expand use of x.12 transactions (i.e., x.12 278)
 - ✓ Note: The BMS RFP details requirements for use of the x.12 278
- The process requires five minutes or less for routine requests, more complex requests may require 30 minutes to review (level 3/level 4)
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - ✓ Clinical information processes result in immediate action, response, and results (level 4)

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% (level 3) 98% or higher (level 4)

3.2.8 CM08 – Authorize Service

The Authorize Service business process encompasses both a pre-approved and post-approved service request. This business process focuses on specific types and numbers of visits, procedures, surgeries, tests, drugs, therapies, and durable medical equipment. Its primary use is in a fee-for-services setting.

Business Capability Matrix Assessment Results

CM08 – Authorize Service was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 14: CM08 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	9		
Maturity Level 2	1	10	
Maturity Level 3		1	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Note: Only 10 of the 11 capability questions were addressed during the 2015 SS-A. The missing question “How easy is it to change the business rules of Authorize Service?” was included in this 2019 SS-A update.

Progress Analysis

The MITA maturity of CM08 – Authorize Service progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework industry standards and other nationally recognized standards
- Efforts of the BTC are working towards process improvements and standard business rules
- Issuance of the BMS RFP details requirements that impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - Separation of business rules from core programming, available in both human and machine-readable formats
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - ✓ Confirm that Accessibility of information takes no more than three (3) seconds (level 3)
 - Clinical information processes result in immediate action, response, and results (level 4)
- Process completes in less than 30 seconds (level 3, 4, and 5)
- Decision-making is automatic using regional standardized business rules definitions
- Use of surveys/questionnaires to improve stakeholder satisfaction to 95% (level 3), 98% (level 4)

3.2.9 CM09 – Authorize Treatment Plan

The Authorize Treatment Plan business process encompasses both a prior authorization and post-approved treatment plan. The SMA uses the Authorize Treatment Plans primarily in the care coordination setting where the care management team assesses the member’s needs, decides on a course of treatment, and completes the treatment plan.

Business Capability Matrix Assessment Results

CM09 – Authorize Treatment Plan was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 15: CM09 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	9		
Maturity Level 2	2	11	
Maturity Level 3			
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CM09 – Authorize Treatment Plan progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework industry standards and other nationally recognized standards
- On-going use and expansion of Managed Care Organizations (MCOs)
- MCO Providers have the capability to submit an online request using a HIPAA 278 transaction, with a unique tracking number for each request so that they can view the status of their requests.

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Automate information collection across the intrastate (level 3) and interstate (level 4), allowing automatic decision-making
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - Separation of business rules from core programming, available in both human and machine-readable formats
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - ✓ Confirm that Accessibility of information takes no more than three (3) seconds (level 3)
 - Clinical information processes result in immediate action, response, and results (level 4)

- Complete the process in less than two business days (level 3), less than one business day (level 4)

3.3 Contractor Management

The Contractor Management business area accommodates a SMA that has managed care contracts or a variety of outsourced contracts. The Contractor Management business area has a common focus on Medicaid contractors (e.g., managed care, at-risk mental health or dental care, primary care physician), is responsible for contractor data store, and uses business processes that have a common purpose (e.g., fiscal agent, enrollment broker, Fraud Enforcement Agency, and third-party recovery).

The Contractor Management business area is comprised of three business categories:

- **Contractor Information Management** – Business activities to collect, maintain, and provide contractor information
 - ✓ CO01 – Manage Contractor Information
 - ✓ CO04 – Inquire Contractor Information
- **Contractor Support** – Business activity to provide customer support tasks (e.g., information, training, dispute resolution) to contractors
 - ✓ CO02 – Manage Contractor Communication
 - ✓ CO03 – Perform Contractor Outreach
 - ✓ CO09 – Manage Contractor Grievance and Appeal
- **Contract Management** – Business activity to create solicitation and acquire services to support the Medicaid Program
 - ✓ CO05 – Produce Solicitation
 - ✓ CO06 – Award Contract
 - ✓ CO07 – Manage Contract
 - ✓ CO08 – Close Out Contract

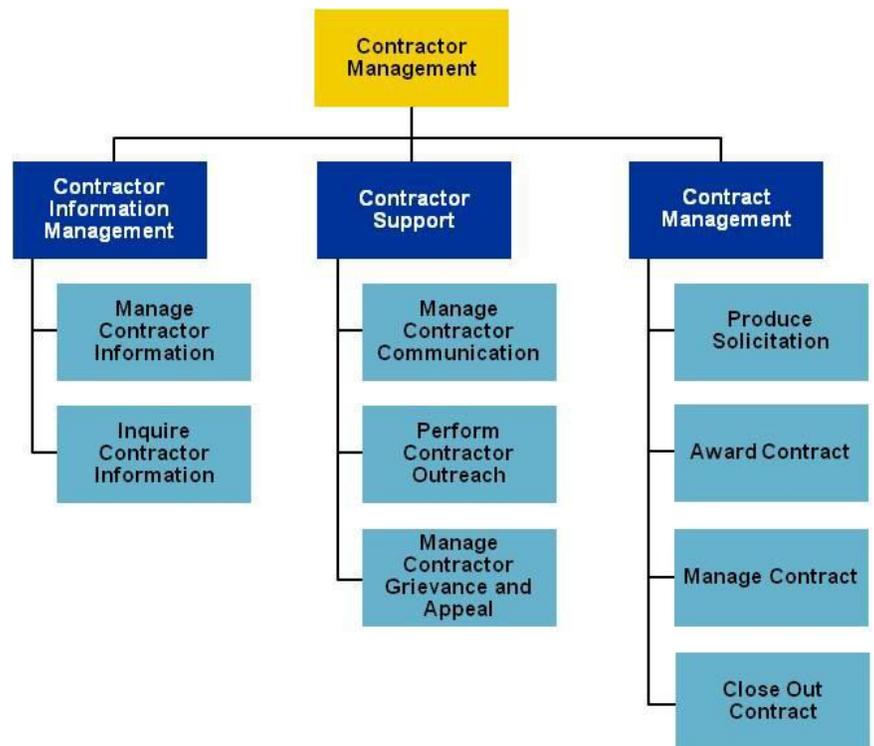


Figure 8: Contractor Management Diagram

The following table provides a summary view of the assessed MITA maturity for Contractor Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Contractor Management	2015 As-Is	2019 As-Is	To-Be
CO01 – Manage Contractor Information	1	2	4
CO02 – Manage Contractor Communication	1	2	4
CO03 – Perform Contractor Outreach	1	2	4
CO04 – Inquire Contractor Information	1	2	4
CO05 – Produce Solicitation	2	2	4
CO06 – Award Contract	2	2	4
CO07 – Manage Contract	1	2	4
CO08 – Close Out Contract	1	2	4
CO09 – Manage Contractor Grievance and Appeal	1	2	4
Business Area Maturity Level	1	2	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Contractor Management

The Contractor Management business area progressed in MITA maturity due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions
- Use of a central repository and portal for contractor communication
- Utilization of various methods of electronic communication

Gap Analysis: Contractor Management

To achieve MITA maturity level of 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the processes
- Leverage surveys or questionnaires to ensure stakeholder satisfaction
- Increase automated functionality reducing the time it takes to complete each business process
 - ✓ Respond to contractor inquiries in real-time: exception may require 24 hours or less
 - ✓ Producing a solicitation requires fewer than 60 business days (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time

3.3.1 CO01 – Manage Contractor Information

The Manage Contractor Information business process is responsible for managing all operational aspects of the contractor. This business process receives a request for addition, deletion, or modification to contractor information, validates the request, and applies the instruction.

Business Capability Matrix Assessment Results

CO01 – Manage Contractor Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 16: CO01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	8		
Maturity Level 2	3	8	
Maturity Level 3		3	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CO01 – Manage Contractor Information progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Contractor information validation is based on business rules definitions
- Use of HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Automate decision-making using standardized (level 3) and regional (level 4) business rules
- Improve accuracy of information to 98% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.3.2 CO02 – Manage Contractor Communication

The Manage Contractor Communication business process receives requests for information, appointments, and assistance from contractors such as: inquiries related to modifications in Medicaid Program policies and procedures, introduction of new programs, modifications to existing programs, public health alerts, and contract amendments. This business process includes the log, research, development, approval, and delivery of routine or ad hoc messages, and is communicated through a variety of methods.

Business Capability Matrix Assessment Results

CO02 – Manage Contractor Communication was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 17: CO02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	11		
Maturity Level 2		6	
Maturity Level 3		5	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CO02 – Manage Contractor Communication progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards
- Utilization of methods for electronic communication (e.g., mobile, AVRS, web portal, etc.)
- Development of a formal communication management plan
- Use of HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Respond to contractor inquiries in real-time: exception may require 24 hours or less
- Automate decision-making using standardized (level 3) and regional (level 4) business rules
- Improve accuracy of information to 99% or higher
- Using surveys/questionnaires increase stakeholder satisfaction to 90% (level 3) and 95% (level 4)

3.3.3 CO03 – Perform Contractor Outreach

The Perform Contractor Outreach business process is responsible for sending information such as public health alerts, new programs, and/or modifications in the Medicaid Program policies and procedures. For prospective contractors, the SMA develops contractor outreach information identified by analyzing Medicaid business needs. For currently enrolled contractors, information may relate to public health alerts, public service announcements, and other objectives. The SMA communicates through a variety of methods.

Business Capability Matrix Assessment Results

CO03 – Perform Contractor Outreach was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 18: CO03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	12		
Maturity Level 2		7	
Maturity Level 3		5	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CO03 – Perform Contractor Outreach progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards
- Process is formalized, ensuring correctness and legality
- The Contract Management and Procurement Bureau provides timely assistance in procurement activities and contract development and processing
- Contractors are able to download, save, and print publications
- Utilization of methods for electronic communication (e.g., mobile, AVRS, web portal, etc.)

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Develop and implement a plan for a workflow within the intrastate (level 3) and the interstate (level 4)
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Processes involving clinical information result in immediate action, response, and results

- Automate decision-making using standardized (level 3) and regional (level 4) business rules
- Improve accuracy of information to 95% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.3.4 CO04 – Inquire Contractor Information

The Inquire Contractor Information business process receives requests for contract verification from authorized providers, programs or business associates, performs the inquiry, and prepares the response.

Business Capability Matrix Assessment Results

CO04 – Inquire Contractor Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 19: CO04 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	12		
Maturity Level 2		7	
Maturity Level 3		5	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CO04 – Inquire Contractor progressed from level 1 to level 2, due to the following:

- Utilization of methods for electronic communication (e.g., mobile, AVRS, web portals, etc.)
- Process is formalized, ensuring correctness and legality
- Use of HIPAA standards and EDI transactions
- Use of some automated processes to receive request for contract verification(s)
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Easily exchanged information with intrastate (level 3) interstate (level 4) partners
 - ✓ Accessibility is near 24 hours a day, except during maintenance windows
- Automate the process for Inquire Contractor Information to the fullest extent possible within the intrastate (level 3) and the interstate (level 4)
 - ✓ Integration of web portals

- Develop and implement a plan for an automatic workflow within the intrastate (level 3) and the interstate (level 4)
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes sharing of clinical information (level 4)
- Improve accuracy of information to 99%
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.3.5 CO05 – Produce Solicitation

The Produce Solicitation business process gathers requirements, develops a solicitation (i.e., Request for Information (RFI), Request for Quotation (RFQ), or Request for Proposals (RFP)), receives approvals for the solicitation, and releases for response.

Business Capability Matrix Assessment Results

CO05 – Produce Solicitation was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 20: CO05 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	8	6	
Maturity Level 3	4	6	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of CO05 – Produce Solicitation remains a level 2. However, some progress has been made due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Establishment of the BTC
 - ✓ Improvement of: stakeholder satisfaction, process efficiency
- Release of numerous RFP to procure six modules and create reusable/sharable business services

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes sharing of clinical information (level 4)
- Producing a solicitation requires less than 3 months for completion (level 3)
 - ✓ Producing a solicitation requires fewer than 60 business days to complete (level 4)
- Access to information needed to research and complete solicitation
 - ✓ Process takes less than one month (level 3)
 - ✓ Process takes less than three weeks (level 4)
- Improve accuracy of information to 99%
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.3.6 CO06 – Award Contract

The Award Contract business process utilizes requirements, advanced planning documents, RFIs, RFPs, and sole source documents to request and receive proposals, verify proposal content against solicitation requirements, apply evaluation criteria, designate contractor or vendor, post award information, entertain and resolve protests, negotiate contracts, and notify parties.

Business Capability Matrix Assessment Results

CO06 – Award Contract was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 21: CO06 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	9	5	
Maturity Level 3	3	7	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	2	3	4

Progress Analysis

The MITA maturity of CO06 – Award Contract progressed from level 1 to level 2, due to the following:

- Use of a central repository and portal with various communication channels to award contracts
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of surveys or questionnaires have improved stakeholder satisfaction

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Automate receipt of proposals and communication with respondents
- Improve accuracy of information to 99%
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.3.7 CO07 – Manage Contract

The Manage Contract business process receives contract award information, implements the contract, monitors procedures, updates the contract (if needed), and continues to monitor the terms of the contract throughout its duration.

Business Capability Matrix Assessment Results

CO07 – Manage Contract was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 22: CO07 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	12		
Maturity Level 2		10	
Maturity Level 3		2	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CO07 – Manage Contract progressed from level 1 to level 2, due to the following:

- Establishment of the BTC
 - ✓ Increased intrastate collaboration
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Automate central tracking of contracts, reducing duplication and increasing quality
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Automate decision-making using standardized (level 3) and regional (level 4) business rules
- Improve accuracy of information to 99%
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.3.8 CO08 – Close Out Contract

The Close Out Contract business process begins with the completion, expiration, or there is cause to terminate a contract. The business process ensures the obligations of the current contract are complete and the turnover to the new contractor proceeds according to contractual obligations.

Business Capability Matrix Assessment Results

CO08 – Close Out Contract was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 23: CO08 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	10		
Maturity Level 2	2	11	
Maturity Level 3		1	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CO08 – Close Out Contract progressed from level 1 to level 2, due to the following:

- Use of a central repository and portal with various channels to communicate and coordinate with other intrastate agencies using electronic storage of contract information
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Automate decision-making using standardized (level 3) and regional (level 4) business rules
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.3.9 CO09 – Manage Contractor Grievance and Appeal

The Manage Contractor Grievance and Appeal business process handles contractor appeals of adverse decisions or communications of a grievance. The SMA logs and tracks the grievance or appeal, triages to appropriate reviewers, researches it, may request additional information, schedules and conducts hearings in accordance with legal requirements, and makes a ruling based upon the evidence presented.

Business Capability Matrix Assessment Results

CO09 – Manage Contractor Grievance and Appeal was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 13 capability questions asked for this business process.

Table 24: CO09 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	11		
Maturity Level 2	2	13	
Maturity Level 3			
Maturity Level 4			13
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of CO09 – Manage Contractor Grievance and Appeal progressed from level 1 to level 2, due to the following:

- Use of a central repository and portal with various channels to communication and coordinate with other intrastate agencies using electronic storage of contract information
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of a formal management plan
- Use of HIPAA standards and EDI transactions
- Establishment of the BTC

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Improve timeliness of the process
 - ✓ 45 days or less (level 3)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)

3.4 Eligibility and Enrollment Management

The Eligibility and Enrollment Management business area is a collection of business processes involved in the activity for determination of eligibility and enrollment for new applicants, redetermination of existing members, enrolling new providers, and revalidation of existing providers. The Provider Enrollment business category and related business processes focus on patient safety and fraud prevention through functions such as determining screening level (i.e., limited, moderate or high) for provider verifications. These processes share a common set of provider-related data for determination of eligibility, enrollment, and inquiry to provide services. The Eligibility and Enrollment Management business area is responsible for the eligibility and enrollment information of the member data store as well as the provider data store.

The Eligibility and Enrollment Management business area is comprised of two business categories:

- **Member Enrollment** – Business activity for determination of eligibility and enrollment of new participants and the redetermination of existing participants
 - ✓ EE01 – Determine Member Eligibility
 - ✓ EE02 – Enroll Member
 - ✓ EE03 – Disenroll Member
 - ✓ EE04 – Inquire Member Eligibility
- **Provider Enrollment** – Business activity for determination of eligibility and enrollment of new providers and the redetermination of existing providers
 - ✓ EE05 – Determine Provider Eligibility
 - ✓ EE06 – Enroll Provider
 - ✓ EE07 – Disenroll Provider
 - ✓ EE08 – Inquire Provider Information

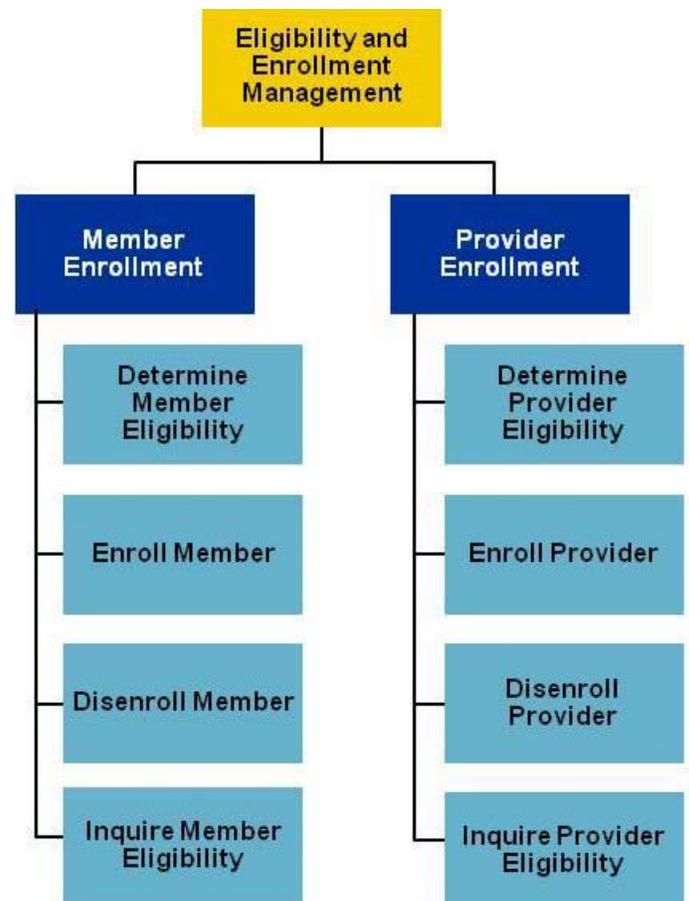


Figure 9: Eligibility and Enrollment Management Diagram

The following table provides a summary view of the assessed MITA maturity for Eligibility and Enrollment Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Eligibility and Enrollment Management	2015 SS-A As-Is	2019 SS-A As-Is	To-Be
EE01 – Determine Member Eligibility	2	2	4
EE02 – Enroll Member	1	2	4
EE03 – Disenroll Member	1	2	4
EE04 – Inquire Member Eligibility	1	2	4
EE05 – Determine Provider Eligibility	1	2	4
EE06 – Enroll Provider	1	2	4
EE07 – Disenroll Provider	1	2	4
EE08 – Inquire Provider Information	1	2	4
Business Area Maturity Level	1	2	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Eligibility and Enrollment Management

The Eligibility and Enrollment Management business area progressed in MITA maturity due to the following:

- Adoption of the MITA Framework and other nationally recognized standards
- Collaboration with HIX and other intrastate agencies
- Use of HIPAA standards and EDI transactions
- Establishment of the BTC
- Use of surveys or questionnaires to measure stakeholder satisfaction

Gap Analysis: Eligibility and Enrollment Management

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Adopt use of Council for Affordable Quality Healthcare (CAQH) Committee on Operating Rules for Information Exchange (CORE) Operating Rules
 - ✓ Adopt federal requirements for low, medium, and high risk providers
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction

3.4.1 EE01 – Determine Member Eligibility

The Determine Member Eligibility business process is responsible for the operational aspects of determining if an applicant is eligible for Medicaid or potentially eligible for other insurance affordability programs. The business process checks the applicant’s status and verifies applicant information in accordance with the policies established. The business process determines eligibility based on modified adjusted gross income (MAGI) or on a basis other than MAGI methods including group/category.

Business Capability Matrix Assessment Results

EE01 – Determine Member Eligibility was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 25: EE01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	7	3	
Maturity Level 3	3	8	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	2	2	4

Note: Only 10 of the 11 capability questions were addressed during the 2015 SS-A. The missing question “How does the State Medicaid Agency validate application information?” was included in this 2019 SS-A update.

Progress Analysis

The MITA maturity of EE01 – Determine Member Eligibility remains at a level 2. However, some progress has been made due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions
- The Eligibility and Enrollment System (ASPEN) provides an enrollment application interface for members to enroll and perform various self-service activities
- Collaboration and use of a HIX (beWellnm) within the intrastate (level 3)
- Use of standardized business rules definitions
- Enrollment application information and verification is automated
- Use of surveys or questionnaires improves stakeholder satisfaction

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)

3.4.2 EE02 – Enroll Member

The Enroll Member business process receives eligibility information from the Determine Member Eligibility business process, the Marketplace, or any insurance affordability program. It determines additional qualifications for enrollment in health benefits for which the member is eligible and produces notifications for coordination of communications to the member, provider, and to the insurance affordability programs.

Business Capability Matrix Assessment Results

EE02 – Enroll Member was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 26: EE02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	7	8	
Maturity Level 3		3	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of EE02 – Enroll Member progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of a web portal (YesNM) and Centennial Care for Member enrollment

- Collaboration with HIX and other intrastate (level 3) agencies
- Use of HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Increase collaboration across the interstate (level 4)
- Develop and utilize reusable business services
- Share information and standards utilizing a regional exchange
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.4.3 EE03 – Disenroll Member

The Disenroll Member business process is responsible for the termination of a member’s enrollment in a health plan or health benefit. Enrollment termination may occur due to a variety of reasons.

Business Capability Matrix Assessment Results

EE03 – Disenroll Member was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 27: EE03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	2		
Maturity Level 2	8	9	
Maturity Level 3		1	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of EE03 – Disenroll Member progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Collaboration with HIX and other intrastate agencies

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.4.4 EE04 – Inquire Member Eligibility

The Inquire Member Eligibility business process receives requests for eligibility verification and performs the inquiry, and prepares the Eligibility, Coverage, or Benefit Information response. Response information may include benefit status, explanation of benefits, coverage, effective dates, and/or amounts for co-insurance, co-pays, deductibles, exclusions and limitations. Information may include details about Medicaid health plans, health benefits, and the provider(s) from which the member may receive covered services.

