MMIS to MES Modernization: A Journey In Case Management
Agenda

- Speaker Introduction
- Challenges
- Defining System Requirements
- Development Methodologies
- Funding Considerations
- Solution
- Q&A
Introduction
Ted Jones
Vice President, Medecision

• 25+ years experience working with Medicaid programs
• Deep understanding of complex systems-based modern technology
• Leading transitions from legacy systems to more efficient solutions
• Directed claims processing department of 150+ million claims annually
• Served as Deputy Account Manager for the DDI and Startup of a State Medicaid Program
Who Is Medecision?

+$300M INVESTED IN AERIAL™

+50M COVERED LIVES

85 TOP HEALTH PLANS & PROVIDERS

+100K USERS

+250 LIBERATORS

+30 YEARS IN BUSINESS

Covered Lives Range

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The Challenge
The Situation

- Large State Medicaid program
- Legacy system could not effectively assess and track their LTSS population
- System challenges resulting in wasted time, inefficiencies, frustration
- Identified the need to modernize systems and streamline assessments
Requirements:
That’s not what I wanted
Requirements Stakeholders

Requirements Are Not Just For BAs

- Customer
- Business Analyst
- Technical Developer
- Customer

What the user asked for
How the analyst saw it
How the system was designed
As the programmer wrote it
What the user really wanted
How it actually works
Essential Truths

Truth # 1: If you don’t get the requirements right, it doesn’t matter how well you execute the rest of the project

Truth # 2: Requirements development is a discovery and invention process, not just a collection process

Truth # 3: Change happens

Truth # 4: The interests of all the project stakeholders intersect at the requirements process

Truth # 5: Customer involvement is the most critical contributor to software quality

Truth # 6: The customer isn’t always right, but the customer always has a point

Truth # 7: The first question an analyst should ask about a proposed new requirement is, “Is this requirement in scope?”

Truth # 8: Even the best requirements cannot – and should not – replace human dialogue

Truth # 9: The requirements might be vague, but the product will be specific

Truth # 10: You’ll never have perfect requirements
Waterfall vs. Agile: Who’s Right?
Traditional Waterfall Process Visualization

1. **Requirements Analysis and Specification**
   - Verify
     - Design Review
     - Design Walkthrough
     - Formal Inspection

2. **Design and Specification**
   - Verify
     - Code Review
     - Code Walkthrough

3. **Coding and Unit Testing**
   - Verify
     - Testing Results

4. **Integration and System Testing**
   - Verify
     - Operational Environment

5. **Delivery and Maintenance**
Agile (Scrum) Visualization
Show Me the Funding
Enhanced Funding Requirements

Under 42 CFR §433.112(a) CMS can approve 90 percent (75% for licenses) enhanced federal financial participation (FFP) if the APD satisfies the requirement that states “[p]romote sharing, leverage, and reuse of Medicaid technologies and systems within and among States.”
Reuse

• An entire set of business services or systems, including shared hosting of a system or shared acquisition and management of a turnkey service

• A complete business service or a stand-alone system module

• Subcomponents:
  • code segments
  • rule bases
  • configurations
  • customizations
Paths for Achieving Reuse

• Adapt existing capabilities within the state, capabilities in use by another state, or those available from the vendor community with minimal customization

OR

• incorporate reuse into the design of new capabilities
How States can Facilitate Reuse in New Development

• Hosting software in a cloud, and making it available for other states to use
• Developing open source, license-free MES modules that are sharable with other states
• Sharing specific customizations or configurations to a commercial off-the-shelf (COTS) software product with other states
Support for Reuse

- Cooperative Purchasing
- COTS

Design Alternatives

- Software as a Service (SaaS)
- Open Source
- Proprietary Software
New Capabilities –
and what you should be thinking about in your system
Solution Overview

• State is implementing Aerial health management from Medecision to replace two Legacy systems
• Replacing paper processes
• Rural access with unstable internet
• TEFT grant qualification
• Reusability
Auto-Save
Auto-Saving

Problem
• Case managers need to the system to periodically 'auto-save' their work so they don't lose time by unexpected loss of data and forced re-entry
• Case managers need to be able to mark an assessment complete and have it date and time stamped with who completed it

Solution
• Auto-save at defined time intervals or after each question is responded to
• Visual indicator to indicate when auto-saved has occurred
• Save button remains on screen
• Cancel removes all auto-saved data from within this session
Online/Offline Sync
Mobile and Offline Use

Problem
• Care and case management workers need to be able to work in the field face-to-face with members, which sometimes requires them to work in rural areas with unstable or no internet connectivity

Solution
• Assessment and support plan data is locked for all other users
• Check-in, check-out mechanism with FIFO (first in, first out)
• Indicator on member record that data is locked which indicates the name of the user that owns the lock
Offline Workflow

Plan your Day
- Connect to the internet
- Check out participants
- Locked data

Engage the participant
- Assessments
- Support Plans
- Case Notes

Wrap up your Day
- Re-connect to the internet
- Check in participants
- Unlock and synchronize data
Skip Logic & Required Questions
Skip Logic

Problem
• The new LTSS assessments are extremely long, making it challenging to get through the assessment with some members

Solution
• Introduce skip logic to allow the case manager to jump over sections that don’t apply
  – Gender-based
  – Age-based
  – Condition-based
Required Questions

Problem
• The new LTSS assessments have some questions that must be answered while others can be omitted

Solution
• Introduce required question functionality to allow the case manager to know what questions are mandated for the assessment
• Dynamically show the question counts
• Prevent the assessment from being completed if required questions are unanswered
ADA Compliance & Printing
ADA Compliance

Problem
• Must be American with Disabilities Act compliant, accessible and understandable to the client

Solution
• Exportable PDF version of the support plan, participant assessment and assessment outputs
• Save or print
• Includes legal disclaimer to protect PHI
Printing Assessments

Problem
• Case managers need to print the assessment with all questions and responses so that they have a paper record of the data

Solution
• Printed finalized assessment, participant assessment and/or person-centered support plan in user-friendly ADA-compliant format
• Print according to the finalized assessment or participant assessment output and the support plan print out requirement
• Exportable to PDF or save to device
Time Tracking
Time Tracking

Problem
• Care and case managers need to be able to track the amount of time they spend on the support plans, and calculate billable units and costs

Solution
• Ability to manually start and stop a timer
• Ability to manually enter a time log and note
• Comprehensive view of all tracked events with cost and time summaries
Key Takeaways
Key Takeaways

• Work cross-functionally both internally and with your contractors/vendors to clearly define and validate requirements

• Understand CMS funding opportunities and reuse clause

• Identify opportunities to automate processes and replace/eliminate paper processes within your Medicaid Enterprise System

• Engage with contractors and vendors who have the right experience and are willing to partner with you
Q&A