Business Capability Matrix Assessment Results

EE04 – Inquire Member Eligibility was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 28: EE04 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	2		
Maturity Level 2	8	9	
Maturity Level 3		1	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of EE04 – Inquire Member Eligibility progressed from level 1 to level 2, due to the following:

- Establishment of the BTC
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Collaboration with HIX and other intrastate agencies

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Adopt use of CAQH CORE Operating Rules (level 3)
 - ✓ Use of industry standards to exchange clinical data with interstate (level 4) partners
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.4.5 EE05 – Determine Provider Eligibility

The Determine Provider Eligibility business process collects enrollment or re-enrollment applications, or revalidation information from providers. The business process verifies syntax and semantic of information, checks status tracking, requests additional information when necessary, determines screening level, verifies applicant information with external entities, collects application fees, and notifies providers of enrollment eligibility determination.

Business Capability Matrix Assessment Results

EE05 – Determine Provider Eligibility was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 15 capability questions asked for this business process.

Table 29: EE05 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	8		
Maturity Level 2	6	12	
Maturity Level 3	1	2	
Maturity Level 4		1	15
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of EE05 – Determine Provider Eligibility progressed from level 1 to level 2, due to the following:

- Establishment of the BTC for business process redesign
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Collaboration with HIX and other intrastate agencies
- Use of NPI for provider identification

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Per the Provider As-Is Deep Dive Journey, there are still significant issues with provider enrollment timeliness and overall accuracy; the process takes 15-30 days to complete
 - ✓ Process provider enrollment applications timely and accurately including one-stop collaboration (level 3)
 - ✓ Collaborate with federal agencies for regional validation of background information and screening by level of risk in near-real time (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher (level 3)
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)

- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.4.6 EE06 – Enroll Provider

The Enroll Provider business process is responsible for enrolling providers into Medicaid, which may include: determination of contracting parameters, establishment of payment rates and funding sources, taking into consideration service area, incentives or discounts, or supporting receipt and verification of program contractor’s provider enrollment roster. The Enroll Provider business process also supports receipt and verification of program contractor’s provider enrollment roster information from Managed Care Organization (MCO) and HCBS organizations.

Business Capability Matrix Assessment Results

EE06 – Enroll Provider was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 30: EE06 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	6		
Maturity Level 2	6	6	
Maturity Level 3		6	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of EE06 – Enroll Provider progressed from level 1 to level 2, due to the following:

- Use of a portal that allows providers to check and monitor their enrollment status
- Establishment of the BTC
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of NPI and atypical provider identifiers
- Collaboration with HIX, HIE, MCOs, and other intrastate (level 3) agencies
- Use of State and HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Adopt federal requirements for low, medium, and high risk providers
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)

3.4.7 EE07 – Disenroll Provider

The Disenroll Provider business process is responsible for managing disenrollment in the Medicaid Program. This business process covers the activity of disenrollment, including the tracking of disenrollment requests and validation that the disenrollment meets state’s rules.

Business Capability Matrix Assessment Results

EE07 – Disenroll Provider was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 31: EE07 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	3	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of EE07 – Disenroll Provider progressed from level 1 to level 2, due to the following:

- Use of State and HIPAA standards and EDI transactions
- Process has some automation through use of a Provider portal
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)

3.4.8 EE08 – Inquire Provider Information

The Inquire Provider Information business process receives requests for provider enrollment verification from authorized providers, programs, or business associates, performs the inquiry, and prepares the response information.

Business Capability Matrix Assessment Results

EE08 – Inquire Provider Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 32: EE08 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	9		
Maturity Level 2	1	9	
Maturity Level 3		1	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of EE08 – Inquire Provider Information has progressed from level 1 to level 2 due to the following:

- Establishment of the BTC
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Collaboration with HIX and other intrastate agencies

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5 Financial Management

The Financial Management business area is a collection of business processes to support the payment of providers, managed care organizations, other agencies, insurers, Medicare premiums, and supports the receipt of payments from other insurers, providers, and member premiums and financial participation. These processes share a common set of payment and receivables related data. The Financial Management business area is responsible for the financial data store.

The Financial Management business area is comprised of three business categories:

- **Accounts Receivable Management** – Business activity to manage the collection of money owed to the SMA
 - ✓ FM01 – Manage Provider Recoupment
 - ✓ FM02 – Manage Third Party Liability (TPL) Recovery
 - ✓ FM03 – Manage Estate Recovery
 - ✓ FM04 – Manage Drug Rebate
 - ✓ FM05 – Manage Cost Settlement
 - ✓ FM06 – Manage Accounts Receivable Information
 - ✓ FM07 – Manage Accounts Receivable Funds
 - ✓ FM08 – Prepare Member Premium Invoice
- **Accounts Payable Management** – Business activity to manage the payment of money the SMA owes to other entities
 - ✓ FM09 – Manage Contractor Payment
 - ✓ FM10 – Manage Member Financial Participation
 - ✓ FM11 – Manage Capitation Payment
 - ✓ FM12 – Manage Incentive Payment
 - ✓ FM13 – Manage Accounts Payable Information
 - ✓ FM14 – Manage Accounts Payable Disbursement
 - ✓ FM15 – Manage 1099
- **Fiscal Management** – Business activity to manage planned expenses and revenues of the SMA
 - ✓ FM16 – Formulate Budget
 - ✓ FM17 – Manage Budget Information
 - ✓ FM18 – Manage Fund
 - ✓ FM19 – Generate Financial Report

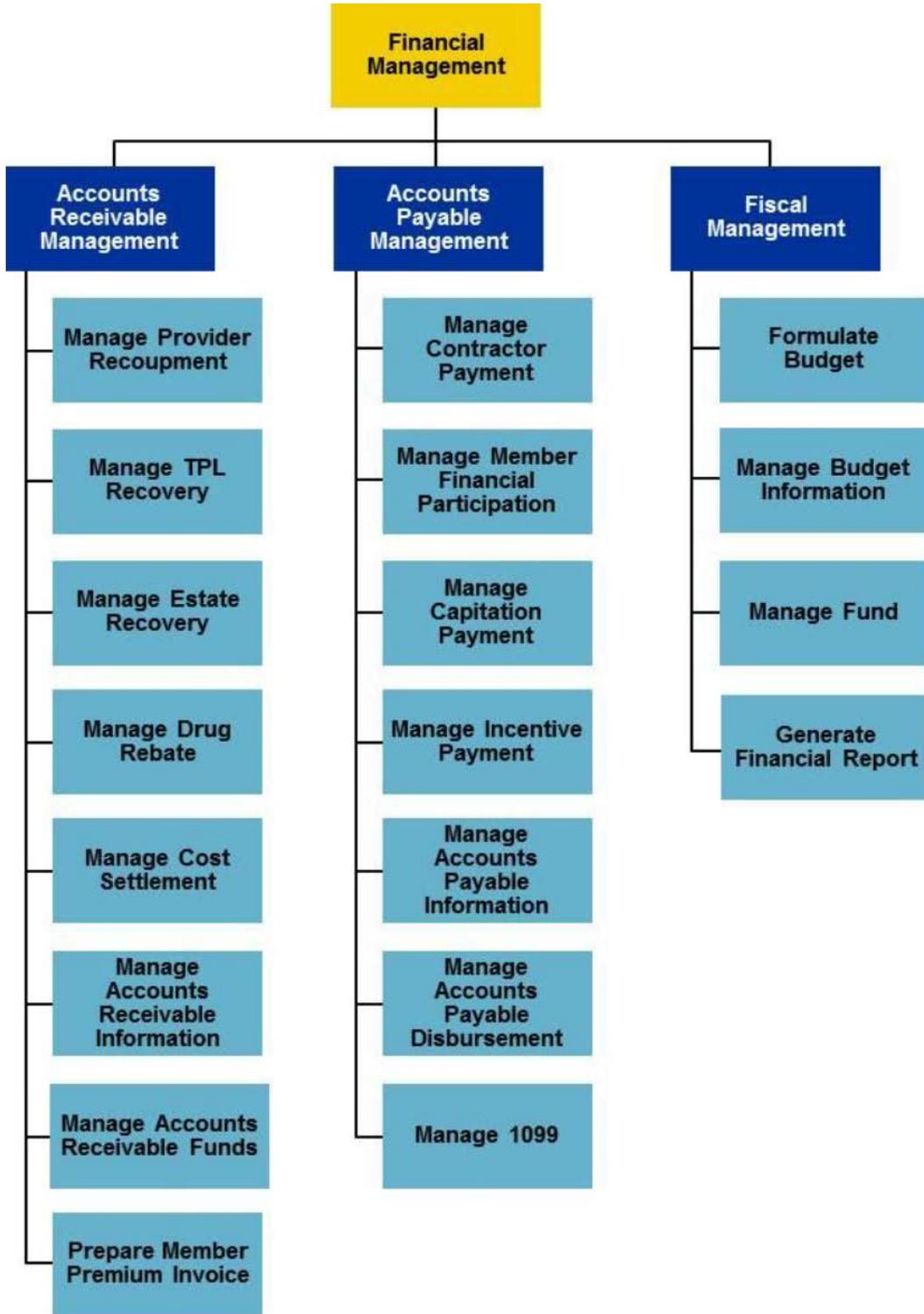


Figure 10: Financial Management Diagram

The following table provides a summary view of the assessed MITA maturity for Financial Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Financial Management	2015 SS-A As-Is	2019 SS-A As-Is	To-Be
FM01 – Manage Provider Recoupment	1	2	4
FM02 – Manage TPL Recovery	1	2	4
FM03 – Manage Estates Recovery	1	2	4
FM04 – Manage Drug Rebate	2	2	4
FM05 – Manage Cost Settlement	1	2	4
FM06 – Manage Accounts Receivable	1	2	4
FM07 – Manage Accounts Receivable Funds	1	2	4
FM08 – Prepare Member Premium Invoice	N/A	N/A	N/A
FM09 – Manage Contractor Payment	1	2	4
FM10 – Manage Member Financial Participation	1	2	4
FM11 – Manage Capitation Payment	1	2	4
FM12 – Manage Incentive Payment	1	2	4
FM13 – Manage Accounts Payable Information	1	2	4
FM14 – Manage Accounts Payable Disbursement	1	2	4
FM15 – Manage 1099	2	2	4
FM16 – Formulate Budget	1	2	4
FM17 – Manage Budget Information	1	2	4
FM18 – Manage Fund	2	2	4
FM19 – Generate Financial Report	2	2	4
Business Area Maturity Level	1	2	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Financial Management

Financial Management has progressed in MITA maturity due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Use of standards and business rules definitions improve accuracy and efficiency
- Issuance of the FS RFP details requirements that will impact this business area

Gap Analysis: Financial Management

To achieve a MITA maturity level of 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Implement requested services through the BMS and FS RFPs

3.5.1 FM01 – Manage Provider Recoupment

The Manage Provider Recoupment business process manages the determination and recovery of overpayments to providers. The SMA initiates provider recoupment upon the discovery of an overpayment.

Business Capability Matrix Assessment Results

FM01 – Manage Provider Recoupment was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 13 capability questions asked for this business process.

Table 33: FM01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	6	12	
Maturity Level 3		1	
Maturity Level 4			13
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM01 – Manage Provider Recoupment progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
 - ✓ Collaboration with the Colorado Regional Health Information Organization (CORHIO)
- Payer-to-provider recoupment is the norm, but some payer-to-payer interchanges are taking place (x.12 837)
- Use of State and HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.2 FM02 – Manage TPL Recovery

The Manage TPL Recovery business process begins by receiving Third-Party Liability (TPL) information from various sources. The business process identifies the provider or TPL carrier, locates recoverable claims, creates the coordination of benefits file, creates post-payment recovery files, and prepares notification of TPL to send to other payer or provider.

Business Capability Matrix Assessment Results

FM02 – Manage TPL Recovery was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 13 capability questions asked for this business process.

Table 34: FM02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	9		
Maturity Level 2	4	12	
Maturity Level 3		1	
Maturity Level 4			13
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM02 – Manage TPL Recovery progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Establishment of the BTC
 - ✓ Impacts coordination and collaboration with intrastate agencies

- Issuance of the Financial Services RFP detailing requirements specific to this process
- Process is centralized within HSD (working with MCOs) and MAD for fee-for-service claims, increasing coordination of effort
- Use of State and HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Leverage MITA Framework and other industry standards for payer-to-payer coordination of benefits
- Implement an automated process for validating TPL information across the intrastate (level 3) and interstate (level 4)
- Improve timeliness of the process, ensuring it completes within a few business days
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.3 FM03 – Manage Estates Recovery

The Manage Estates Recovery business process recovers certain Medicaid benefits paid on behalf of an individual by filing liens against a deceased member’s or deceased spouse’s estate to recover the costs of Medicaid benefits paid during the time the member was eligible for Medicaid. The process begins by receiving estate recovery information. In addition, the business process may open a formal case based on estate ownership and value of property, determine the value of the estate lien, file a petition for a lien, file an estate claim of lien, and/or conduct follow-up.

Business Capability Matrix Assessment Results

FM03 – Manage Estates Recovery was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 35: FM03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	10		
Maturity Level 2	2	11	
Maturity Level 3		1	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM03 – Manage Estate Recovery progressed from level 1 to level 2, due to the following:

- Contracted services with Health Management Services (HMS) to manage Estate Recovery
- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Use of standards and business rules definitions improve accuracy and efficiency

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement use of electronic communication methods with stakeholders, paper is the exception
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.4 FM04 – Manage Drug Rebate

The Manage Drug Rebate business process receives quarterly drug rebate information from Centers for Medicare & Medicaid Services (CMS), compares drug rebate to quarterly payment history information, identifies drug information matches based on manufacturer and drug codes, applies the rebate factor and volume indicators, calculates the total rebate per manufacturer, prepares drug rebate invoices, sorts the invoices by manufacturer and drug code, sends the invoice information, and monitors rebate payment.

Business Capability Matrix Assessment Results

FM04 – Manage Drug Rebate was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 36: FM04 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	10	10	
Maturity Level 3	1	1	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of FM04 – Manage Drug Rebate remains at level 2.

- Process is dependent upon award of UPI RFQ, FS RFP, and CCSC RFP requirements
- The Pharmacy Benefits Manager (PBM) continues to send drug rebate invoices to manufacturers based on the encounter data for pharmacy and medical claims submitted by the MCOs

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.5 FM05 – Manage Cost Settlement

The Manage Cost Settlement business process begins with the submission of the provider’s annual Medicare Cost Report to Medicaid. Staff make inquiries for paid, denied, and adjusted claims information. The business process includes: reviewing provider costs and establishing a basis for cost settlements or compliance reviews, receiving audited Medicare Cost Report from intermediaries, capturing the necessary provider cost settlement information, calculating the final annual cost settlement based on the Medicare Cost Report, generating the information for notification to the provider, verifying the information is correct, producing the notifications to providers, and establishing interim reimbursement rates.

Business Capability Matrix Assessment Results

FM05 – Manage Cost Settlement was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 37: FM05 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	7	11	
Maturity Level 3			
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM05 – Manage Cost Settlement progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher, 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.6 FM06 – Manage Accounts Receivable Information

The Manage Accounts Receivable Information business process is responsible for all operational aspects of collecting money owed to the SMA. Activities in this business process comply with CFR 45, the Cash Management Improvement Act (CMIA), Governmental Accounting Standards Board (GASB) standards, and Generally Accepted Accounting Principles (GAAP).

Business Capability Matrix Assessment Results

FM06 – Manage Accounts Receivable Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 38: FM06 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	2		
Maturity Level 2	9	11	
Maturity Level 3			
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM06 – Manage Accounts Receivable Information progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Accounts Receivable Information is managed by the fiscal agent

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Leverage standardized Generally Accepted Accounting Principles (GAAP)
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher, 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.7 FM07 – Manage Accounts Receivable Funds

The Manage Accounts Receivable Funds business process is responsible for all operations aspects of the collection of payment owed to the SMA. Activities in this business process comply with the CMIA, GASB standards, and GAAP.

Business Capability Matrix Assessment Results

FM07 – Manage Accounts Receivable Funds was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 39: FM07 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	3	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM07 – Manage Accounts Receivable Funds progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Use of standards and business rules definitions improve accuracy and efficiency

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.8 FM08 – Prepare Member Premium Invoice

States may implement member cost sharing through the collection of premiums for medical coverage. The SMA formulates the premium amounts based on state-specific factors. The business process includes: retrieving member premium information, performing required information manipulation according to business rules, and formatting the results into required output information.

- FM08 – Prepare Member Premium Invoice is **not applicable** for New Mexico

3.5.9 FM09 – Manage Contractor Payment

The Manage Contractor Payment business process includes the activities necessary to reimburse contractors for services rendered based on a contract executed between the SMA and the contractor. When a contractor renders services on behalf of a Medicaid member, the contractor invoices Medicaid according to the specifics defined in the contract.

Business Capability Matrix Assessment Results

FM09 – Manage Contractor Payment was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 40: FM09 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	9		
Maturity Level 2	1	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM09 – Manage Contractor Payment progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Use of standards and business rules definitions improve accuracy and efficiency

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.10 FM10 – Manage Member Financial Participation

The Manage Member Financial Participation business process is responsible for all operational aspects of preparing member premium payments.

Business Capability Matrix Assessment Results

FM10 – Manage Member Financial Participation was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 40: FM10 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	3		
Maturity Level 2	7	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM10 – Manage Member Financial Participation progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Issuance of the BMS and FS RFPs detail requirements that will impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement requested services through the BMS and FS RFPs
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.11 FM11 – Manage Capitation Payment

The Manage Capitation Payment business process includes the activities to prepare Managed Care Organization (MCO) capitation payments. Providers receive a Per-Member-Per-Month (PMPM) capitation payment amount for all members that the SMA assigns. The provider payment schedule defines the Primary Care Case Management (PCCM) capitation rates typically actuary-based on an age and gender rating or flat rate. Provider may opt in or out of PCCM plan and does not have to belong to the MCO.

Business Capability Matrix Assessment Results

FM11 – Manage Capitation Payment was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 41: FM11 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	1		
Maturity Level 2	7	8	
Maturity Level 3	3	3	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM11 – Manage Capitation Payment progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Issuance of the FS RFP details requirements that will impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement requested services through the FS RFP
 - ✓ Calculation and processing of PMPM capitation payments to MCO
 - ✓ Automatic creation of claims transactions based on configurable criteria
 - ✓ Ability to issue and recoup capitation payments as Member changes are identified
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.12 FM12 – Manage Incentive Payment

The Manage Incentive Payment business process accommodates administration of various incentive compensations to payers, providers, and members. Federal or state policy defines the programs, which are typically short duration and limited in scope. The policy defines specific periods, qualification criteria, and certification or verification requirements. The Manage Incentive Payment business process follows the Manage Program Policy business process that manages program administrative rules, whether federal or state, and concludes with paying the payer, provider, or member.

Business Capability Matrix Assessment Results

FM12 – Manage Incentive Payment was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 42: FM12 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	2		
Maturity Level 2	8	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM12 – Manage Incentive Payment progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Centennial Care 2.0 increased automation, improving timeliness
- Issuance of the FS RFP details requirements that will impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement requested services through the BMS RFP
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes Clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.13 FM13 – Manage Accounts Payable Information

The Manage Accounts Payable Information business process is responsible for all operational aspects of money the SMA pays. Activities in this business process comply with the CMIA, GASB standards, and GAAP.

Business Capability Matrix Assessment Results

FM13 – Manage Accounts Payable was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 43: FM13 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	2		
Maturity Level 2	10	12	
Maturity Level 3			
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM13 – Manage Accounts Payable progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA (e.g., x.12 837) standards and EDI transactions
- Use of standardized business rules definitions for encounter and waiver programs
- Issuance of the FS RFP details requirements that will impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement requested services through FS RFP
- Utilize standardized Generally Accepted Accounting Principles (GAAP)
- Ensure Claims attachments are compliant with the ASC X12 275 Patient Information
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes Clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher (level 3)
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.14 FM14 – Manage Accounts Payable Disbursement

The Manage Accounts Payable Disbursement business process that is responsible for managing the generation of electronic and paper-based reimbursement instruments and includes: calculation of payment amounts fee-for-service claims, pharmacy point-of-sale, Home and Community-Based Services (HCBS), and the disbursement of payment from appropriate funding sources per state and the SMA accounting and budget rules.

Business Capability Matrix Assessment Results

FM14 – Manage Accounts Payable Disbursement was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 44: FM14 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	2		
Maturity Level 2	9	11	
Maturity Level 3			
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM14 – Manage Accounts Payable Disbursement progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA standards and EDI transactions
- Use of Electronic Funds Transfer (EFT)

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes Clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher, 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.15 FM15 – Manage 1099

The Manage 1099 business process describes how the SMA handles IRS 1099 forms, including preparation, maintenance, and corrections. The Manage 1099 business process receives payment and/or recoupment information from the Process Claim business process or from the Manage Accounts Payable Information business process. The Manage 1099 business process may also receive requests for additional copies of a specific IRS 1099 form or receive notification of an error or a needed correction.

Business Capability Matrix Assessment Results

FM15 – Manage 1099 was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 45: FM15 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	9	9	
Maturity Level 3	1	1	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of FM15 – Manage 1099 remains at level 2. The Financial Services RFP is pending award. The following requirements are noted in the FS RFP:

- All FS performance reports and standard reports must be available through proposed FS solution
- Provider 1099 data, as required by the IRS, must be submitted to HSD through the FS contractor

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement requested services through FS RFP
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes Clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher, 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.16 FM16 – Formulate Budget

The Formulate Budget business process examines the current budget revenue stream, trends, and expenditures, assesses external factors affecting the program, assesses agency initiatives and plans, models different budget scenarios, and periodically produces a new budget.

Business Capability Matrix Assessment Results

FM16 – Formulate Budget was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 46: FM16 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	6	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM16 – Formulate Budget progressed from level 1 to level 2, due to the following:

- Use of a Commercial Off-the-Shelf (COTS) predictive modeling and expenditure forecasting tools
- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Use of State and HIPAA (e.g., x.12 837) standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement requested services through FS RFP
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes Clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.17 FM17 – Manage Budget Information

The Manage Budget Information business process is responsible for auditing all planned expenses and revenues of the SMA. Activities in this business process comply with CMIA, GASB standards, and GAAP.

Business Capability Matrix Assessment Results

FM17 – Manage Budget Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 47: FM17 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	1		
Maturity Level 2	9	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of FM17 – Manage Budget Information progressed from level 1 to level 2, due to the following:

- Collaboration with intrastate (level 3) agencies for budget formulation
- Adoption of the MITA Framework and other nationally recognized standards for clinical and intrastate exchange of information
- Issuance of the FS RFP details requirements that will impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement requested services through FS RFP
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes Clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher, 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.18 FM18 – Manage Fund

The Manage Fund business process oversees Medicaid funds and ensures accuracy in their allocation and the reporting of funding sources. The Manage Fund business process monitors funds through ongoing tracking and reporting of expenditures and corrects any improperly accounted expenditure. It also deals with projected and actual over and under fund allocations.

Business Capability Matrix Assessment Results

FM18 – Manage Fund business was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 48: FM18 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	10	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of FM18 – Manage Funds remains at level 2.

- Issuance of the FS RFP details requirements that will impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement requested services through FS RFP
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes Clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.5.19 FM19 – Generate Financial Report

The Generate Financial Report business process produces various financial and program analysis reports to assist with budgetary controls and to ensure that established benefits and programs are meeting the needs of members and are performing according to state and federal requirements. This process includes: defining the report attributes, defining the state and federal budget categories of service, eligibility codes, provider types, and specialties, extracting required financial information from source data stores, transforming information to meet business and technical needs, applying necessary encryption algorithms for security, and sending information to target destinations.

Business Capability Matrix Assessment Results

FM19 – Generate Financial Report was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 49: FM19 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	10	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of FM19 – Generate Financial Report remains at level 2.

- Issuance of the FS RFP details requirements that will impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes Clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher, 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.6 Member Management

The Member Management business area is a collection of business processes involved in communications between the SMA and the prospective or enrolled participant and actions that the agency takes on behalf of the participant. This business area is responsible for managing the participant data store, coordinating communications with both prospective and current participants, outreach to current and potential participants, and dealing with participant grievance and appeals issues.

The Member Management business area is comprised of two business categories:

- **Member Information Management** – Business activity to manage all operational aspects of the participant data store, which is the source of comprehensive information about applicants and participants and their interactions with the SMA
 - ✓ ME01 – Manage Member Information
- **Member Support** – Business activity to provide information to applicants or participants. Also includes business activity to address an applicant’s or participant’s appeals of adverse decisions or communications of a grievance
 - ✓ ME02 – Manage Applicant and Member Communication
 - ✓ ME03 – Perform Population and Member Outreach
 - ✓ ME08 – Manage Member Grievance and Appeal

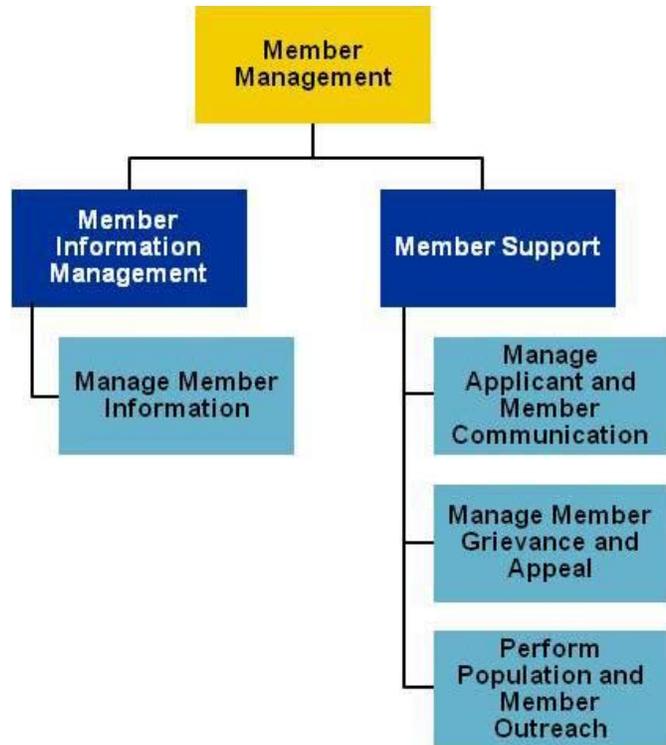


Figure 11: Member Management Diagram

The following table provides a summary view of the assessed MITA maturity for Member Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Member Management	2015 SS-A As-Is	2019 SS-A As-Is	To-Be
ME01 – Manage Member Information	1	2	4
ME02 – Manage Applicant and Member Communication	1	2	4
ME03 – Perform Population and Member Outreach	1	2	4
ME08 – Manage Member Grievance and Appeal	1	2	4
Business Area Maturity Level	1	2	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Member Management

The Member Management business area progressed in MITA maturity due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions
- BMS RFP has been published and addresses expected requirements for this business area

Gap Analysis: Member Management

To achieve a MITA maturity level of 4, the following requirements need to be addressed:

- Enhance Member portal to includes features or functions that accommodate the needs of persons with disabilities
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction

3.6.1 ME01 – Manage Member Information

The Manage Member Information business process is responsible for managing all operational aspects of the Member data store, which is the source of comprehensive information about applicants and members, and their interactions with the state Medicaid.

Business Capability Matrix Assessment Results

ME01 – Manage Member Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 50: ME01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	3	9	
Maturity Level 3		1	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of ME01 – Manage Member Information progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions
- Member eligibility and enrollment information is shared with, Health Information Exchange (HIE)
- Centennial Care 2.0 increased automation, improving timeliness
 - ✓ Updates occur within 24 hours

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Adopt use of CAQH CORE Operating Rules (level 3)
 - ✓ Use of industry standards to exchange clinical data with interstate (level 4) partners
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)

3.6.2 ME02 – Manage Applicant and Member Communication

The Manage Applicant and Member Communication business process receives requests for information, appointments, and assistance from prospective and current members’ communications, and provides requested assistance and appropriate responses and information packages. Communications also provide information regarding eligibility requirements, available Medicaid services, and the rights and responsibilities of applicants and members. This business process includes the log, research, development, approval, and delivery of routine or ad hoc messages. The SMA communicates information through a variety of methods.

Business Capability Matrix Assessment Results

ME02 – Manage Applicant and Member Communication was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 51: ME02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	3	10	
Maturity Level 3		1	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Note: Only 10 of the 11 capability questions were addressed during the 2015 SS-A. The missing question “Is communication linguistically, culturally, and competency appropriate?” was included in this 2019 SS-A update.

Progress Analysis

The MITA maturity of ME02 – Manage Applicant and Member Communication progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Members have access to self-service portals via Centennial Care and YesNM
- Issuance of the BMS RFP which details requirements that impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes sharing of clinical information (level 4)
- Enhance Member portal allowing for specialized features accommodating persons with disabilities
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Award and implement requirements detailed in the BMS RFP

3.6.3 ME03 – Perform Population and Member Outreach

The Perform Population and Member Outreach business process originates internally within the SMA for purposes such as notifying applicants and members regarding new benefit packages and initiatives and/or receiving indicators regarding underserved populations. It includes production of program-related documentation as well as other health benefit information. Information is communicated using a variety of methods.

Business Capability Matrix Assessment Results

ME03 – Perform Population and Member Outreach was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 52: ME03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	3	11	
Maturity Level 3		1	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Note: Only 10 of the 12 capability questions were addressed during the 2015 SS-A. The missing questions “Is communication linguistically, culturally, and competency appropriate?”, and “How formalized in the process?” were included in this 2019 SS-A update.

Progress Analysis

The MITA maturity of ME03 – Perform Population and Member Outreach progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of state-specific and HIPAA standards
- Collaboration with some intrastate partners when using EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Automate the process utilizing an electronic medium, providing the ability to download, save, or print publications
 - ✓ Portal includes features or functions that accommodate the needs of persons with disabilities
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes sharing of clinical information (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.6.4 ME08 – Manage Member Grievance and Appeal

The Manage Member Grievance and Appeal business process handles applicant or member (or their advocate's) appeals of adverse decisions or communications of a grievance.

Business Capability Matrix Assessment Results

ME08 – Manage Member Grievance and Appeal was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 13 capability questions asked for this business process.

Table 53: ME08– Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	9		
Maturity Level 2	1	13	
Maturity Level 3			
Maturity Level 4			13
Maturity Level 5			
Overall Maturity	1	2	4

Note: Only 10 of the 13 capability questions were addressed during the 2015 SS-A. The missing questions “How central is the grievance and appeal process”, “Do applicants or members know how to access the grievance and appeal process?”, and “How does the State Medicaid Agency manage the process” were included in this 2019 SS-A update.

Progress Analysis

The MITA maturity of ME08 – Manage Member Grievance and Appeal progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Both manual and automatic are used, some activities are completed electronically, except where the law requires paper
- Issuance of a Benefit Management Services (BMS) RFP includes requirements regarding process improvement and outlines oncoming vendor responsibilities across various areas (e.g., waiver, PBM)
- There is a clearly defined policy and procedure for the process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes sharing of clinical information (level 4)
- Implement an Appeals Management Plan across intrastate (level 3) and interstate (level 4)
- Implement an information resolution process to reduce the number of appeals
 - ✓ Reduce the duration of the process to 45 days or less for expedited appeals
 - ✓ Distribute Notice of Appeal Rights to 15 minutes or less 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.7 Operations Management

The Operations Management business area is a collection of business processes that manage claims and prepare premium payments. This business area uses a specific set of claims-related data and includes processing (i.e., editing, auditing, and pricing) a variety of claim forms including professional, dental, institutional, drug, and encounters, as well as sending payment information to the provider. All claim processing activity incorporates compatible methodologies of the National Correct Coding Initiative (NCCI). The Operations Management business area is responsible for the claims data store.

The Operations Management business area is comprised of two business categories:

- **Payment and Reporting** – Business activity to provide claim payment information to providers and federal entities
 - ✓ OM14 – Generate Remittance Advice
 - ✓ OM18 – Inquire Payment Status
 - ✓ OM27 – Prepare Provider Payment
 - ✓ OM28 – Manage Data
- **Claims Adjudication** – Business activity to perform edits, audits, and pricing of claims or encounters, accept electronic attachments, and apply mass adjustments to claims or encounters. Additional business activity includes tracking participant’s spend-down amounts
 - ✓ OM07 – Process Claims
 - ✓ OM29 – Process Encounters
 - ✓ OM20 – Calculate Spend-Down Amount
 - ✓ OM04 – Submit Electronic Attachment
 - ✓ OM05 – Apply Mass Adjustment

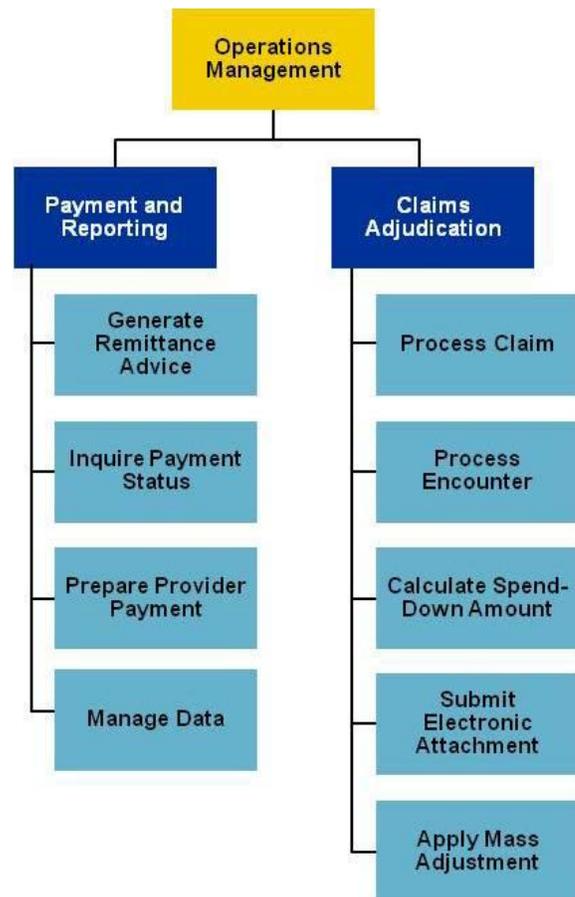


Figure 12: Operations Management Diagram

The following table provides a summary view of the assessed MITA maturity for Operations Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Operations Management	2015 SS-A As-Is	2019 SS-A As-Is	To-Be
OM04 – Submit Electronic Attachment	1	2	4
OM05 – Apply Mass Adjustment	1	1	4
OM07 – Process Claims	2	2	4
OM14 – Generate Remittance Advice	2	2	4
OM18 – Inquire Payment Status	2	2	4
OM20 – Calculate Spend-Down Amount	N/A	N/A	N/A
OM27 – Prepare Provider Payment	1	2	4
OM28 – Manage Data	1	2	4
OM29 – Process Encounters	2	2	4
Business Area Maturity Level	1	1	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Operations Management

Operations Management progressed in MITA maturity due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions
- Use of nationally recognized standards
- Increased collaboration with intrastate partners to develop and share reusable business services

Gap Analysis: Operations Management

To achieve a MITA maturity level of 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Continued development of reusable and sharable business services
- Increase automated functionality across the intrastate and interstate
 - ✓ Decision-making using standardized business rules definitions
 - ✓ Processes that use clinical information result in immediate action, response, and results
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Leverage surveys or questionnaires to ensure stakeholder satisfaction
- Accept and process all attachments electronically

3.7.1 OM04 – Submit Electronic Attachment

The Submit Electronic Attachment business process begins with receiving attachment information that either a payer requests (solicited) or a provider submits (unsolicited). The solicited attachment information can be in response to requests for more information. The business process links attachment information to the associated applicable transaction (e.g., claim, prior authorization, treatment plan, etc.) or suspends for a predetermined time set by state specific business rules, after which the business process purges information.

Business Capability Matrix Assessment Results

OM04 – Submit Electronic Attachment was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 13 capability questions asked for this business process.

Table 54: OM04 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	6		
Maturity Level 2	7	11	
Maturity Level 3		2	
Maturity Level 4			13
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of OM04 – Submit Electronic Attachment progressed from level 1 to level 2, due to the following:

- Majority of transactions are received electronically and some validation is automatic
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Payer has direct access to clinical information stored in the Health Information Exchange (HIE), therefore attachments are not required (level 4)
- Collaborate with other intrastate agencies and entities to adopt national standards, and to develop and share reusable business services (level 3)
 - ✓ Collaborate with interstate agencies to develop and share reusable processes, including clinical information (level 4)
- Timeliness is improved through collaboration and use of a regional HIE (level 3)
 - ✓ Information is available in near real time, including clinical information

3.7.2 OM05 – Apply Mass Adjustment

The Apply Mass Adjustment business process begins with the receipt or notification of retroactive modifications. This includes identifying the payment transactions, such as claims or capitation payment, by identifiers that the SMA paid incorrectly. The business process applies a predetermined set or sets of parameters that may reverse or amend the paid or denied transactions and repay correctly.

Business Capability Matrix Assessment Results

OM05 – Apply Mass Adjustment was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 55: OM05 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	9	1	
Maturity Level 2	3	9	
Maturity Level 3		2	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	1	4

Progress Analysis

The MITA maturity of OM05 – Apply Mass Adjustment remains at level 1, due to the following:

- “How accessible is the information?”
 - ✓ Accessibility of the information for the process need to meet the following:
 - Less than one hour for smaller batches (fewer than 1000 claims) and less than 4 hours for larger claim batches (more than 1000) (level 2)

Despite this one capability, the process overall has progressed due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions
- Collaboration with New Mexico intrastate partner agencies

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Identification of claims affected by a mass adjustment must be automatic to the full extent possible within the intrastate (level 3) and across the interstate (level 4)
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)

- Make information available in near real time. Processes that use clinical information result in immediate action, response, and results.
- Automate decision-making using state (level 3) and regional (level 4) standardized business rules definitions.
- Measure stakeholder satisfaction and maintain a level of 95% satisfaction or higher

3.7.3 OM07 – Process Claims

The Process Claim business process receives original or adjusted claim information, assigns an internal control number, determines its submission status, and based on that performs claim edits or performs claims audits.

Business Capability Matrix Assessment Results

OM07 – Process Claim was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 56: OM07 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	9	8	
Maturity Level 3	3	4	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of OM07 – Process Claim remains at level 2. However, some progress has been made due to the following:

- Adoption and use of the MITA Framework, and other nationally recognized standards (e.g., ICD-10) for intrastate exchange of information
- Use of HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize regional standardized business rules definitions
- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
 - Includes sharing of clinical data and processing claims

- Make information available in near real time; processes that use clinical information result in immediate action, response, and results
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Automate information collection to increase the reliability of HSD’s internal and external sources of information
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.7.4 OM14 – Generate Remittance Advice

The Generate Remittance Advice business process describes the activity of preparing remittance advice/encounter transactions that providers use to reconcile their accounts receivables. This business process begins with receipt of information resulting from the Process Claim business process, performing required manipulation according to business rules, and formatting the results into the required output information.

Business Capability Matrix Assessment Results

OM14 – Generate Remittance Advice was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 57: OM14 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	7	6	
Maturity Level 3	3	4	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of OM14 – Generate Remittance Advice remains at a level 2. However, one capability advanced to level 3 due to the following:

- The use of the MITA framework and other nationally recognized standards for intrastate communication has improved one business capability (use of standards)
- Issuance of the BMS RFP and UPI RFQ detailing requirements that impact and improve the process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Automate process across the intrastate (level 3) and interstate (level 4)
- Collaborate with other intrastate (level 3) and interstate (level 4) agencies and entities to adopt national standards, and to develop and share reusable business services, including clinical information (level 4)
- Improve timeliness via state and federal collaboration, use of information sharing, standards, and regional information exchange hubs
- Make information available in near real time. Processes that use clinical information result in immediate action, response, and results
- Decision-making is automatic using regional standardized business rules definitions (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.7.5 OM18 – Inquire Payment Status

The Inquire Payment Status business process handles requests for specified claim(s), retrieves information from the claims payment history, and generates response information.

Business Capability Matrix Assessment Results

OM18 – Inquire Payment Status was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 58: OM18 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	9	9	
Maturity Level 3	1	2	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	2	2	4

Note: Only 10 of the 11 capability questions were addressed during the 2015 SS-A. The missing question “How integrated is the process” was included in this 2019 SS-A update.

Progress Analysis

The MITA maturity of OM18 – Inquire Payment Status remains at level 2. However, one capability advanced to level 3 due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate information exchange

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize nationally recognized standards for clinical and interstate information exchange (level 4)
- Develop and utilize reusable business services with intrastate agencies (level 3) that includes clinical information sharing with interstate agencies (level 4)
- Develop and manage metrics that demonstrating the ability to produce audit trails 100% of the time
- Automate decision-making using standardized (level 3) and regional (level 4) business rules
- Improve accuracy of information to 99% or higher (level 3 and level 4)

3.7.6 OM20 – Calculate Spend-Down Amount

The Calculate Spend-Down Amount business process is responsible for tracking spend-down amounts and determining if a member meets its responsibility through the submission of medical claims. Once the member has met the spend-down obligation, a modification of eligibility status allows Medicaid payments to begin and/or resume.

- OM20 – Calculate Spend-Down Amount is **not applicable** for New Mexico

3.7.7 OM27 – Prepare Provider Payment

The Prepare Provider Payment business process is responsible for the preparation of the payment report information sent via e-mail, mail, or electronically to providers, which is used to reconcile their accounts receivable.

Business Capability Matrix Assessment Results

OM27 – Prepare Provider Payment was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 59: OM27 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	1		
Maturity Level 2	6	7	
Maturity Level 3	3	3	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of OM27 – Prepare Provider Payment progressed from level 1 to level 2, due to the following:

- Adoption and use of the MITA Framework, and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize nationally recognized standards for clinical and interstate information exchange (level 4)
- Develop and utilize reusable business services with intrastate agencies (level 3) that includes clinical information sharing with interstate agencies (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Automate decision-making using standardized (level 3) and regional (level 4) business rules
- Improve accuracy of information to 99% or higher (level 3 and level 4)

3.7.8 OM28 – Manage Data

The Manage Data business process is responsible for the preparation of the data sets and delivery to federal agencies. Information exchange may include extraction of Medicaid and CHIP Business Information and Solutions (MACBIS) information needs. The Manage Data business process includes activity to extract information, transform to the required format, encrypt for security, and load the electronic file to the target destination.

Business Capability Matrix Assessment Results

OM28 – Manage Data was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 60: OM28 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	10		
Maturity Level 2		10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of OM28 – Manage Data has progressed from level 1 to level 2, due to the following:

- Uses a mix of manual and automatic ETL processes
- Applies a mix of industry standards and EDI transactions
- Automation has improved process timeliness, accuracy, efficiency, accessibility, and stakeholder satisfaction

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Automate ETL process to the full extent possible, across the intrastate (level 3) and the interstate that includes clinical information (level 4)
- Collaborate with other intrastate and interstate agencies and entities to adopt national standards, and to develop and share reusable processes, including clinical information
- Make information available in near real time. Processes that use clinical information result in immediate action, response, and results
- Automate information collection to increase the reliability of HSD’s internal and external sources
- Use industry standards for information exchange with interstate agencies
- Improve accuracy and efficiency to 98% or higher (level 3) and 99% or higher (level 4)
- Improve stakeholder satisfaction to 95% or higher

3.7.9 OM29 – Process Encounters

The Process Encounters business process receives original or adjusted encounter information and determines its submission status, and based on that performs encounter edits, performs encounter audits, calculates state allowed amount, calculates paid amount, or sets paid amount to zero dollars.

Business Capability Matrix Assessment Results

OM29 – Process Encounters was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 61: OM29 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1			
Maturity Level 2	9	7	
Maturity Level 3	3	5	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	2	2	4

Progress Analysis

The MITA maturity of OM29 - Process Encounters remains a level 2. However, some progress has been made due to the following:

- Does the State Medicaid Agency use standards in the process?
 - ✓ Adoption of MITA Framework, industry standards, and other nationally recognized standards (e.g., code sets) for encounter processing, and increased collaboration with other intrastate agencies and entities
- How does the State Medicaid Agency collaborate with other agencies or entities in performing the process?
 - ✓ Increased collaboration with other intrastate agencies and entities to adopt national standards, and to develop and share reusable business services.

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Automate and integrate process to the full extent possible between intrastate (level 3) and interstate (level 4) agencies and other entities
- Utilize MITA Framework, industry standards, and other nationally recognized standards for intrastate and interstate encounter processing
- Collaborate with other intrastate (level 3) and interstate (level 4) agencies and entities to adopt national standards, and to develop and share reusable processes, including clinical information
- Processes that use clinical information result in immediate action, response, and results
- Automate information collection to increase the reliability of HSD's internal and external sources of information.
- Utilize MITA Framework and industry standards for information exchange with intrastate (level 3) and interstate (level 4) agencies
- Automate decision-making using regional standardized business rules definitions without affecting downstream processes

3.8 Performance Management

The Performance Management business area is a collection of business processes involved in the assessment of program compliance (e.g., auditing and tracking medical necessity and appropriateness of care, quality of care, patient safety, fraud and abuse, erroneous payments, and administrative anomalies). This business area uses information about an individual provider or member (e.g., demographics, information about the case itself such as case manager ID, dates, actions, and status, and information about parties associated with the case) and uses this information to perform functions related to utilization and performance. The Performance Management business area is responsible for the business activity and compliance data stores.

The Performance Management business area is comprised of a single business category:

- **Compliance Management** – Business activity to conduct assessment of program compliance
 - ✓ PE01 – Identify Utilization Anomalies
 - ✓ PE02 – Establish Compliance Incident
 - ✓ PE03 – Manage Compliance Incident Information
 - ✓ PE04 – Determine Adverse Action Incident
 - ✓ PE05 – Prepare Recipient Explanation of Medicaid Benefits (REOMB)

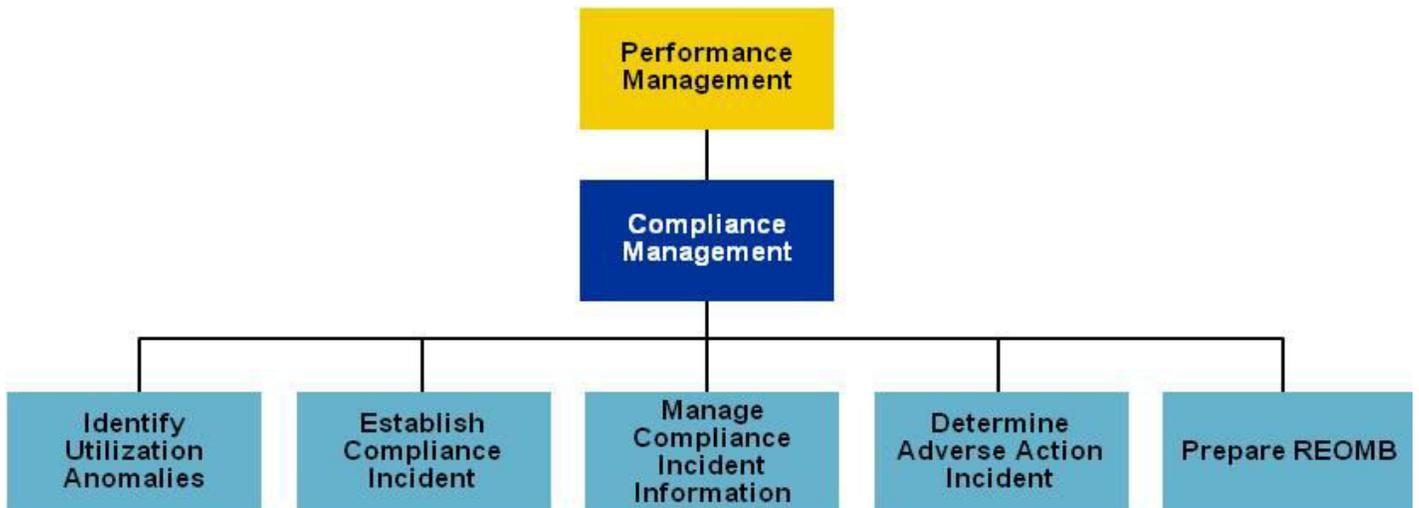


Figure 13: Performance Management Diagram

The following table provides a summary view of the assessed MITA maturity for Performance Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Performance Management	2015 SS-A As-Is	2019 SS-A As-Is	To-Be
PE01 – Identify Utilization Anomalies	1	2	4
PE02 – Establish Compliance Incident	1	2	4
PE03 – Manage Compliance Incident Information	1	2	4
PE04 – Determine Adverse Action Incident	1	1	4
PE05 – Prepare Recipient Explanation of Medicaid Benefits	1	2	4
Business Area Maturity Level	1	1	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Performance Management

Performance Management has progressed in MITA maturity due to the following:

- Qualis Health (now called Comagine) provides compliance management and utilization review services to NM Medicaid
 - ✓ Increased automation through the use of Qualis Health/Comagine has improved timeliness
- Establishment of the BTC
 - ✓ BTC has completed the MCO, Provider, and External Partners Journey Tracks
- Issuance and award of the BMS and QA RFPs which includes requirements for improving the processes within this business area

Gap Analysis: Performance Management

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Increase collaboration across the intrastate (level 3) and interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners
 - ✓ Share information and standards, including clinical, utilizing a regional exchange
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher (level 3)
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.8.1 PE01 – Identify Utilization Anomalies

The Identify Utilization Anomalies business process uses criteria and rules to identify target groups (i.e., providers, contractors, trading partners, or members) and establishes patterns or parameters of acceptable and unacceptable behavior, tests individuals against these models, or looks for new and unusual patterns in order to identify outliers that demonstrate suspicious utilization of program benefits.

Business Capability Matrix Assessment Results

PE01 – Identify Utilization Anomalies was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 questions asked for this business process.

Table 62: PE01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	2		
Maturity Level 2	8	10	
Maturity Level 3	1	1	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PE01 – Identify Utilization Anomalies progressed from level 1 to level 2, due to the following:

- Qualis Health (now called Comagine) currently provides third party assessor and utilization review services to NM Medicaid; coordination between state agencies has improved
 - ✓ Increased automation through the use of Qualis Health/Comagine has improved timeliness
- Establishment of the BTC
 - ✓ BTC has completed the MCO, Provider, and External Partners Journey Tracks
- Issuance of the BMS RFP which includes requirements for improving this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Increase collaboration across the intrastate (level 3) and interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners
 - ✓ Share information and standards, including clinical, utilizing a regional exchange
- Develop and manage metrics that demonstrate the ability to produce audit trails 100% of the time
- Improve accuracy of information to 98% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.8.2 PE02 – Establish Compliance Incident

The Establish Compliance Incident business process is responsible for registration of a case for incident tracking of utilization anomalies. It establishes an incident file, generates incident identification, assigns an incident manager, links to related cases, and collects related documentation.

Business Capability Matrix Assessment Results

PE02 – Establish Compliance Incident was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 63: PE02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	5		
Maturity Level 2	5	10	
Maturity Level 3	1	1	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PE02 – Establish Compliance Incident progressed from level 1 to level 2, due to the following:

- Qualis Health (now called Comagine) provides compliance management and utilization review services to NM Medicaid
 - ✓ Increased automation through the use of Qualis Health/Comagine has improved timeliness
- Issuance of a QA RFP which details requirements that will impact and improve this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Increase collaboration across the intrastate (level 3) and interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners
 - ✓ Share information and standards, including clinical, utilizing a regional exchange
- Integrate process with state and federal law enforcement agencies, CMS, and providers intrastate (level 3) and interstate (level 4)
- Develop and manage metrics that demonstrate the ability to produce audit trails of compliance decision 100% of the time
- Improve accuracy of information to 98% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.8.3 PE03 – Manage Compliance Incident Information

The Manage Compliance Incident Information business process is responsible for the monitoring of incidents of utilization anomalies. Activities include referring incidents to another incident manager or agency, modifications to incident information, journaling activities, and disposition of an incident.

Business Capability Matrix Assessment Results

PE03 – Manage Compliance Incident Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 64: PE03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	6	10	
Maturity Level 3	1	1	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PE03 – Manage Compliance Incident Information progressed from level 1 to level 2, due to the following:

- Qualis Health (now called Comagine) provides compliance management and utilization review services to NM Medicaid
 - ✓ Increased automation through the use of Qualis Health/Comagine has improved timeliness
- Issuance of a QA RFP which details requirements that will impact and improve this

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Increase collaboration across the intrastate (level 3) and interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners
 - ✓ Share information and standards, including clinical, utilizing a regional exchange
- Integrate process with state and federal law enforcement agencies, CMS, and providers intrastate (level 3) and interstate (level 4)
- Develop and manage metrics that demonstrate the ability to produce audit trails of compliance decision 100% of the time
- Improve accuracy of information to 98% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.8.4 PE04 – Determine Adverse Action Incident

The Determine Adverse Action Incident business process receives an incident from an investigative unit with the direction to pursue the case to closure. The case may result in civil or criminal charges, corrective action, removal of a provider, contractor, trading partner, or member from the Medicaid Program, or the SMA may terminate or suspend the case.

Business Capability Matrix Assessment Results

PE04 – Determine Adverse Action Incident was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 65: PE04 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	6	10	
Maturity Level 3	1	1	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PE04 – Determine Adverse Action Incident progressed from level 1 to level 2 due to the following:

- Qualis Health (now called Comagine) provides compliance management and utilization review services to NM Medicaid
 - ✓ Increased automation through the use of Qualis Health/Comagine has improved timeliness
- Use of HIPAA standards and EDI transactions

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Integrate process with state and federal law enforcement agencies, CMS, and providers intrastate (level 3) and interstate (level 4)
- Produce audit trail of compliance decision 100% of the time
- Collaborate with interstate agencies and entities to develop and share reusable processes
- Improve accuracy of information to 98% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.8.5 PE05 – Prepare REOMB

The Prepare REOMB business process is responsible for the creation of the Recipient Explanation of Medicaid Benefits (REOMB) for detecting payment problems. HSD sends the REOMB to randomly selected or targeted members receiving Medicaid services. It gives information on the Medicaid services paid on behalf of the member.

Business Capability Matrix Assessment Results

PE05 – Prepare REOMB was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 66: PE05 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	6	6	
Maturity Level 2	5	5	
Maturity Level 3			
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	1	4

Progress Analysis

The MITA maturity of PE05 – Prepare REOMB remains at level 1.

- REOMBs are sent to member randomly by the fiscal agent

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Integrate REOMB with Personal Health Records (level 3) and automate process to full extent interstate (level 4)
- Generate sampling based on provider billing patterns and utilization reviews (level 3); per Business Capability Matrix, maturity level is not applicable for level 4 or 5
- Collaborate with interstate agencies and entities to develop and share reusable processes
- Improve accuracy of information to 99% or higher (level 3 and 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.9 Plan Management

The Plan Management business area includes the strategic planning, policymaking, monitoring, and oversight business processes of the agency. This business area is responsible for the primary data stores (e.g., Medicaid State Plan, health plans, and health benefits) as well as performance measures, reference information, and rate setting data stores. The business processes includes a wide range of planning, analysis, and decision making activities. These activities include service needs and goals, health care outcome targets, quality assessment, performance and outcome analysis, and information management. As the Medicaid Enterprise matures, Plan Management benefits from immediate access to information, addition of clinical records, use of nationally recognized standards, and interoperability with other programs. The Medicaid Program is moving from a focus on daily operations (e.g., number of claims paid) to a strategic focus on how to meet the needs of the population within a prescribed budget.

The Plan Management business area is comprised of three business categories:

- **Plan Administration** – Business activity to define goals and objectives, maintain Medicaid Program policy, and the Medicaid State Plan
 - ✓ PL01 – Develop Agency Goals and Objectives
 - ✓ PL02 – Maintain Program Policy
 - ✓ PL03 – Maintain State Plan
- **Health Plan Administration** – Business activity to define Qualified Health Plans (QHP) and program performance standards to support Medicaid Program policy
 - ✓ PL04 – Manage Health Plan Information
 - ✓ PL05 – Manage Performance Measures
- **Health Benefits Administration** – Business activity to define health benefit packages (e.g., terms, limitations, and applicable periods) to accommodate service delivery of Medicaid Program policy. Additional business activity includes the definition of reference codes and rates for services or products covered by the Medicaid program
 - ✓ PL06 – Manage Health Benefit Information
 - ✓ PL07 – Manage Reference Information
 - ✓ PL08 – Manage Rate Setting

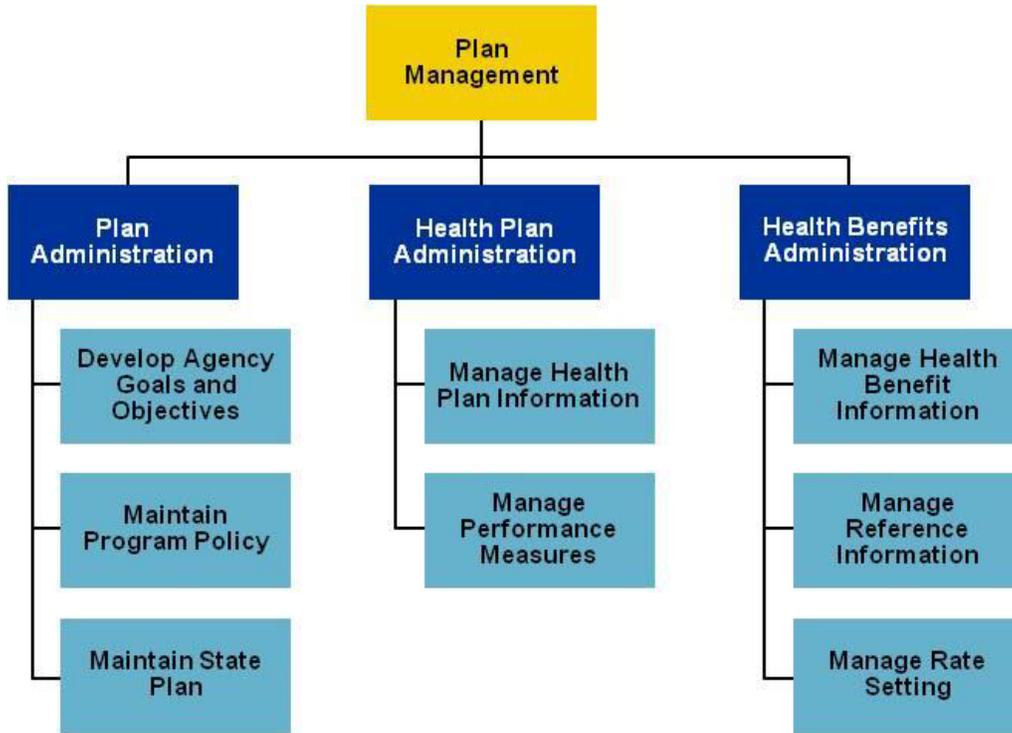


Figure 14: Plan Management Diagram

The following table provides a summary view of the assessed MITA maturity for Plan Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Plan Management	2015 SS-A As-Is	2019 SS-A As-Is	To-Be
PL01 – Develop Agency Goals and Objectives	1	2	4
PL02 – Maintain Program Policy	1	2	4
PL03 – Maintain State Plan	1	1	4
PL04 – Manage Health Plan Information	1	2	4
PL05 – Manage Performance Measures	1	2	4
PL06 – Manage Health Benefit Information	1	2	4
PL07 – Manage Reference Information	1	2	4
PL08 – Manage Rate Setting	1	2	4
Business Area Maturity Level	1	1	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Plan Management

Plan Management has progressed in MITA maturity, due to the following:

- Use of both manual and automatic processes to accomplish tasks
 - ✓ Automation has improved accuracy, effectiveness, and accessibility
- Collaboration with other agencies and entities to adopt HIPAA standards and Electronic Data Interchange (EDI) transactions
- Health information is shared with the state Health Insurance Exchange (HIE)
- HIPAA standard transactions improves accuracy of information

Gap Analysis: Plan Management

To achieve a MITA maturity level of 4, the following requirements need to be addressed:

- Use the MITA Framework, industry standards, and other nationally recognized standards for intrastate (level 3) and interstate (level 4) exchange of information
- Collaborate with other intrastate and interstate agencies and entities to adopt national standards, and to develop and share reusable processes including clinical information
- Improve timeliness via state and federal collaboration, use of information sharing, standards, and state and regional information exchange hubs
- Use survey or questionnaire for information collection
- Automate process to the full extent possible within the intrastate and across the interstate
- Make information available in near real time
 - ✓ Processes that use clinical information result in immediate action, response, and results
- Develop and maintain interstate interoperability
- Automate information collection to increase the reliability of HSD's internal and external sources of information

3.9.1 PL01 – Develop Agency Goals and Objectives

The Develop Agency Goals and Objectives business process periodically assesses and prioritizes the current mission statement, goals, and objectives to determine if changes are necessary. Goals and objectives may warrant change, for example, under a new administration, in response to changes in demographics, public opinion, or medical industry trends, or in response to regional or national disasters.

Business Capability Matrix Assessment Results

PL01 – Develop Agency Goals and Objectives was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 67: PL01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	5	12	
Maturity Level 3			
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PL01 – Develop Agency Goals and Objectives progressed from level 1 to level 2, due to the following:

- Goals and objectives are up-to-date and documented in the HSD Strategic Plan
- Automation has improved accuracy, effectiveness, and accessibility

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Distribute modifications to policy to stakeholders in near-real time (level 3)
 - ✓ Directly tie all relevant operational activities to goals and objectives within the intrastate and across the interstate (level 4)
- Use brainstorming and automatic collaboration tools that enable statewide input to the goal setting process
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher (level 3)
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.9.2 PL02 – Maintain Program Policy

The Maintain Program Policy business process responds to requests or needs for change in the enterprise’s programs, benefits, or business rules, based on factors such as federal or state regulations, governing board or commission directives, Quality Improvement Organization’s findings, federal or state audits, enterprise decisions, or consumer pressure.

Business Capability Matrix Assessment Results

PL02 – Maintain Program Policy business process was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 68: PL02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	5	12	
Maturity Level 3			
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PL02 – Maintain Program Policy progressed from level 1 to level 2, due to the following:

- Improved ability to trace operational activities directly to program policy
- Improved collaboration with other state agencies and use of EDI transactions
- Updated policy information is more accessible

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Distribute modifications to policy to stakeholders in near-real time
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.9.3 PL03 – Maintain State Plan

The Maintain State Plan business process responds to the scheduled and unscheduled prompts to update and revise the Medicaid State Plan. The Medicaid State Plan is the officially recognized statement describing the nature and scope of the State Medicaid program as required under Section 1902 of the Social Security Act.

Business Capability Matrix Assessment Results

PL03 – Maintain State Plan was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 69: PL03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	10	1	
Maturity Level 2	2	11	
Maturity Level 3			
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	1	4

Progress Analysis

The MITA maturity of PL03 – Maintain State Plan remains at level 1.

- The process is manual and done in an ad hoc manner

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Increase frequency for State Plan reviews; automate the process as much as possible (level 2)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.9.4 PL04 – Manage Health Plan Information

The Manage Health Plan Information business process includes evaluation of federal or state regulations, legislative and judicial mandates, federal or state audits, governing board or commission directives, Quality Improvement Organization’s findings, enterprise decisions, and consumer pressure to develop or enhance enterprise business rules, benefit plans, and services available to members. The SMA collaboratively develops Health Plan service offerings with input and review by other agencies and stakeholders. This business process ensures the organization is on track with the goals and objectives of the SMA and is in concert with statewide goals.

Business Capability Matrix Assessment Results

PL04 – Manage Health Plan Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 70: PL04 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	7		
Maturity Level 2	3	7	
Maturity Level 3		3	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PL04 – Manage Health Plan Information progressed from level 1 to level 2, due to the following:

- Collaboration with other agencies and entities to adopt HIPAA standards and Electronic Data Interchange (EDI) transactions
- Process timeliness improved through use of automation
- HIPAA standard transactions improved accuracy of information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Utilize a Unique Health Plan Identifier
- Share Health Plan information with state (level 3) and regional (level 4) HIE
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher

- ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
- ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.9.5 PL05 – Manage Performance Measures

The Manage Performance Measures business process involves the design, implementation, and maintenance of mechanisms and measures the SMA uses to monitor the business activities and performance of the State Medicaid Enterprise’s business processes and programs. This includes the steps involved in defining the criteria by which the SMA measures activities and programs. This business process develops the reports and other mechanisms that it uses to track activity and effectiveness at all levels of monitoring. Business Intelligence analysis occurs within this process.

Business Capability Matrix Assessment Results

PL05 – Manage Performance Measure was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 71: PL05 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	4		
Maturity Level 2	7	11	
Maturity Level 3	1	1	
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PL05 – Manage Performance Measure progressed from level 1 to level 2, due to the following:

- The evaluation of operational business processes against established intrastate SLA and KPI
- Creation and execution of Plan of Action with Milestones (POAM) when targets are not met
- Timeliness of the process has improved through some automation
- Focus on exception resolution has improved efficiency
- Some standardized business rules improve accuracy and require less manual review

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)

- Fully publish performance measures and outcomes within the intrastate and across the interstate
- Collaborate with other intrastate (level 3) and interstate (level 4) agencies and entities to adopt national performance measures as well as develop and share reusable processes including clinical information
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.9.6 PL06 – Manage Health Benefit Information

The Manage Health Benefit Information business process includes the activities for development and implementation of health benefit packages to accommodate service delivery to targeted member populations. Health benefit package administration involves the ability to determine, define and coordinate, and modify the parameters within the SMA, as the Medicaid Enterprise policies, funding, and business decisions dictate.

Business Capability Matrix Assessment Results

PL06 – Manage Health Benefit Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 72: PL06 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	6		
Maturity Level 2	5	7	
Maturity Level 3		4	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PL06 – Manage Health Benefit Information progressed from level 1 to level 2, due to the following:

- HIPAA standard transactions improves accuracy of information
- Automation and state standards increase productivity, improves process and allows focus on exception resolution, improving cost effectiveness and timeliness, reducing error and improving accuracy
- Health information is shared with the state Health Insurance Exchange (HIX)

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share health information utilizing a interstate HIX exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.9.7 PL07 – Manage Reference Information

The Manage Reference Information business process is responsible for all operations aspects for the creation, modification, and deletions of reference code information. The business process includes revising code information (i.e., Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology (CPT), National Drug Code (NDC), and/or revenue codes). This business process also adds rates associated with those codes and updates existing rates. The business process updates and adds information from the Manage Member Information and Manage Provider Information business processes, as well as drug formulary, health plan, and health benefit information.

Business Capability Matrix Assessment Results

PL07 – Manage Reference Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 73: PL07 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	9		
Maturity Level 2	1	9	
Maturity Level 3		1	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PL07 - Manage Reference Information progressed from level 1 to level 2, due to the following:

- Uses of both manual and automatic processes to accomplish tasks
- Collaboration with other agencies and entities to adopt HIPAA standards and Electronic Data Interchange (EDI) transactions
- Increased automation has improved accuracy, accessibility, and effectiveness
- Adoption and use of the MITA Framework, and other nationally recognized standards for intrastate exchange of information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.9.8 PL08 – Manage Rate Setting

The Manage Rate Setting business process responds to requests to add or modify rates for any service or product covered by the Medicaid Program.

Business Capability Matrix Assessment Results

PL08 – Manage Rate Setting was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 74: PL08 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	8		
Maturity Level 2	2	10	
Maturity Level 3			
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PL08 - Manage Rate Setting progressed from level 1 to level 2, due to the following:

- Use of both manual and automatic processes to accomplish tasks
- Collaboration with other agencies and entities to adopt HIPAA standards and Electronic Data Interchange (EDI) transactions
- Increased automation has improved accuracy, accessibility, and effectiveness
- Adoption and use of the MITA Framework, and other nationally recognized standards for intrastate exchange of information

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize MITA Framework and national and industry standards to increase collaboration across the intrastate (level 3) and the interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners (level 3)
 - ✓ Share information and standards utilizing a regional (interstate) exchange (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.10 Provider Management

The Provider Management business area is a collection of business processes involved in communications between the SMA and the prospective or enrolled provider and actions that the agency takes on behalf of the provider. Business processes focus on terminating providers, communications with providers, dealing with provider grievances and appeals issues, and performing outreach services to providers. The Provider Management business area is responsible for the provider data store.

The Provider Management business area is comprised of two business categories:

- **Provider Information Management** – Business activity to manage all operational aspects of the provider data store, which is the source of comprehensive information about prospective and contracted providers and their interactions with the SMA
 - ✓ PM01 – Manage Provider Information
 - ✓ PM08 – Terminate Provider
- **Provider Support** – Business activity to provide information to prospective and current providers. This business category also includes business activities to address grievances and appeals for both prospective and current providers
 - ✓ PM02 – Manage Provider Communication
 - ✓ PM07 – Manage Provider Grievance and Appeal
 - ✓ PM03 – Perform Provider Outreach

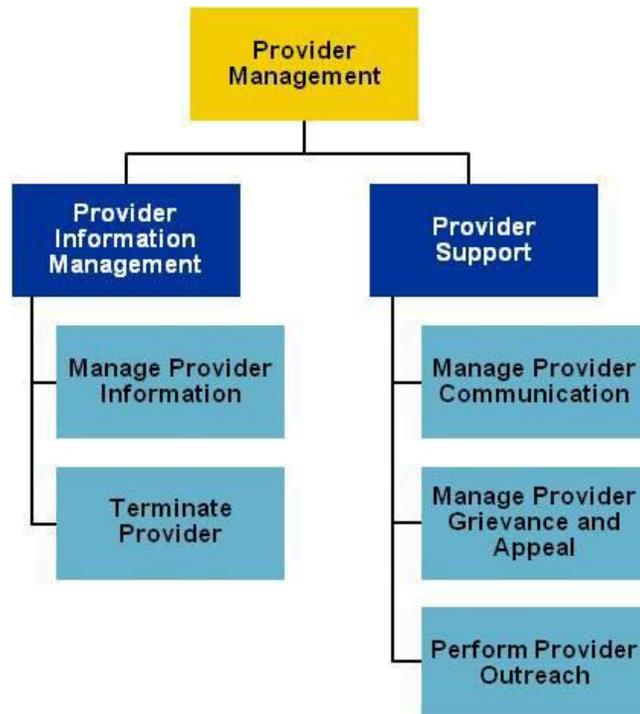


Figure 15: Provider Management Diagram

The following table provides a summary view of the assessed MITA maturity for Provider Management. HSD has set a goal of achieving MITA maturity level 4 for this business area. This SS-A update is focused on assessing progress made and identifying gaps to close in order to meet that goal.

Provider Management	2015 SS-A As-Is	2019 SS-A As-Is	To-Be
PM01 – Manage Provider Information	1	2	4
PM02 – Manage Provider Communication	1	2	4
PM03 – Perform Provider Outreach	1	2	4
PM07 – Manage Provider Grievance and Appeals	1	2	4
PM08 – Terminate Provider	1	2	4
Business Area Maturity Level	1	2	4

The CSG MITA team analyzed and assessed each applicable business process for progress and gaps. The team then consolidated central themes at the process level to create the analysis for the business area as a whole. That consolidated and summarized information is provided below.

Progress Analysis: Provider Management

Provider Management has progressed in MITA maturity, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Issuance of the BMS RFP which includes requirements for improving the business area
- Use of the Provider portal increases automation and timelines of the process

Gap Analysis: Provider Management

To achieve a MITA maturity level of 4, the following requirements need to be addressed:

- Develop and improve automation to increase exchange of information
- Increase collaboration across the intrastate (level 3) and interstate (level 4)
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
 - ✓ Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Develop and manage metrics demonstrating the ability to produce audit trails, accuracy of the process results, and efficiency

3.10.1 PM01 – Manage Provider Information

The Manage Provider Information business process is responsible for managing all operational aspects of the Provider data store, which is the source of comprehensive information about prospective and contracted providers and their interactions with the SMA. The Provider data store is the SMA Source of Record (SOR) for provider demographic, business, credentialing, enumeration, performance profiles, payment processing, and tax information.

Business Capability Matrix Assessment Results

PM01 – Manage Provider Information was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 75: PM01 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	6		
Maturity Level 2	5	8	
Maturity Level 3		3	
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PM01 – Manage Provider Information progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- New Mexico Medicaid uses PECOS and NPI for validation
- Establishment of the BTC
 - ✓ BTC has completed the Provider Track under the Journeys process
- Issuance of the BMS RFP which includes requirements for improving this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Increase collaboration across the intrastate (level 3) and interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners
 - ✓ Share information and standards, including clinical utilizing a regional exchange
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Store enhanced provider background, screening information, and application fees within intrastate (level 3) and share the provider network information regionally (level 4)

- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
- Improve efficiency and accuracy to 98% or higher (level 4)
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.10.2 PM02 – Manage Provider Communication

The Manage Provider Communication business process receives requests for information, and provides publications and assistance from prospective and current providers’ communications (e.g., inquiries related to eligibility of provider, covered services, reimbursement, enrollment requirements). The SMA may communicate information using a variety of methods. This business process includes the log, research, development, approval, and delivery of routine or ad hoc messages.

Business Capability Matrix Assessment Results

PM02 – Manage Provider Communication was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 11 capability questions asked for this business process.

Table 76: PM02 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	8		
Maturity Level 2	3	11	
Maturity Level 3			
Maturity Level 4			11
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PM02 – Manage Provider Communication progressed from level 1 to level 2, due to the following:

- Provider communication is in at least two languages, English and Spanish
- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions
- Process is automated and improves timeliness
 - ✓ Providers have access to self-services via a dedicated Portal

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Include features for persons with disabilities on the Provider Portal

- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher
- Develop a formal Medicaid Enterprise Communication Management Plan
- Increase collaboration across the intrastate (level 3) and interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners
 - ✓ Share information and standards, including clinical, utilizing a regional exchange
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher

3.10.3 PM03 – Perform Provider Outreach

The Perform Provider Outreach business process may develop prospective Provider outreach information, also referred to as Provider recruiting information, for targeted providers (for example, not enough dentists to serve a population). The State Medicaid Agency may communicate information in a variety of methods and produces, distributes, tracks, and archives outreach communications according to state rules.

Business Capability Matrix Assessment Results

PM03 – Perform Provider Outreach business was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 12 capability questions asked for this business process.

Table 77: PM03 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	10		
Maturity Level 2	2	12	
Maturity Level 3			
Maturity Level 4			12
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PM03 – Perform Provider Outreach progressed from level 1 to level 2, due to the following:

- Outreach material is functionally, linguistically, culturally, and competency appropriate
 - ✓ Material meets defined parameters
- Process automation is increased through the use of the Provider portal
- Issuance of the Unified Public Interface RFQ, in conjunction with the Consolidated Customer Service Center (CCSC) RFP highlight requirements focused on provider outreach

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Develop and improve automation to increase intrastate exchange of information (level 3) and interstate (level 4)
- Include features for persons with disabilities on the Provider Portal
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
- Increase collaboration across the intrastate (level 3) and interstate (level 4)
 - ✓ Develop and utilize reusable business services with intrastate partners
 - ✓ Share information and standards, including clinical, utilizing a regional exchange
- Use surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.10.4 PM07 – Manage Provider Grievance and Appeals

The Manage Provider Grievance and Appeal business process handles provider appeals of adverse decisions or communications of a grievance. The Manage Provider Communication business process initiates a grievance or appeal from a provider. The SMA logs and tracks the grievance or appeal, triages it, and sends it to appropriate reviewers. Staff research or request additional information. The SMA may schedule a hearing, conduct actions in accordance with legal requirements, and make a ruling based upon the evidence presented. Staff document and distribute results of the hearings, and add relevant documents to the provider’s information. The SMA formally notifies provider of the decision.

Business Capability Matrix Assessment Results

PM07 – Manage Provider Grievance and Appeal business was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 13 capability questions asked for this business process.

Table 78: PM07 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	12		
Maturity Level 2	1	13	
Maturity Level 3			
Maturity Level 4			13
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PM07 – Manage Provider Grievance and Appeal progressed from level 1 to level 2, due to the following:

- Adoption of the MITA Framework and other nationally recognized standards for intrastate exchange of information
- Use of HIPAA standards and EDI transactions
- Issuance of the BMS RFP which includes requirements for improving this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Utilize a comprehensive Management Plan to administer the process (level 3) and interstate region (level 4)
 - ✓ Develop and share reusable business services with intrastate partners (level 3)
 - ✓ Share reusable processes including clinical with other regional agencies (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails 100% of the time
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

3.10.5 PM08 – Terminate Provider

The Terminate Provider business process is responsible for the termination of provider agreement to participate in the Medicaid Program. Basis for termination may include:

- Provider is not in substantial compliance with the requirements of participation
- Provider/Facility does not meet eligibility criteria for continuation of payments
- Facility fails to submit an acceptable Corrective Action Plan (CAP) within the timeframe specified by CMS or the SMA

Business Capability Matrix Assessment Results

PM08 – Terminate Provider was analyzed for MITA maturity based on the associated Business Capability Matrix. As a result, a MITA maturity level was assigned. The table below reflects the number of business capabilities that fell into each As-Is MITA maturity level based on the 10 capability questions asked for this business process.

Table 79: PM08 – Capability Matrix Results Summary

	2015 As-Is	2019 As-Is	To-Be
Maturity Level 1	10		
Maturity Level 2		9	
Maturity Level 3		1	
Maturity Level 4			10
Maturity Level 5			
Overall Maturity	1	2	4

Progress Analysis

The MITA maturity of PM08 – Terminate Provider progressed from level 1 to level 2, due to the following:

- The Provider Portal has an electronic Provider Enrollment Update form that allows providers or other authorized personnel to submit a request for termination
- Use of the Provider portal increases automation and timelines of the process
- Issuance of the BMS RFP which includes requirements for improving this process

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Develop and share reusable business services with intrastate partners (level 3); share reusable processes including clinical with other regional agencies (level 4)
- Develop and manage metrics demonstrating the ability to produce audit trails of termination decisions 100% of the time
- Develop and manage metrics demonstrating the ability to ensure accuracy of the process results are 90% or higher and efficiency is at 95% or higher
- Leverage surveys or questionnaires to ensure stakeholder satisfaction is 90% (level 3)
 - ✓ Exchange information with interstate (level 4) entities improving stakeholder satisfaction to 95% or higher

4. INFORMATION ARCHITECTURE

CMS defines key capabilities for the State Medicaid Enterprise’s Information Architecture (IA) through the MITA 3.0 Framework. This guidance includes key topics related to the management of Information Architecture and details the key capabilities required for each level of MITA maturity. Information Architecture consists of four capability areas, and is structured to identify the capabilities of the Medicaid Enterprise at the business area level. Individual components that make up the Information Architecture are described below.

- **Data Management Strategy (DMS)** – Provides a structure that facilitates the development of information/data, effectively shared across a State Medicaid Enterprise to improve mission performance
- **Conceptual Data Model (CDM)** – Represents the overall conceptual structure of the data, providing a visual representation of the high-level data needed to run an enterprise or business activity
- **Logical Data Model (LDM)** – Identifies all of the logical data elements that are in motion in the system or shared within the Medicaid Enterprise
- **Data Standards** – Identifies the applicable standard for each MITA data element
- **Information Capability Matrix (ICM)** – The ICM is used to evaluate the maturity of the IA. It consists of seven questions that apply across the four capability areas (described above), and defines the criteria that must be met to achieve a particular level of MITA maturity (1 – 5). The result is 70 data points that inform HSD of the Information Architecture capabilities of the Medicaid Enterprise, and inform the assessed MITA maturity.

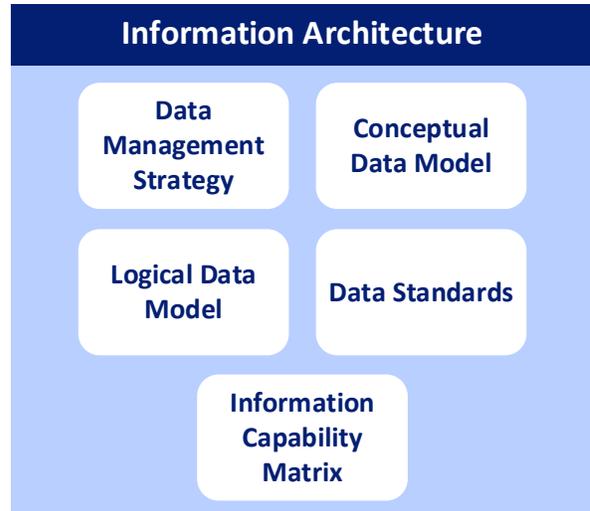


Figure 16: Information Architecture Components Diagram

The following subsections review the IA capabilities. Using the ICM the CSG MITA team reviewed the questions and assessed a current (As-Is) maturity level. Based on that assessment, any progress that has occurred since the last SS-A (2015) was recorded. In addition, the CSG MITA team conducted an analysis to identify gaps that need to be addressed to achieve the desired (To-Be) MITA maturity level of 4. Due to current HSD initiatives which will modernize the entire Medicaid program, the IA assessment was applied at the enterprise level.

4.1 Data Management Strategy

As defined by CMS, the purpose of a Data Management Strategy (DMS) is to document the data management processes, techniques, and products needed by the SME to achieve optimal sharing of Medicaid Enterprise information. A DMS defines an enterprise-wide data strategy that addresses the business flow of data. As the DMS increases in MITA maturity, there is greater movement toward consistent enterprise data standards, and increased understanding of the architecture and data, and an increased capability to share data.

Progress Analysis

The MITA maturity of Data Management Strategy progressed from level 1 to level 2 due to the following:

- Establishment of a Data Governance Council (DGC)
 - ✓ The DGC is responsible for the governance of data management and is made up of representatives from HSD and other state agencies. Other responsibilities include: ensuring federal and state requirements are adhered to in the management of data, providing strategic direction regarding the collection, use, and dissemination of data, and providing a forum to communicate information related to HSD projects and initiatives. Through the efforts of the DGC, HSD is in the process of implementing a common data architecture and has begun the process of enterprise data modeling.
- System Integrator module implementation
 - ✓ The infrastructure being implemented by the System Integrator is using nationally recognized data sharing standards so that, once fully implemented, HSD will be well-positioned to begin sharing Medicaid data, including clinical data, with intrastate and interstate partners.

Due to improvements from the DGC and SI, HSD has achieved MITA maturity level of 3 with regard to data governance.

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Create or adopt a regional metadata repository and mechanism for data sharing, including the sharing of clinical information
- Share with intrastate and interstate partners HSD's common data architecture and enterprise modeling, as well as creation of infrastructure needed to securely share data
- Establish common data architecture as the basis of the intrastate metadata repository
 - ✓ Define the data entities, attributes, data models, and relationships sufficiently to convey the overall meaning and use of Medicaid data and information
- Collaborate with interstate partners to establish a regional metadata repository
 - ✓ If none have been established, HSD can take the lead in this area

Capability Summary

Vendors responsible for implementing the various modules of the MMISR project will be required to participate in the DGC and follow the standards and guidelines established by the DGC. In addition, these vendors will be contributing to the Medicaid Enterprise data models, which will ensure an enterprise-wide set of models, allowing HSD to identify and eliminate any data redundancies across the Medicaid enterprise. As the MMISR project progresses, the influence of the DGC will lead to increased MITA Maturity because of their focus on data standards and enterprise data modeling. With multi-agency participation, the DGC can also guide intrastate partners in adopting HSD standards and guidelines.

4.2 Data Models

Conceptual and Logical Data Models are tools that are used to define the information used within the Medicaid Enterprise. A CDM represents the major business information objects and depicts their relationships to each other, using business terminology. It bridges the knowledge gap between business users and IT staff. The CDM also provides the basis for the LDM, which further details the data and the characteristics of that data and is used by data architects to build information systems. As explained by CMS in the MITA 3.0 documentation (Chapter 4 – Logical Data Model of Part II – Information Architecture), the LDM provides a means of ensuring the completeness of the business model and serves as a tool that enables the reengineering of Medicaid business processes. With the inclusion of intrastate and interstate partners, the LDM becomes a tool to enable interoperability and data sharing.

Progress Analysis

The MITA maturity for Conceptual and Logical Data Models progressed from level 1 to level 2 due to the following:

- Development of enterprise wide conceptual and logical data models

The models are being created using nationally-recognized standards (i.e., Unified Modeling Language (UML) with data modeling extension exportable to Entity Relationship Diagram (ERD) via Extensible Markup Language Metadata Interchange (XMI)).

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- All on boarding vendors must contribute to updating the enterprise-wide models
- Share data models with intrastate and interstate partners
- Incorporate clinical data into the data models
- Incorporate data from intrastate and interstate partners into the data models

4.3 Data Standards

Data standards are necessary when two or more parties exchange information. They fall into two major categories: structure data standards, which specify how to format or structure data, and vocabulary data standards, which deal with the content of the data elements and enable systems to understand the meaning of the data. Data standards help ensure that implementations are interoperable and plug-and-play capable. CMS considers the lack of shared data standards one of the most important issues facing Medicaid system and subsystem interoperability.

Progress Analysis

The MITA maturity for Data Standards progressed from level 1 to level 2 due to the following:

- Use of five nationally-recognized industry standards:
 - ✓ National Information Exchange Model (NIEM)
 - ✓ Federal Health Information Model (FHIM)
 - ✓ Fast Healthcare Interoperability Resources (FHIR)
 - ✓ Accredited Standards Committee (ASC) X12
 - ✓ XML XMI
- All newly implemented MMISR modules are required to incorporate national applicable standards

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Expanded use of nationally-recognized industry data standards to include intrastate (level 3) and interstate (level 4) partners

Capability Summary

Given that data standards are quite dynamic in nature, HSD should conduct a periodic review of available data standards and versions, keeping HSD's data standards current. Maintaining current data standards positions HSD to support emerging health data standards and to utilize data sharing architectures. It also enables HSD to take the lead in incorporating intrastate and interstate partners into their Medicaid enterprise.

5. TECHNICAL ARCHITECTURE

CMS defines key capabilities for the State Medicaid Enterprise’s Technical Architecture (TA) through the MITA 3.0 Framework. This guidance includes key topics related to management of technical architecture and details the key capabilities required for each level of MITA maturity. Technical Architecture consists of three technical service areas each with five technical service classifications, and is structured to identify the capabilities of the Medicaid Enterprise at the business area level. Individual components that make up the Technical Architecture are described below.

- **Technical Management Strategy** – Provides the background and process for expanding Medicaid systems to incorporate modern-day technologies into the Medicaid Enterprise. The involvement of sound software design architecture practices and technology advances such as Cloud Computing provide the foundation for enhanced capabilities.
- **Application Architecture** – Provides the information necessary to develop enterprise applications using business and technical services.
- **Business Services** – Implements a business capability for a business process. It is a basic element in Cloud Computing and Service Adoption architecture. The goal of the TA is to specify business services that allow interoperable Medicaid business processes.
- **Technical Standards** – Consists of the Technical Reference Model (TRM) and a Standards Profile. The TRM is a list of technical services, either aggregated or broken down into levels that specify the standards. The Standards Profile includes current, future, and emerging industry standards.
- **Technical Services** – Consists of a detailed set of technical functions that collectively define the MITA technology infrastructure. Within a given Technical Service Classification (TSC) and corresponding Technical Service Area (TSA), the TA defines the technical software service capabilities. CMS defines three TSAs (Access and Delivery, Intermediary and Interface, and Integration and Utility), each with five TSCs.
- **Technical Capability Matrix (TCM)** – The TCM is used to evaluate the maturity of the TA. It consists of 15 questions that apply across three capability areas and defines the criteria that must be met to achieve a particular level of MITA maturity (1 – 5). The result is 150 data points that inform HSD of the Technical Architecture capabilities of the Medicaid Enterprise, and inform the assessed MITA maturity.

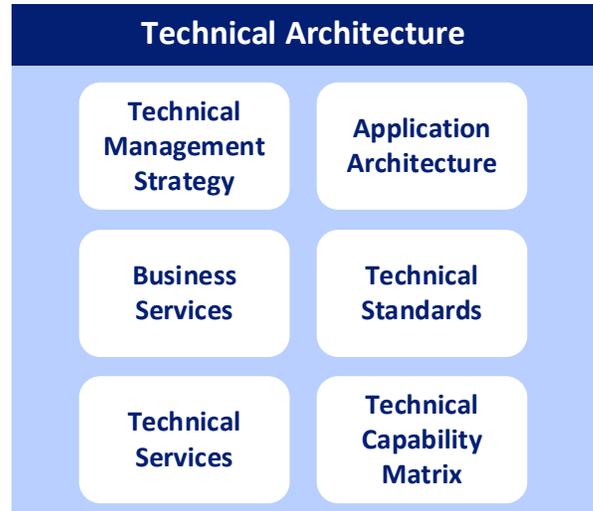
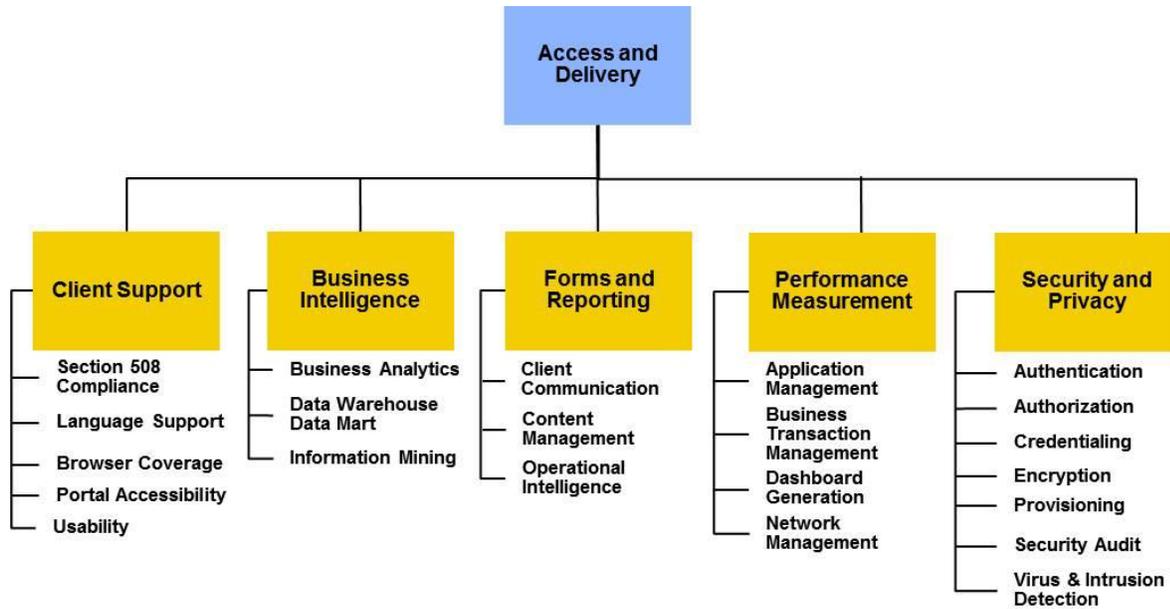


Figure 17: Technical Architecture Component Diagram

The following subsections review the TA capabilities. Using the TCM, the CSG MITA team reviewed the questions and assessed a current (As-Is) maturity level. Based on that assessment, any progress that has occurred since the last SS-A (2015) was recorded. In addition, the CSG MITA team conducted an analysis to identify gaps that need to be addressed to achieve the desired (To-Be) MITA maturity level of 4. Due to current HSD initiatives which will modernize the entire Medicaid program, the TA assessment was applied at the enterprise level.

5.1 Access and Delivery

The Access and Delivery TSA encompasses design drivers and enablers such as web browser connectivity, language support, Customer Relationship Management (CRM), and forms and reports services. The access and delivery functions have a direct impact on the state staff, the public, providers, and all other stakeholders. The span of coverage of the services offered will tend to change over time as the demands and technology needs of the end-user evolve. Capabilities are: Client Support, Business Intelligence, Forms and Reporting, Performance Measurement, and Security and Privacy.



5.1.1 Client Support

The Client Support focuses on the ability for different client classes to access and interface with the business functions necessary to complete their responsibilities with the Medicaid system while using a single web-enabled access point. Considerations are given for multiple languages, usability of the interface supporting regulatory compliance, and device support.

Progress Analysis

The MITA maturity of Client Support remains at level 1.

- Primary stakeholders (Member and Provider) lack access to a single online portal

Gap Analysis

HSD currently provides access to member and provider stakeholder data as appropriate through manual or alphanumeric devices, however web access is limited. State stakeholders have access and authorization through active directory services.

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implementation of self-service web access to providers and members via a single online access portal, supporting multiple browsers, multiple languages, popular operating systems, and pursuing a no wrong door approach to benefit information
- Development of multi-channel access to benefit information including adaptive web applications, mobile applications, and desktop applications
- Ongoing pursuit of development efforts for access to member clinical information
- Develop connection, interoperability, and sharing of standards with HIE for both intrastate and interstate agencies

5.1.2 Business Intelligence

The Business Intelligence (BI) TSC focuses on the SMA's ability to capture and manage relevant and functional data and the subsequent reporting and analysis of that data. The evaluation includes the structure of the data platform including Data Warehousing, inherent data models, and the analytic tools that will facilitate the development of business intelligence and decision making information.

Progress Analysis

The MITA maturity of Business Intelligence progressed from level 1 to level 3 due to the following:

- The New Mexico HHS 2020 MITA Technical Management Strategy document
 - ✓ Includes a planned data services subsystem containing both canned and ad hoc reports, data visualization, and business analysis capabilities
- Award and onboarding of the System Integrator module vendor
 - ✓ Provides foundation of quality data through an enterprise-wide Master Data Management solution
- Award and onboarding of the Data Services module vendor
 - ✓ Participation in the data governance council

- ✓ Enforces policies regarding data structure, definitions, values, exceptions, and performance metrics

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Define and develop enterprise-wide standards and metrics
- Define and develop detailed performance management strategies and standards requirements
- Enforcement of data policies as to structures, definitions, values, and performance metrics supporting MITA and HSD objectives
- Implement the Master Data Management system at the enterprise level to minimize the effects of operational and efficiency challenges from inconsistent, inaccurate, and duplicative data
- Continued development of the data services subsystem, containing ad hoc and canned reporting, data visualization, and business analysis capabilities will provide necessary and strategic decision-making information and support

5.1.3 Forms and Reporting

The Forms and Reporting TSC focuses on the ability to receive data via an electronic interface or web form, provide validation of that data, and make available via those same channels, validated operational information in a form that is best suited for use by clients and other stakeholders.

Progress Analysis

The MITA maturity of Forms and Reporting progressed from level 1 to level 2 due to the following:

- Limited data validation occurs with basic field editing functions as data entry is entered directly into the application, and some data auto-populates from the Web Portal, YesNM, with further validation by caseworkers.
- There is report development and report production based on manually entered information.
- The Eligibility and Enrollment system (ASPEN) can upload some documents via web portal
 - ✓ This capability advances the Forms and Reporting component of the Eligibility and Enrollment business area for TA to a level 3.

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Incorporate the ability to upload attachments from planned web applications,
 - ✓ For example: PDFs, X-rays, and texts
- Develop real-time submission of claims from providers and clinics
- Allow submission of electronic reports for automatic updating into the SMA

5.1.4 Performance Measurement

The Performance Measurement TSC emphasizes the ability for the system to collect and report program performance data and the structuring of the data to facilitate the collection and reporting of the data related to business processes and performance. It also discusses the nature and source of the defined metrics, whether they are defined by business users or industry standards.

Progress Analysis

The MITA maturity of Performance Measurement progressed from level 1 to level 2 due to the following:

- Some performance standards have been defined and developed by business users
- Performance evaluation determination is accumulated from various reports and entered manually into Excel for analysis
- The Eligibility and Enrollment system (ASPEN) system uses CMS based standards
 - ✓ System performance reviews happen daily
 - ✓ Alerts and notification are reviewed and configured
 - ✓ Application performance is captured in a monthly deliverable

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Configure all systems to alert appropriate staff when predefined hardware or network performance measures are below standards, or boundaries have been exceeded ,allowing for prompt reactions and avoiding costly delays
- Develop automatic system event management to alert technical support staff when performance of hardware or network is not within defined performance level boundaries
- Accelerate the use of data services tools to collect and analyze data from members, providers, and business processes creating benchmarks toward business goals and the foundation for future performance metrics
- Train business users on the ongoing development and evaluation of performance standards and the integration into SMA of CMS and other national level performance metrics
- Align database development to create structures to capture and summarize performance data

5.1.5 Security and Privacy

The Security and Privacy TSC focuses on the ability of the SMA to maintain secure access to Medicaid information to authorized users via proper authentication and authorization. It addresses the various device types and the security and privacy protocols necessary to protect the information on the different platforms. It discusses the importance of role-based authentication and the single sign-on capability needed to facilitate secure access to various systems in the SMA enterprise.

Progress Analysis

The MITA maturity for Security and Privacy progressed from level 1 to level 2 due to the following:

- System log-in credentials for member and provider access are in place including the use of passwords
- HSD leverages a state-produced active directory for State employees used to monitor user access

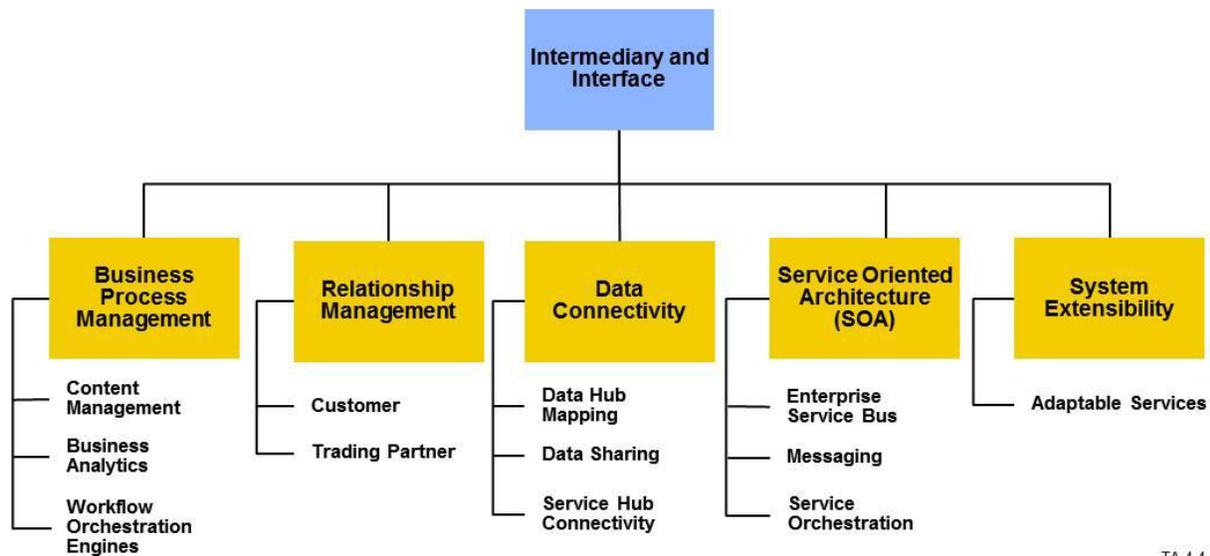
Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Pursue implementation of Identity and Access Management and single sign-on solution for applications across all channels and systems
- Provide expanded access and services for providers and members via browser based applications, voice response systems, and mobile or similar portable device
- Evaluate and pursue user authentication using a two-factor authentication methodology

5.2 Intermediary and Interface

The Intermediary and Interface technical service area contains drivers and enablers, such as process orchestration, workflow and relationship management functionality. The Enterprise Service Bus (ESB) offerings handle the intermediary services (sometimes referred to as middleware). The interface services tie to connectivity offerings of the nearby Medicaid Enterprise entities and other external organizations that require a connection. Capabilities are: Business Process Management, Relationship Management, Data Connectivity, Service Oriented Architecture (SOA), and System Extensibility.



TA-4-4

5.2.1 Business Process Management

The BPM TSC focuses on the ability of the SMA to support and manage the implementation of business processes and their related standards within the Medicaid system. Successful BPM management includes the adoption of, and conformance with, nationally recognized BPM standards that facilitate automation and efficiencies of the business processes.

Progress Analysis

The MITA maturity for Business Process Management progressed from level 1 to level 2 due to the following:

- Use of a mixture of manual and automatic business processes
- Alignment of business workflows with CMS provided guidance, per MITA Framework

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Follow the NM HHS 2020 MITA Technical Management Strategy for Business Process Management development, modeling and standardizing in an industry standard notation (BPMN) that is universally known and shareable with the NM departments and intrastate agencies
- Implement the Orchestration Plan to further the development of standards for defining and designing orchestration steps for components of business processing, assisting in documenting those processes

- Monitor the development of the MITA Maturity Roadmap for progress on the MITA Maturity and integration of the MITA initiative across the intrastate

Capability Summary

The primary goal of BPMN is to provide a process modeling notation that is understandable by all business users, from the business analysts that create the design of the processes, to the technical developers responsible for implementing the technology that will perform those processes, and finally, to the business managers who will manage and monitor those processes. This implementation of enterprise BPM standards will elevate the MITA maturity level by incorporating a shareable design standard for business processes that will facilitate enterprise-wide business process development and will assist in documenting the processes described by CMS with respect to MITA.

A fully defined MITA Maturity Roadmap, updated on an annual basis, will, in conjunction with the implemented BPMN standard strategy discussed above, facilitate HSD's ability to support the maintenance of BPM standards progressing forward. This will allow for full integration of the MITA initiative within the enterprise and achieving the desired MITA maturity level of 4.

5.2.2 Relationship Management

The Relationship Management TSC relates to the ability of the Medicaid system to interface and exchange data with other external entities. It evaluates the utilization and alignment of the system architecture that complies with the MITA Framework, industry standards, and other recognized standards as to how effectively the system interfaces with trading partners in support of data exchange.

Progress Analysis

The MITA maturity for Relationship Management progressed from level 1 to level 2 due to the following:

- Use of a national standard Electronic Data Interchange (EDI) and EDI tool(s) to handle exchange of approved transactions sets, facilitating data exchange between external partners

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Develop a business analytical strategy to categorize data associated with key stakeholders, business processes, and production activities and implement that strategy to develop related trends and patterns to strengthen relationships
- Develop a strategy to define personalization data for beneficiaries, providers, and other partners, and incorporate personalization into web pages for increased efficiency in stakeholder transactions
- Pursue a strategy to interact with other state agencies for interoperability using nationally recognized interface standards, providing the ability to acquire and analyze relevant data associated with key stakeholders, business processes, and production activities, advancing MITA maturity
- Development of a personalized data capability providing members, providers, and business partners, with a fully integrated web portal where personalization data can be captured, modeled, and made available for external partners

5.2.3 Data Connectivity

The Data Connectivity TSC focuses on the ability of the system to use an enterprise data exchange methodology between the Medicaid system and other systems and entities. It assesses the use of the secured network and information hub as the communication channel for access and delivery of information in standard formats between systems.

Progress Analysis

The MITA maturity for Data Connectivity progressed from level 1 to level 2 due to the following:

- Use of an electronic information exchange across a secured enterprise network
- EDI transactions are used and exchanged in standards formats (e.g., x.12) among trading partners

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement the planned Operation Data Hub (ODH), which will facilitate data integration across the enterprise including intrastate agencies
- Implement the planned System Migration Repository (SMR), which will simplify the ingestion of legacy and other data from multiple sources within the enterprise
- Pursue the harmonization and deduplication of legacy data, and produce data in a canonical format, allowing for the simplification and conversion and communication of data

5.2.4 Service Oriented Architecture

The Service Oriented Architecture (SOA) TSC describes an application architecture within which business services and selected technical services can be invoked using documented interfaces. The SOA Architecture is a building block for MITA, along with the adoption of the MITA standard of the use of XML-messaging. Adherence to this architecture will facilitate the interchange between business services and across organizational boundaries.

Progress Analysis

The MITA maturity for Service Oriented Architecture progressed from level 1 to level 2 due to the following:

- Adoption of SOA and MITA Framework as architectural building blocks
 - ✓ The SOA framework leverages ESB integration platform technology to deliver loose coupling of MMISR modules, workflows, and business rules management
 - ✓ Provides integration of disparate services and technologies
- Award and onboarding of the SI module vendor that provides:
 - ✓ Service Bus, Adaptor Services, Connectors and independent web service endpoints, along with an API suite

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Complete the integration of the planned SOA suite, including the ESB, across all intrastate systems

5.2.5 System Extensibility

The System Extensibility TSC focuses on the capability of the Medicaid system to extend functionality across the SMA enterprise.

Progress Analysis

The MITA maturity for System Extensibility progressed from level 1 to level 2 due to the following:

- Manual transactions and electronic transactions are in use to complete business processes and limited web services have been developed using SOAP-based services.
- The SOA and ESB are being deployed through the SI module, which also includes RESTful web services, providing for the future seamless coordination and integration with other external entities (e.g., HHS, and intrastate agencies, including HIX).

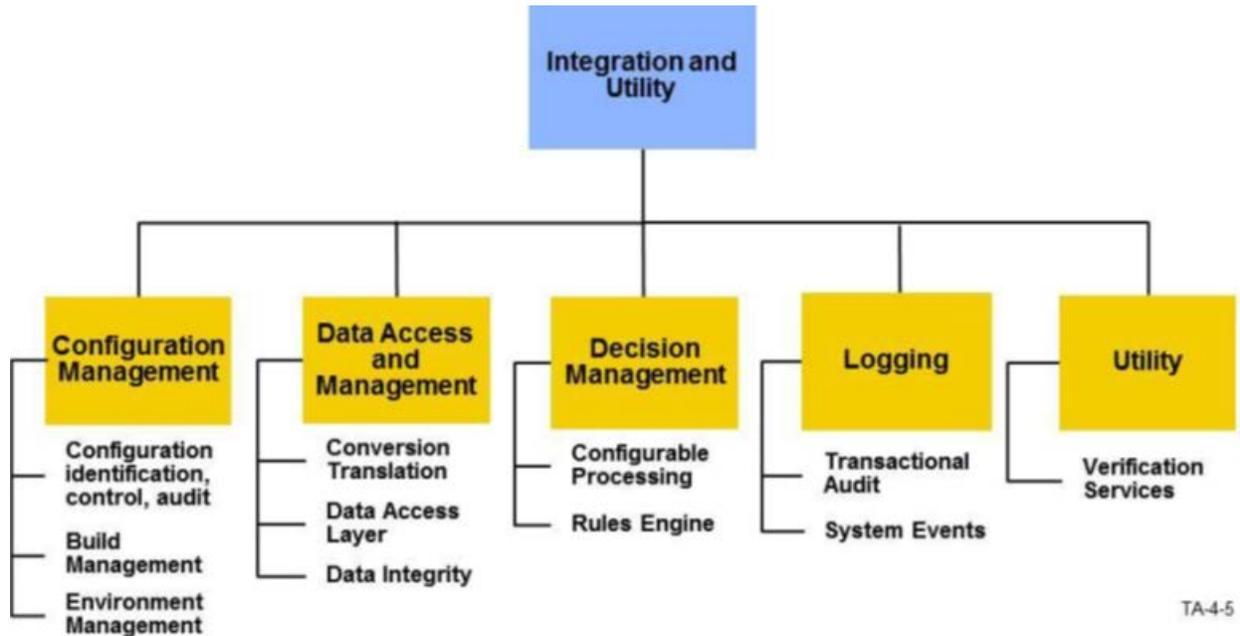
Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Migrate to a standardized RESTful and/or SOAP-based web service allowing for seamless coordination between entities.
- ✓ Coordinate the use of web services with United States Department of Health and Human Services, other intrastate and interstate agencies.

5.3 Integration and Utility

The Integration and Utility technical service area includes design drivers and enablers such as solution stacks, database access layer services, scalability, application versioning, and verification type utility services. These core service components will likely be a combination of the unique services and a set of reusable services across the Medicaid Enterprise. Capabilities are: Configuration Management, Data Access and Management, Decision Management, Logging, and Utility.



5.3.1 Configuration Management

The Configuration Management TSC focuses on the ability for end-users to configure business rules to meet changing business needs and how responsive the Medicaid system is to change and the evaluation of the effectiveness in the use of an automated Configuration Management Methodology when introducing new technology.

Progress Analysis

The MITA maturity for Configuration Management remains at level 1.

- HSD uses technology dependent interfaces to applications, and tightly coupled interfaces are common.
- HSD uses a mixture of manual and automated Configuration Management methodologies.
- The Eligibility and Enrollment system (ASPEN) is based on SOA service architecture and any new APIs or services can be integrated via data.
 - ✓ Configuration Management is handled with several tools, including JIRA, and JAMA. Employing these capabilities results in a MITA maturity level of 2 for Eligibility and Enrollment

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement the Configuration Management Plan, planned as part of the SI module, which encompasses standards for establishing and maintaining configuration control for the SI managed modules and components encapsulated within the SMA enterprise
- Implement a Software Configuration Management tool for access to software assets, version control, code, design documents, and test results
- Adopt a Build, Process, and Environment Management Plan through the SDLC process
- Adopt a system development process between interstate agencies and external entities

Capability Summary

The SI module implementation will provide a solid foundation for advancing the MITA maturity level, through the use of the configuration management plan to systematically manage, organize, and control changes in documents, codes, and artifacts during the SDLC.

5.3.2 Data Access and Management

The Data Access and Management TSC focuses on the system's ability to receive, translate, and process all data necessary to support business needs, while conducting any information exchange (internally and externally) using MITA Framework, industry standards, and other nationally recognized standards.

Progress Analysis

The MITA maturity for Data Access and Management progressed from level 1 to level 2 due to the following:

- HSD has information residing in relatively few schemas using single source methodologies with a custom-coded, tightly coupling approach.
- The multiple locations of resident data make it difficult for users to access information. External data that is received is transformed and mapped to the resident data models.

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement the use of DS module tools to establish and manage data models, including standards and definitions which will promote data consistency and enhanced sharing through common data-access mechanisms
- Develop information exchange (internally and externally) using MITA Framework, industry standards, and other nationally recognized semantic data standards for clinical information and electronic health records
- Implement the planned ODH, which will facilitate data integration across the enterprise, including intrastate agencies

5.3.3 Decision Management

The Decision Management TSC focuses on the ability to create and execute business rules within the system in both human and machine-readable format to eliminate the inconsistency of the manual application and coding of the rules. It evaluates the implementation of a Business Rules Engine and the structure of business rules allowing business users to express business policies as business rules.

Progress Analysis

The MITA maturity for Decision Management has progressed from level 1 to level 2 due to the following:

- Use of multiple methods for rule creation and management
- Business rules are developed and operated in a tightly coupled batch environment
- HSD uses business rules for decision management. Some business rules are imbedded in the core application code, while others operate within a Business Rules Engine (BRE) environment, eliminating the need for 'hard' coding of some business rules

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement BRE technology (described in the TMS document), providing the capability to define and describe business rules making them understandable and reusable for the end users.
- Implement a business rules editor which has the capability to trace each business rule back to the business process in which the rule is tested, providing impact analysis
- Evaluate multiple methods for rule creation and management including decision trees, scorecards, decision tables, and graphical decision flows

Capability Summary

The direction of the New Mexico HHS 2020 MITA Technical Management Strategy document reflects the BRE functionality as being replaced with the a more comprehensive BRE suite of technologies. As HSD moves in this direction, the change provides a path to develop rules that reside in a rules engine and follow an English language, If-Then-Else format. The use of this format allows a business analyst to mirror business policies and express them as business rules. This provides business rules authors with a sufficient degree of confidence in the quality and usefulness of developed business rules.

5.3.4 Logging

The Logging TSC focuses on the ability of the Medicaid system to log, audit, and report user access and track system events. It requires the evaluation of the logging functions of Security and Event Management tools that generate and process audit records. The Eligibility and Enrollment system (ASPEN) provides for role-based access that allows for different roles and a variety of access types. Having this capability results in a MITA Maturity level of 2 for the Eligibility and Enrollment business area.

Progress Analysis

The MITA maturity for Logging remains at level 1. Stakeholders use logon IDs and passwords to access the system. There is limited access and tracking functionality to user activity and history. Access to networking log files is available through the use of Splunk software.

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Implement IAM to provide authentication, authorization, and auditing.
 - ✓ Providing the ability to manage and track activities of unique logon IDs and related security profiles
- Expand the use of the SIEM tool in place to cover the HSD enterprise, and to generate audit records, playback, and provide real-time analysis of security alerts
- Research and implement the use of an audit tool to generate and process audit records

Capability Summary

Significant progress for the logging capability is underway, with the SI module planning to incorporate, an Identity and Access Management (IAM) system as an enterprise service in the SOA framework. The SMA will use Single Sign-On (SSO) and IAM to implement authentication, authorization and auditing. This will provide them the ability to establish and manage unique logon IDs and security profiles for stakeholders, users, and other contractors. HSD will also enhance the use a Security Information and Event Management (SIEM) product, to generate and process audit records and provide real-time analysis of security alerts.

5.3.5 Utility

The Utility TSC focuses on the ability of this system to meet the intended business needs of the enterprise. The use of a formal SDLC methodology is inherent to this capability.

Progress Analysis

The MITA maturity for Utility remains at level 1.

- Unique or specialized tasks are completed through manual activity
- Minimal use of web services across the enterprise

Gap Analysis

To achieve MITA maturity level 4, the following requirements need to be addressed:

- Timely information and decision support data, providing the ability to support intrastate agency sharing of information and services in a business-to-business relationship.
- Develop the SDLC methodology and governance activities across the enterprise
 - ✓ Implement the SDLC methodology according to CMS guidelines
- Establish standards for transmission, security, and integration of the SI and BPO modules to meet all applicable State and Federal requirements
- Develop and implement event-driven dashboard reporting across the enterprise, providing insight into real-time activities and supporting up-to-the-minute decision making

Capability Summary

The awarding of the SI contract has given direction for the implementation of a consistent and integrated SDLC methodology and governance activities across the SI solution including the BPO modules. The SI has developed an infrastructure management team responsible for standing up and maintaining the multiple environments in order to facilitate installing, versioning, and upgrading of all MMISR modules.

As part of the SDLC governance, HSD is developing enterprise requirements that establish standards for data transmission, security, and integration for the modules that comprise the MMISR project. These requirements will be based on best-in-class industry standards and ensure that the new system meets all applicable State and Federal requirements and standards.

6. CMS SEVEN CONDITIONS AND STANDARDS

As described in Appendix A of the MITA Framework 3.0 SS-A guidance provided by CMS. The MITA Medicaid Enterprise includes the three MITA architectures (Business, Information, and Technical) and supports the Seven Conditions and Standards. The CMS defined MITA Maturity Model (MMM) aligns the Seven Conditions and Standards with five levels of maturity to define the capabilities of the Medicaid Enterprise.

The CSG MITA team as part of the MITA 3.0 SS-A update, performed an assessment of the Seven Conditions and Standards across each of the three described architectures BA, IA, and TA. The assessment of each condition and standard utilized the MITA-defined matrices specific to each architecture. Based on the MITA-defined guidelines, each architecture was evaluated to determine the current (As-Is) capabilities for each of the 7C&S across the New Mexico Medicaid Enterprise. Due to the nature of the assessment (SS-A update) the desired (To-Be) MITA maturity was already established as level 4 and therefore remained unchanged from the 2015 assessment.

In the assessment tables below, the current (As-Is) MITA maturity level is provided, along with a bulleted list of items providing justification for the assessed level. The bulleted list of items below the To-Be level provides a gap analysis, indicating activities that must be accomplished in order to reach the desired (To-Be) MITA maturity level 4.



Figure 18: CMS Seven Conditions and Standards

6.1 Modularity Standard

CMS describes the Modularity Standard defined in **MITA Framework 3.0, SS-A Appendix A – Seven Standards and Conditions** as follows:

Uses a modular, flexible approach to systems development, including the use of open interfaces and exposed Application Programming Interfaces (API); the separation of standardized business rule definitions from core programming; and the availability of standardized business rule definitions in both human and machine-readable formats. The commitment to formal system development methodology and open, reusable system architecture. Activity includes the following:

- *Use of Systems Development Life Cycle Methodology (SDLC)*
- *Identification and description of open interfaces*
- *Use of standardized business rule definitions engines*
- *Submission of standardized business rule definitions to a U.S. Department of Health & Human Services (HHS) designated repository*

The following table provides the guidelines (as defined by CMS) in assessing and evaluating each architecture for compliance with the Modularity Standard.

Seven Conditions and Standards: Modularity Standard		
Level 1	BA	The SMA does not use a Business Process Management (BPM) methodology nor does it have any defined business rules.
	IA	The SMA does not use an SDLC, reusable interfaces, and has no inventory or interface details documented.
	TA	The SMA embeds standardized business rule definitions into core code, and has multiple interfaces using a variety of transmission modes. The SMA does not use an SDLC, reusable messages or system architecture.
Level 2	BA	The SMA adopts BPM methodology to identify primary business operations and business processes and has some standardized business rules definitions.
	IA	The SMA adopts data standards, and documents some interfaces. The SMA has an interface inventory.
	TA	The SMA converts some interfaces to open interfaces and documents and inventories them. The SMA defines agency standardized business rules definitions, but has no business rules engine.
Level 3	BA	The SMA uses BPM methodology to transform intrastate business operations into manageable business processes for re-usability and maintainability and has interstate standardized business rules definitions.
	IA	The SMA uses intrastate standardized business rule definitions separate from core programming. The SMA adopts SDLC methodology. The SMA documents and inventories open interfaces within intrastate agencies and stakeholders.
	TA	The SMA uses open interfaces and has them documented and inventoried within the intrastate agencies. The SMA develops extremely complex systems as part of a SOA with modularity methodology. The SMA uses intrastate standardized business rules definitions via business rules engine.

Seven Conditions and Standards: Modularity Standard		
Level 4	BA	The SMA uses BPM methodology to transform interstate business operations into manageable business processes for re-usability and maintainability. The SMA uses regionally standardized business rules definitions and submits them to a regional repository.
	IA	The SMA uses regionally standardized business rule definitions separate from core programming in both human and machine-readable formats. The SMA uses documented and inventoried open interfaces across state and regional agencies and stakeholders.
	TA	The SMA develops and maintains an exposed API to any regional data services hub available. The SMA develops Cloud Computing functions. The SMA uses interstate standardized business rules definitions via business rules engine.
Level 5	BA	The SMA uses BPM methodology to transform national business operations into manageable business processes for re-usability and maintainability. The SMA submits standardized business rules definitions to a HHS-designated repository.
	IA	The SMA uses nationally standardized business rule definitions submitted to the HHS design repository. The SMA uses documented and inventoried open interfaces across state, regional and national agencies and stakeholders.
	TA	The SMA interfaces with other federal or interstate state agencies' cloud services and repositories. The SMA uses national standardized business rules definitions via business rules engine.

The following table provides an assessment of compliance with the Modularity Standard for each MITA-defined architecture. Maturity levels were assigned based on the guidelines provided in the table above, and in coordination with information gathered from HSD.

Modularity Standard		
Architecture	As-Is	To-Be
Business Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ The BTC has been reviewing and mapping business processes to identify opportunities for increasing efficiency. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ HSD needs to use BPM methodology to transform interstate business operations into manageable business processes for re-usability and maintainability. ➤ Regionally standardized business rules definitions and need to be established and submitted to a regional repository.
Information Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ An interface inventory has been created. ➤ HSD has identified data standards and is beginning to implement them. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ Use of configurable business rules is a requirement of the module RFPs, so as the modules are implemented, the MITA Maturity will increase. ➤ HSD needs to document and inventory open interfaces with the intrastate and interstate stakeholders.

Modularity Standard		
Technology Architecture	Level 2	Level 4
	<ul style="list-style-type: none"> ➤ A service registry is being maintained as part of the SI module implementation. ➤ A business rules engine has been acquired and is in the process of being implemented. 	<ul style="list-style-type: none"> ➤ HSD needs to broaden sharing of open interfaces with intrastate and interstate agencies and stakeholders. ➤ HSD needs to develop cloud computing functions where appropriate. ➤ HSD needs to implement interstate, standardized business rules using the business rules engine.

6.2 MITA Condition

CMS describes the MITA Condition defined in **MITA Framework 3.0, SS-A Appendix A – Seven Standards and Conditions** as follows:

States align to and advance increasingly in MITA maturity for business, architecture, and data.

- *Conducting MITA Self Assessments*
- *Developing MITA Roadmaps*
- *Developing Concept of Operations (COO) and Business Process Models (BPM)*

The following table provides the guidelines (as defined by CMS) in assessing and evaluating each architecture for compliance with the MITA Condition.

Seven Conditions and Standards: MITA Condition		
Level 1	BA	The SMA does not align to or advance increasingly in MITA maturity for business, architecture and data.
	IA	The SMA does not align to or advance increasingly in MITA maturity for Information Architecture (IA).
	TA	The SMA does not align to or advance increasingly in MITA maturity for Technical Architecture (TA).
Level 2	BA	The SMA begins to use MITA SS-A for evaluation of it's As-Is and identification of its To-Be capabilities for Business, Information, and Technical Architectures and the Seven Conditions and Standards.
	IA	The SMA begins to use MITA SS-A for evaluation of it's As-Is and identification of its To-Be capabilities for IA.
	TA	The SMA begins to use MITA SS-A for evaluation of it's As-Is and identification of its To-Be capabilities for TA.
Level 3	BA	The SMA updates or completes its SS-A.
	IA	The SMA updates or completes its SS-A for BA and the Seven Standards and Conditions IA portion.
	TA	The SMA updates or completes its SS-A for BA and the Seven Standards and Conditions TA portion.

Seven Conditions and Standards: MITA Condition		
Level 4	BA	The SMA develops its MITA Roadmap.
	IA	The SMA develops its MITA Roadmap for IA.
	TA	The SMA develops its MITA Roadmap for TA.
Level 5	BA	The SMA updates the MITA Roadmap annually. The SMA develops a Concept of Operations and Business Process Model(s) to advance alignment with the MITA Maturity Model.
	IA	The SMA updates the MITA Roadmap for IA annually. The SMA develops a COO, Conceptual Data Model (CDM), and Logical Data Model (LDM) using Unified Modeling Language (UML).
	TA	The SMA updates the MITA Roadmap for TA annually. The SMA develops a COO and Technical Process Models using BPMN and UML.

The following table provides an assessment of compliance with the MITA Condition for each MITA-defined architecture. Maturity levels were assigned based on the guidelines provided in the table above, and in coordination with information gathered from HSD.

MITA Condition		
Architecture	As-Is	To-Be
Business Architecture	Level 4 ➤ The Roadmap has been developed and updated, and is being updated again as part of this 2019 MITA SS-A Update.	Level 4 ➤ HSD needs to continue to complete an SS-A annually.
Information Architecture	Level 4 ➤ The Roadmap has been developed and updated, and is being updated again as part of this 2019 MITA SS-A Update.	Level 4 ➤ HSD needs to continue to complete an SS-A annually.
Technology Architecture	Level 4 ➤ The Roadmap has been developed and updated, and is being updated again as part of this 2019 MITA SS-A Update.	Level 4 ➤ HSD needs to continue to complete an SS-A annually.

6.3 Industry Standards Condition

CMS describes the Industry Standards Condition defined in **MITA Framework 3.0, SS-A Appendix A – Seven Standards and Conditions** as follows:

Ensures alignment with, and incorporation of, industry standards: the Health Insurance Portability and Accountability Act of 1996 (HIPAA) security, privacy and transaction standards; accessibility standards established under section 508 of the Rehabilitation Act, or standards that provide greater accessibility for individuals with disabilities, and compliance with Federal Civil Rights laws; standards adopted by the Secretary under section 1104 of the Affordable Care Act; and standards and protocols adopted by the Secretary under section 1561 of the Affordable Care Act. Activity includes the following:

- *Identification of industry standards*
- *Incorporation of industry standards in requirements, development, and testing phases*

The following table provides the guidelines (as defined by CMS) in assessing and evaluating each architecture for compliance with the Industry Standards Condition.

Seven Conditions and Standards: Industry Standards		
Level 1	BA	The SMA focuses on meeting compliance thresholds for state and federal regulations using state-specific standards.
	IA	The SMA focuses on meeting compliance thresholds for state and federal regulations using state-specific data standards.
	TA	The SMA focuses on meeting compliance thresholds for state and federal regulations using state-specific technology standards.
Level 2	BA	The SMA applies a mixture of federal and state-specific standards to meet regulations within the SMA. The SMA incorporates industry standards in requirements, development, and testing phases of projects.
	IA	The SMA applies a mixture of HIPAA and state-specific data standards.
	TA	The SMA applies a mixture of HIPAA and state-specific messaging and technology standards.
Level 3	BA	The SMA uses MITA Framework, industry standards, and other nationally recognized standards for business analysis within intrastate agencies. The SMA incorporates industry standards in business modeling techniques (e.g., UML and BPMN).
	IA	The SMA uses MITA Framework, industry standards, and other nationally recognized standards for intrastate exchange of information within the intrastate agencies and stakeholders. The SMA incorporates industry standards such as Section 508(c) compliance for all interfaces in requirements, development, and testing phases. The SMA incorporates industry standards in data modeling techniques (e.g., UML).
	TA	The SMA uses MITA Framework, industry standards, and other nationally recognized messaging and technology standards within the intrastate agencies and stakeholders. The SMA incorporates industry standards such as Section 508(c) of the SDLC for software and interfaces in technical modeling techniques (e.g., UML or BPMN).

Seven Conditions and Standards: Industry Standards		
Level 4	BA	The SMA uses MITA Framework, industry standards, and other nationally recognized standards for business analysis of health care and clinical information across state and interstate agencies.
	IA	The SMA uses MITA Framework, industry standards, and other nationally recognized standards for interstate exchange of health care and clinical information across state and regional agencies and stakeholders. The SMA complies with Affordable Care Act Section 1104 Administrative Simplification, and Section 1561 Health IT Enrollment Standards and Protocols.
	TA	The SMA uses MITA Framework, industry standards, and other nationally recognized technology standards for interstate exchange of healthcare and clinical information across state and regional agencies and stakeholders. The SMA complies with Affordable Care Act Section 1104 Administrative Simplification, and Section 1561 Health IT Enrollment Standards and Protocols.
Level 5	BA	The SMA uses MITA Framework, industry standards, and other nationally recognized standards for national business analysis.
	IA	The SMA uses MITA Framework, industry standards, and other nationally recognized standards for national exchange of health care information.
	TA	The SMA uses MITA Framework, industry standards, and other nationally recognized technology standards and guidelines (e.g., National Information Exchange Model (NIEM)) for national exchange of healthcare information.

The following table provides an assessment of compliance with the Industry Standards Condition for each MITA-defined architecture. Maturity levels were assigned based on the guidelines provided in the table above, and in coordination with information gathered from HSD.

Industry Standards Condition		
Architecture	As-Is	To-Be
Business Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ HSD applies a mix of state-specific and industry standards to meet regulations. ➤ HSD incorporates industry standards in requirements, development, and testing phases of projects. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ HSD needs to continue to leverage the MITA Framework, industry standards, and other nationally recognized standards for shared business services, exchange of clinical information, and other health care information across the intrastate and interstate.
Information Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ HSD is adopting five standards related to information architecture. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ HSD needs to incorporate these standards into information exchanges with intrastate and interstate stakeholders.

Industry Standards Condition		
Technology Architecture	Level 2	Level 4
	<ul style="list-style-type: none"> ➤ The establishment of messaging standards and the assurance that all modules can and do communicate using these standards are being accomplished through the implementation of the SI module. 	<ul style="list-style-type: none"> ➤ HSD needs to incorporate these standards, MITA Framework, and other nationally recognized technology standards into information exchanges with intrastate and interstate stakeholders. ➤ HSD needs to verify compliance with Affordable Care Act Section 1104 Administrative Simplification, and Section 1561 Health IT Enrollment Standards and Protocols, develop interoperable and secure standards and protocols that facilitate electronic enrollment of individuals in Federal and State health and human services.

6.4 Leverage Condition

CMS describes the Leverage Condition defined in **MITA Framework 3.0, SS-A Appendix A – Seven Standards and Conditions** as follows:

State solutions should promote sharing, leverage, and reuse of Medicaid technologies and systems within and among States. Activity includes the following:

- *Multi-state efforts*
- *Availability for reuse*
- *Identification of open source, cloud-based, and commercial products*
- *Customization*
- *Transition and retirement plans*

The following table provides the guidelines (as defined by CMS) in assessing and evaluating each architecture for compliance with the Leverage Condition.

Seven Conditions and Standards: Leverage Condition		
Level 1	BA	Very little collaboration occurs with other agencies to leverage or reuse business processes. The SMA has no system transition or retirement plans.
	IA	Very little collaboration occurs with other agencies and entities to leverage or reuse data standards or information. The SMA has no system transition or retirement plans.
	TA	Very little collaboration occurs with other agencies and entities to leverage or reuse messages and technical solutions. The SMA has not adopted a SOA from public, commercial modules or cloud technologies. The SMA has no system transition or retirement plans.

Seven Conditions and Standards: Leverage Condition		
Level 2	BA	The SMA identifies existing agency solutions for its business processes and identifies duplicative business processes.
	IA	The SMA identifies and demonstrates consideration of existing agency data management and standardization solutions. The SMA identifies existing duplicative information components within the agency.
	TA	The SMA collaborates with within its agency to identify message, technical components, and technology solutions with high applicability for reuse. The SMA identifies existing duplicative system components within the agency. The SMA has adopted SOA. The SMA identifies the type of system plan, and development, enhancement and implementation.
Level 3	BA	The SMA works collaboratively with intrastate agencies and entities to promote and leverage the reuse of Medicaid business processes within the state.
	IA	The SMA collaborates and identifies existing intrastate data management and standardization of data solutions. The SMA identifies existing intrastate duplicative system and technical components.
	TA	The SMA collaborates and identifies existing intrastate message, technical components, and technology solutions, before embarking on ground-up custom development. The SMA identifies existing duplicative system components within the state. The SMA minimizes ground-up or customized solutions. The SMA implements its system transition plan that includes cost-allocation information across the intrastate.
Level 4	BA	The SMA shares its reusable business process components with other states.
	IA	The SMA collaborates with other interstate agencies and entities and identifies data management and data standards. The SMA identifies existing `interstate duplicative information capabilities. The SMA identifies a system retirement plan.
	TA	The SMA collaborates with other interstate agencies and entities and identifies message, technical components, and technology solutions. The SMA pursues a cloud-first strategy for systems development. The SMA identifies existing regional agency duplicative system components.
Level 5	BA	The SMA shares its reusable business process components with other stakeholders, state and federal agencies nationally.
	IA	The SMA collaborates with other state, regional and national agencies and entities and identifies national data management and data standards. The SMA identifies existing state, regional or national duplicative information. The SMA adopts nationally standardized system transition and retirement plans.
	TA	The SMA collaborates with other state, regional and national agencies and entities and identifies national message standards, technical components, and technology solutions. The SMA identifies existing national duplicative systems, technical components, and technology. The SMA adopts nationally standardized system transition and retirement plans.

The following table provides an assessment of compliance with the Leverage Condition for each MITA-defined architecture. Maturity levels were assigned based on the guidelines provided in the table above, and in coordination with information gathered from HSD.

Leverage Condition		
Architecture	As-Is	To-Be
Business Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ HSD is in the process of identifying existing business processes and conducting business process redesign efforts to increase efficiencies and eliminate redundancy 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ HSD is in the process of implementing a set of modules to modernize all aspects of their Medicaid Enterprise. Once implemented, they need to work with both intrastate and interstate stakeholders to share technologies, services, standards, and processes.
Information Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ HSD has broken up the MMIS into six modules and is in the process of acquiring or implementing these six modules. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ The enterprise data models under development can be used to identify duplicative information components. ➤ HSD needs to expand the scope of the data standards and the identification of duplicative information components to include intrastate and interstate stakeholders. ➤ HSD needs to identify a system retirement plan.
Technology Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ HSD has broken up the MMIS into six modules and is in the process of acquiring or implementing these six modules. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ HSD needs to share and collaborate with other intrastate and interstate stakeholders to identify technical components and technology solutions, allowing for increased efficiency. ➤ HSD needs to adopt a cloud first strategy for systems development.

6.5 Business Results Condition

CMS describes the Business Results Condition defined in **MITA Framework 3.0, SS-A Appendix A – Seven Standards and Conditions** as follows:

Systems should support accurate and timely processing of claims (including claims of eligibility), adjudications, and effective communications with providers, beneficiaries, and the public. Activity includes the following:

- Degree of automation
- Customer Service
- Performance standards and testing

The following table provides the guidelines (as defined by CMS) in assessing and evaluating each architecture for compliance with the Business Results Condition.

Seven Conditions and Standards: Business Results Condition		
Level 1	BA	The SMA business processes are predominantly manual. The SMA does not communicate effectively with the beneficiaries or providers. Account access is manual. The SMA does not have SLA or KPI
	IA	The SMA does not have SLA or KPI for data standards.
	TA	The SMA does not have SLA or KPI for system performance.
Level 2	BA	The SMA supports accurate and timely processing of health care and eligibility claims via automated business processes and account access management. The SMA communicates more effectively with the providers, beneficiaries, and the public.
	IA	The SMA establishes SLA and some KPI for collection and monitoring of data standards.
	TA	The SMA establishes SLA and some KPI for collection and monitoring of system performance.
Level 3	BA	Highly automated business processes support accurate and timely processing of health care and eligibility claims. The SMA documents customer service using web and account self-management functionality. The SMA accommodates customer preferences for communications by email, text, mobile devices, or phones. The SMA identifies state SLA and KPI for automated business processes.
	IA	The SMA uses information and data standards for automating messages in the highly automated processing of health care and eligibility claims. The SMA identifies information performance standards within state.
	TA	The SMA uses automated services and messages in the highly automated processing of health care and eligibility claims. The SMA adopts system performance standards within state.

Seven Conditions and Standards: Business Results Condition		
Level 4	BA	The SMA automates processing of health care and eligibility claims to the fullest extent possible. The SMA monitors and adjusts business processes for optimum performance using state, regional, and CMS-defined KPI and shares performance measures with other state and regional agencies and stakeholders. The SMA shares its processes for identifying errors with other state and regional agencies and stakeholders.
	IA	The SMA uses information and data standards for automated messages in the highly automated processing of healthcare and eligibility claims across the interstate. The SMA increases the use of state, regional, and any CMS-defined information performance standards.
	TA	The SMA uses automated services and messages in the highly automated processing of health care and eligibility claims across the interstate. The SMA adopts interstate system performance standards.
Level 5	BA	The SMA monitors and adjusts business processes for optimum performance using nationally defined KPI and shares performance measures across the nation. The SMA evaluates operational business processes against established national SLA and KPI. The SMA creates and executes a POAM for SLA and KPI resolution.
	IA	The SMA uses national information and data standards for automated messages in the highly automated processing of healthcare and eligibility claims across the nation. The SMA adopts national performance standards. The SMA creates and executes a POAM for SLA and KPI resolution.
	TA	The SMA uses nationally defined automated services and messages in the highly automated processing of health care and eligibility claims across the nation. The SMA adopts national system performance standards. The SMA creates and executes a POAM for SLA and KPI resolution.

The following table provides an assessment of compliance with the Business Results Condition for each MITA-defined architecture. Maturity levels were assigned based on the guidelines provided in the table above, and in coordination with information gathered from HSD.

Business Results Condition		
Architecture	As-Is	To-Be
Business Architecture	<p>Level 2</p> <ul style="list-style-type: none"> HSD utilizes automated business processes and account access management for processing of health care claims, eligibility determination, and communication with provider, members, and the public. 	<p>Level 4</p> <ul style="list-style-type: none"> HSD is in the process of implementing a set of modules to modernize all aspects of their Medicaid Enterprise. Once implemented, they need to collaborate with intrastate and interstate stakeholders to optimize performance, process best practices, and utilize CMS-defined performance measures.

Business Results Condition		
Information Architecture	Level 1 <ul style="list-style-type: none"> ➤ There are no SLAs or KPIs for data standards. ➤ RFPs for the MMISR modules indicate that HSD and the module vendors will work together to create a performance standards dashboard. 	Level 4 <ul style="list-style-type: none"> ➤ HSD needs to establish SLAs and KPIs for the collection and monitoring of data standards. ➤ Information and data standards need to be used for automating messages in the highly automated processing of health care and eligibility claims. ➤ Information and data standards need to be used within the state and the region.
	Technology Architecture <ul style="list-style-type: none"> ➤ There are no SLAs or KPIs for the collection and monitoring of system performance. ➤ RFPs for the MMISR modules indicate that HSD and the module vendors will work together to create a performance standards dashboard. 	Level 4 <ul style="list-style-type: none"> ➤ HSD needs to establish SLAs and KPIs for the collection and monitoring of system performance. ➤ Automated services and messages need to be used in the highly automated processing of health care and eligibility claims. ➤ System performance standards need to be used within the state and the region.

6.6 Reporting Condition

CMS describes the Reporting Condition defined in **MITA Framework 3.0, SS-A Appendix A – Seven Standards and Conditions** as follows:

Solutions should produce transaction data, reports, and performance information that contributes to program evaluation, continuous improvement in business operations, transparency, and accountability. Activity includes the following:

- *Accurate data*
- *Interfaces with designated federal repositories or hubs*
- *Automatic generation of reports*
- *Audit trails*

The following table provides the guidelines (as defined by CMS) in assessing and evaluating each architecture for compliance with the Reporting Condition.

Seven Conditions and Standards: Reporting Condition		
Level 1	BA	The SMA does not conduct program evaluations, or continuous improvement in business operations.
	IA	The SMA has very little transaction data, reports, or performance information available for program management.
	TA	The SMA produces very little message data, services, or performance information.

Seven Conditions and Standards: Reporting Condition		
Level 2	BA	The SMA begins to produce reports to conduct program evaluations and continuous improvement in business operations. The SMA has some processes for identifying and correcting adjudication errors.
	IA	The SMA produces HIPAA-compliant transaction data, some reports, and some performance information. The SMA has some information for identifying and correcting adjudication errors.
	TA	The SMA generates services to produce reports through open messages within the agency.
Level 3	BA	The SMA solutions produce transaction data, reports, and performance information that contribute to program evaluation, continuous improvement in business operations, and transparency and accountability. The SMA provides eligibility decision logic to the public. The SMA produces decision audit trails.
	IA	The SMA has intrastate transaction data and reports with performance information available for program management. The SMA provides eligibility data to the public for intrastate agencies. The SMA produces audit trails for information within the system and shares it within the state.
	TA	The SMA uses services that automatically generate reports through open interface messages, to designated intrastate agencies and entities repositories or data hubs, with appropriate audit trails.
Level 4	BA	The SMA conducts program evaluations and continuous improvement in business operations and provides it to other agencies and stakeholders within the region.
	IA	The SMA has transaction data and reports with performance information available for program management and provides it to other agencies and stakeholders within the region. The SMA provides eligibility data to the public for interstate agencies and stakeholders. The SMA produces audit trails for information within the system and shares it with state and regional agencies and stakeholders.
	TA	The SMA uses services that automatically generate reports through open interface messages to designated interstate agencies and entities, repositories or data hubs, with appropriate audit trails.
Level 5	BA	The SMA conducts program evaluations and continuous improvement in business operations and provides it to state, regional and national agencies and stakeholders.
	IA	The SMA has transaction data and reports with performance information available for program management and provides it to state, regional, and national agencies and stakeholders. The SMA provides eligibility data to the public across state, regional and national agencies and stakeholders. The SMA produces audit trails for information within the system and shares it with state, regional and national agencies and stakeholders.
	TA	The SMA uses automatic services to generate reports through open interface messages to designated federal repositories or data hubs, with appropriate audit trails.

The following table provides an assessment of compliance with the Reporting Condition for each MITA-defined architecture. Maturity levels were assigned based on the guidelines provided in the table above, and in coordination with information gathered from HSD.

Reporting Condition		
Architecture	As-Is	To-Be
Business Architecture	<p>Level 2</p> <ul style="list-style-type: none"> HSD leverages a fiscal agent to produce reports and conduct program evaluation. The BTC business process redesign is underway helping to evaluate and improve on business operations. HSD has a process in place for identifying and correcting adjudication errors (e.g., Mass Adjustments). 	<p>Level 4</p> <ul style="list-style-type: none"> HSD is in the process of implementing a set of modules to modernize all aspects of their Medicaid Enterprise. Once implemented, they need to establish and share business process best practices and lessons learned, including program evaluation results across the intrastate and interstate.
Information Architecture	<p>Level 2</p> <ul style="list-style-type: none"> The DS module implementation produces these types of reports. 	<p>Level 4</p> <ul style="list-style-type: none"> The reports need to be expanded to encompass intrastate and interstate stakeholders.
Technology Architecture	<p>Level 2</p> <ul style="list-style-type: none"> The infrastructure established by the SI module allows the reports generated by the DS module to be distributed within the agency. 	<p>Level 4</p> <ul style="list-style-type: none"> The services used need to be expanded to encompass intrastate and interstate stakeholders, with appropriate audit trails reflecting the delivery transaction.

6.7 Interoperability Condition

CMS describes the Interoperability Condition defined in **MITA Framework 3.0, SS-A Appendix A – Seven Standards and Conditions** as follows:

Systems must ensure seamless coordination and integration with the Exchanges (whether run by the state or federal government), and allow interoperability with health information exchanges, public health agencies, human services programs, and community organizations providing outreach and enrollment assistance services. Activity includes the following:

- *Interactions with the Exchange*
- *Interactions with other entities*

The following table provides the guidelines (as defined by CMS) in assessing and evaluating each architecture for compliance with the Interoperability Condition.

Seven Conditions and Standards: Interoperability Condition		
Level 1	BA	There is no coordination with the Exchange, or Health Information Exchanges (HIE), or any other agencies to allow interoperability with other agencies.
	IA	The SMA uses state-specific data standards and is not coordinating with the Exchange, Health Information Exchanges (HIE), or any other agencies to allow interoperability with other agencies.

Seven Conditions and Standards: Interoperability Condition		
	TA	The SMA uses state-specific messages and technology standards and is not coordinating with the Exchange, Health Information Exchanges (HIE), or any other agencies to allow interoperability with other agencies.
Level 2	BA	The SMA identifies areas where it interacts with the Exchange, or Health Information Exchanges (HIE), or any other agencies to allow interoperability.
	IA	The SMA identifies information and data standards for interaction with the Exchange, or Health Information Exchanges (HIE), or any other agencies to allow interoperability. The SMA begins to convert to national data standards, such as HIPAA transactions, International Classification of Diseases 10th Edition (ICD-10) and Healthcare Common Procedure Coding System (HCPCS).
	TA	The SMA identifies messages and technology standards for interaction with the Exchange, or Health Information Exchanges (HIE), or any other agencies to allow interoperability.
Level 3	BA	The SMA implements seamless coordination and integration with the Exchange, and allows interoperability with exchanges, public health agencies, human services programs, and community organizations providing outreach and enrollment assistance services within the intrastate agencies. The SMA works with community service organizations in assisting health care coverage applicants with the completion and electronic submission of forms.
	IA	The SMA adopts MITA Framework, industry standards, and other nationally recognized standards and information for interaction with the Exchange, or state Health Information Exchanges (HIE), or any other state agencies to allow intrastate agency interoperability.
	TA	The SMA adopts MITA Framework, industry standards, and other nationally recognized messaging and technology standards for interaction with the Exchange, or state Health Information Exchanges (HIE), or any other state agencies to allow intrastate agency interoperability.
Level 4	BA	The SMA implements seamless coordination and integration with the Exchange, public health agencies, human services programs, and community organizations providing outreach and enrollment assistance services across interstate agencies.
	IA	The SMA adopts MITA Framework, industry standards, and other nationally recognized standards and information with the Exchange, or regional Health Information Exchanges (HIE), or any other regional agencies to allow interstate agency interoperability.
	TA	The SMA adopts MITA Framework, industry standards, and other nationally recognized messaging and technology standards with the Exchange, or regional Health Information Exchanges (HIE), or any other regional agencies to allow interstate agency interoperability.
Level 5	BA	The SMA implements seamless interoperability with all state, regional, and federal agency exchange services and hubs.
	IA	The SMA adopts MITA Framework, industry standards, and other nationally recognized standards and information for interaction with the Exchange, or state, regional, and national Health Information Exchanges (HIE), or any other state, regional, or national agencies to allow national interoperability.
	TA	The SMA adopts MITA Framework, industry standards, and other nationally recognized messaging and technology standards for interaction with the Exchange, or state, regional, and national Health Information Exchanges (HIE), or any other state, regional, or national agencies to allow national interoperability.

The following table provides an assessment of compliance with the Interoperability Condition for each MITA-defined architecture. Maturity levels were assigned based on the guidelines provided in the table above, and in coordination with information gathered from HSD.

Interoperability Condition		
Architecture	As-Is	To-Be
Business Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ New Mexico Health Information Collaborative (NMHIC) provides a statewide Health Information Exchange (HIE) that allows authorized healthcare professionals to quickly access the patient's history in one centralized record. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ HSD needs to ensure that there is seamless coordination and integration with state and federal exchanges, and allow for intrastate and interstate exchange of member information.
Information Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ HSD has identified five information and data standards to be used. Implementation of the six MMIS modules requires the use of these standards as applicable to establish interoperability. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ HSD needs to implement the identified information and data standards to allow interoperability with intrastate and interstate stakeholders.
Technology Architecture	<p>Level 2</p> <ul style="list-style-type: none"> ➤ The NM HHS 2020 MITA Technical Strategy lists numerous enterprise and technical standards to be used across the Medicaid Enterprise. These standards are required to be used as applicable during the implementation of the six modules that make up the MMISR project. 	<p>Level 4</p> <ul style="list-style-type: none"> ➤ HSD needs to implement the identified enterprise and technical standards to allow interoperability with intrastate and interstate stakeholders.

APPENDIX A – MITA MATURITY PROFILES

The following tables are the updated MITA Maturity Profiles that are to be included as part of the MITA SS-A update package to CMS. MITA Maturity Profiles demonstrate the assess MITA maturity at the business area level. The following sub-sections contain the MITA Maturity Profile for each of the three architectures, as well as the CMS Seven Conditions and Standards.

Business Architecture: MITA Maturity Profiles

Business Architecture Profile – Business Relationship Management					
Business Process	Level 1	Level 2	Level 3	Level 4	Level 5
Establish Business Relationship		As-Is		To-Be	
Manage Business Relationship Communication		As-Is		To-Be	
Manage Business Relationship Information		As-Is		To-Be	
Terminate Business Relationship		As-Is		To-Be	
Business Architecture Profile – Care Management					
Business Process	Level 1	Level 2	Level 3	Level 4	Level 5
Establish Case		As-Is		To-Be	
Manage Case Information		As-Is		To-Be	
Manage Population Health Outreach		As-Is		To-Be	
Manage Registry		As-Is		To-Be	
Perform Screening and Assessment		As-Is		To-Be	
Manage Treatment Plan and Outcomes		As-Is		To-Be	
Authorize Referral	As-Is			To-Be	
Authorize Service		As-Is		To-Be	
Authorize Treatment Plan		As-Is		To-Be	
Business Architecture Profile – Contractor Management					
Business Process	Level 1	Level 2	Level 3	Level 4	Level 5
Manage Contractor Information		As-Is		To-Be	
Manage Contractor Communication		As-Is		To-Be	
Perform Contractor Outreach		As-Is		To-Be	
Inquire Contractor Information		As-Is		To-Be	
Produce Solicitation		As-Is		To-Be	
Award Contract		As-Is		To-Be	
Manage Contract		As-Is		To-Be	
Close Out Contract		As-Is		To-Be	
Manage Contractor Grievance and Appeal		As-Is		To-Be	

Business Architecture Profile – Eligibility and Enrollment Management					
<i>Business Process</i>	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Level 4</i>	<i>Level 5</i>
Determine Member Eligibility		As-Is		To-Be	
Enroll Member		As-Is		To-Be	
Disenroll Member		As-Is		To-Be	
Inquire Member Eligibility		As-Is		To-Be	
Determine Provider Eligibility		As-Is		To-Be	
Enroll Provider		As-Is		To-Be	
Disenroll Provider		As-Is		To-Be	
Inquire Provider Information		As-Is		To-Be	
Business Architecture Profile – Financial Management					
<i>Business Process</i>	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Level 4</i>	<i>Level 5</i>
Manage Provider Recoupment		As-Is		To-Be	
Manage TPL Recovery		As-Is		To-Be	
Manage Estate Recovery		As-Is		To-Be	
Manage Drug Rebate		As-Is		To-Be	
Manage Cost Settlement		As-Is		To-Be	
Manage Accounts Receivable Information		As-Is		To-Be	
Manage Accounts Receivable Funds		As-Is		To-Be	
Prepare Member Premium Invoice					
Manage Contractor Payment		As-Is		To-Be	
Manage Member Financial Participation		As-Is		To-Be	
Manage Capitation Payment		As-Is		To-Be	
Manage Incentive Payment		As-Is		To-Be	
Manage Accounts Payable Information		As-Is		To-Be	
Manage Accounts Payable Disbursement		As-Is		To-Be	
Manage 1099		As-Is		To-Be	
Formulate Budget		As-Is		To-Be	
Manage Budget Information		As-Is		To-Be	
Manage Fund		As-Is		To-Be	
Generate Financial Report		As-Is		To-Be	
Business Architecture Profile – Member Management					
<i>Business Process</i>	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Level 4</i>	<i>Level 5</i>
Manage Member Information		As-Is		To-Be	
Manage Applicant and Member Communication		As-Is		To-Be	
Perform Population and Member Outreach		As-Is		To-Be	
Manage Member Grievance and Appeal		As-Is		To-Be	

Business Architecture Profile – Operations Management					
<i>Business Process</i>	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Level 4</i>	<i>Level 5</i>
Submit Electronic Attachment		As-Is		To-Be	
Apply Mass Adjustment	As-Is			To-Be	
Process Claims		As-Is		To-Be	
Generate Remittance Advice		As-Is		To-Be	
Inquire Payment Status		As-Is		To-Be	
Calculate Spend-Down Amount					
Prepare Provider Payment		As-Is		To-Be	
Manage Data		As-Is		To-Be	
Process Encounters		As-Is		To-Be	
Business Architecture Profile – Performance Management					
<i>Business Process</i>	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Level 4</i>	<i>Level 5</i>
Identify Utilization Anomalies		As-Is		To-Be	
Establish Compliance Incident		As-Is		To-Be	
Manage Compliance Incident Information		As-Is		To-Be	
Determine Adverse Action Incident		As-Is		To-Be	
Prepare REOMB	As-Is			To-Be	
Business Architecture Profile – Plan Management					
<i>Business Process</i>	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Level 4</i>	<i>Level 5</i>
Develop Agency Goals and Objectives		As-Is		To-Be	
Maintain Program Policy		As-Is		To-Be	
Maintain State Plan	As-Is			To-Be	
Manage Health Plan Information		As-Is		To-Be	
Manage Performance Measures		As-Is		To-Be	
Manage Health Benefit Information		As-Is		To-Be	
Manage Reference Information		As-Is		To-Be	
Manage Rate Setting		As-Is		To-Be	
Business Architecture Profile – Provider Management					
<i>Business Process</i>	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Level 4</i>	<i>Level 5</i>
Manage Provider Information		As-Is		To-Be	
Manage Provider Communication		As-Is		To-Be	
Perform Provider Outreach		As-Is		To-Be	
Manage Provider Grievance and Appeal		As-Is		To-Be	
Terminate Provider		As-Is		To-Be	

Information Architecture: MITA Maturity Profiles

Information Architecture Profile					
Business Area	Level 1	Level 2	Level 3	Level 4	Level 5
Business Relationship Management		As-Is		To-Be	
Care Management		As-Is		To-Be	
Contractor Management		As-Is		To-Be	
Eligibility and Enrollment Management		As-Is		To-Be	
Financial Management		As-Is		To-Be	
Member Management		As-Is		To-Be	
Operations Management		As-Is		To-Be	
Performance Management		As-Is		To-Be	
Plan Management		As-Is		To-Be	
Provider Management		As-Is		To-Be	

Technical Architecture: MITA Maturity Profiles

Technical Architecture Profile					
Business Area	Level 1	Level 2	Level 3	Level 4	Level 5
Business Relationship Management	As-Is			To-Be	
Care Management	As-Is			To-Be	
Contractor Management	As-Is			To-Be	
Eligibility and Enrollment Management		As-Is		To-Be	
Financial Management	As-Is			To-Be	
Member Management	As-Is			To-Be	
Operations Management	As-Is			To-Be	
Performance Management	As-Is			To-Be	
Plan Management	As-Is			To-Be	

Seven Conditions and Standards: MITA Maturity Profiles

Seven Conditions and Standards Scorecard		
MITA Business Area	As-Is Level of Business Capability	To-Be Level of Business Capability
Modularity Standard		
Business Architecture	Level 2	Level 4
Information Architecture	Level 2	Level 4
Technical Architecture	Level 2	Level 4
MITA Condition		
Business Architecture	Level 4	Level 4
Information Architecture	Level 4	Level 4
Technical Architecture	Level 4	Level 4
Industry Standards Condition		
Business Architecture	Level 2	Level 4
Information Architecture	Level 2	Level 4
Technical Architecture	Level 2	Level 4
Leverage Condition		
Business Architecture	Level 2	Level 4
Information Architecture	Level 2	Level 4
Technical Architecture	Level 2	Level 4
Business Results Condition		
Business Architecture	Level 2	Level 4
Information Architecture	Level 1	Level 4
Technical Architecture	Level 1	Level 4
Reporting Condition		
Business Architecture	Level 2	Level 4
Information Architecture	Level 2	Level 4
Technical Architecture	Level 2	Level 4
Interoperability Condition		
Business Architecture	Level 2	Level 4
Information Architecture	Level 2	Level 4
Technical Architecture	Level 2	Level 4

APPENDIX B – SS-A UPDATE INPUTS

The following is a list of inputs leveraged in order to complete the 2019 New Mexico Human Services Department MITA 3.0 SS-A update.

Request for Proposals

- **HHS2020 Medicaid Enterprise Benefit Management Services RFP**
- **HHS2020 MMIS Financial Services RFP**
 - ✓ RFP Q&A
- **HHS 2020 Consolidated Customer Service Center RFP**
 - ✓ RFP Q&A
 - ✓ RFP Amendment 1
 - ✓ RFP Amendment 2
 - ✓ RFP Amendment 3
 - ✓ RFP Amendment 4
- **HHS 2020 Medicaid Enterprise Quality Assurance RFP**
 - ✓ RFP Q&A Part 1
 - ✓ RFP Q&A Part 2
 - ✓ RFP Amendment 1
 - ✓ RFP Amendment 2
- **HHS 2020 Medicaid Enterprise Data Services RFP**
 - ✓ RFP Q&A
 - ✓ RFP Amendment 1
 - ✓ DS Awarded Contract
- **HHS 2020 - Medicaid Enterprise Management Information System RFP**
 - ✓ RFP Amendment 1
 - ✓ RFP Amendment 2
 - ✓ SI Awarded Contract + Amendments/Extensions

HSD Project Artifacts

- | | |
|--|--|
| <ul style="list-style-type: none"> ➤ ASPEN Amendment Information re Eligibility.docx ➤ Business Rules Capitation.pdf ➤ Care Coordination Resources 05-2019 MemberMgmt.docx ➤ HHS 2020 Service Matrix 20190724 - CSG IVV.xlsx ➤ Member Handbook NM.pdf ➤ NM Managed Care Policy Manual_FINAL.pdf ➤ 2015 SS-A GapAnalysis_CSG.pdf | <ul style="list-style-type: none"> ➤ Staff Small Purchase Contract Management As Is Process Map.docx ➤ SIPLT1 - System Design Document Draft Part 1 - FOR ARB.docx ➤ SIPLT1 - System Design Document Draft Part 2 - FOR ARB.docx ➤ NM HHS 2020 MITA Technical Strategy v0.1.pdf ➤ NM HHS 2020 Reference Architecture v0.8 – VV WIP.docx |
|--|--|

- 2015 SS-A Package
- Scorecards (BA, IA, TA, 7C&S)
- Gaps (BA,IA,TA,7C&S)
- 2017 SS-A Roadmap Update.docx
- NM MITA SS-A Report (6-30-15).docx
- Centennial Care 2.0 LHHS Presentation_9.20.17.pdf
- ConOps v11_final.docx
- Program Evaluation - Status of the MMISR 05-2019.pdf
- The MMIS Replacement Project Overview 2017.pdf
- BTC Charter_v11.docx
- Journey 1 Staff Track Deep Dive.xlsx
- MITA Mapping.xlsx
- Client Benefit Management and Care Coordination As Is Process Map.xlsx
- External Partners MAD Forms As-Is Deep Dive.xlsx
- MCO As-Is Deep Dive.pptx
- Provider As-Is Deep Dive.xlsx
- Staff J2 As-Is Deep Dive.docx
- SI Weekly Status Reports
- ASPEN Integration Meeting Minutes_2018-09-27.docx
- MarkLogic SMR Review Phase I.docx
- HHS 2020 Connection Guide 010719 draft.docx
- Data Governance Council Charter
- DS Weekly Status Reports
- UPI-Internal Portal Weekly Status Reports
- NM HHS2020 MITA Technical Management Strategy
- Security3: Security Design Plan Draft Turning Point Configuration v0.2 April, 2019
- Implementation Advance Planning Document Update (IAPDU) March 31, 2017
- Quality Review Checklist – Implementation Advance Planning Document (IAPD) May 16, 2019
- BTC Planning Meeting 2019-03-29
- NM MMISR System Integrator (SI) PM021 Implementation Plan Kickoff Meeting June, 2019
- The MMIS Replacement Project – Update December, 2018

Reference Materials

- CMS MITA 3.0 SS-A Framework
 - ✓ Business, Information, Technical and Seven Conditions and Standards Capability Matrices
- CMS MITA 3.0 SS-A Companion Guide
- NM MITA SS-A SOW.docx