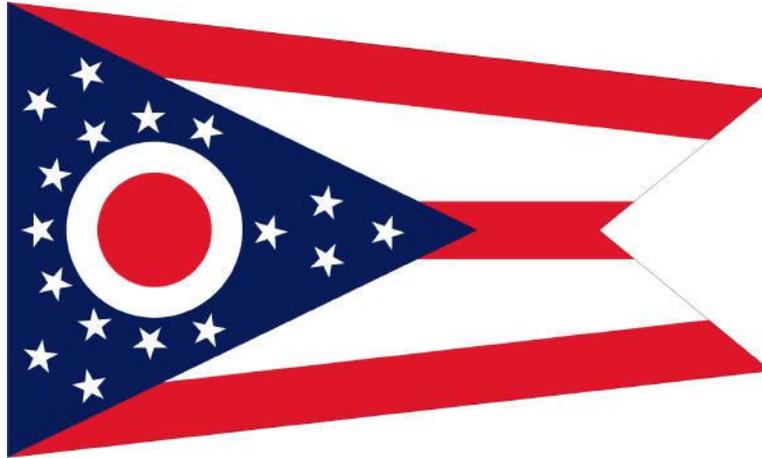


# Operating Protocol for Integrated Eligibility and Business Intelligence (IE/BI)



*Between DAS and ODM for the period of 7-1-2013 thru 6-30-2015*

**Version 12.1 – August 2013**

## Glossary

<b>DAS</b>	<b>Department of Administrative Services</b>
<b>OAKS</b>	<b>Ohio Administrative Knowledge System</b>
<b>ODM</b>	<b>Ohio Department of Medicaid</b>
<b>MCD</b>	<b>OAKS Designation for ODM</b>
<b>PPACA</b>	<b>Patient Protection and Affordable Care Act</b>
<b>MAGI</b>	<b>Modified Adjusted Gross Income</b>
<b>SNAP</b>	<b>Supplemental Nutrition Assistance Program</b>
<b>TANF</b>	<b>Temporary Assistance for Needy Families</b>
<b>QDSS</b>	<b>Quality Decision Support System</b>
<b>MITA</b>	<b>Medicaid Information Technology Architecture</b>
<b>OHT</b>	<b>Ohio Health Transformation</b>
<b>SOA</b>	<b>Service Oriented Architecture</b>
<b>IE</b>	<b>Integrated Eligibility</b>
<b>BI</b>	<b>Business Intelligence</b>
<b>HHS</b>	<b>Health &amp; Human Services</b>
<b>CRISE</b>	<b>Client Registry Information System-Enhanced</b>
<b>EAPD</b>	<b>Expedited Advanced Planning Document</b>
<b>CMS</b>	<b>Centers for Medicare and Medicaid Services</b>
<b>HPES</b>	<b>Hewlett Packard Enterprise Services</b>
<b>DDI</b>	<b>Design, Development &amp; Implementation</b>
<b>OHCDW</b>	<b>Ohio HealthCare Data Warehouse</b>

**Project: Integrated Eligibility/Business Intelligence (IE/BI) Initiative.  
Operating Protocol (OP) between the Department of Administrative  
Services (DAS) and the Department of Medicaid (ODM)**

OP Manager: Mark Vidmar, (614)752-4395, mark.vidmar@medicaid.ohio.gov

Updated: 8/8/2013

<b>PROJECT PURPOSE</b>	<b>Status</b>
Define the issue that the project will address or remedy	Completed
Identify "hot spots" that illustrate the urgency to find a solution	Completed
Define the project purpose and scope of work	Completed
Complete a preliminary workplan (using this page as a template)	Completed
Submit high-value concepts to OBM for the biennium review	Completed
<b>PROJECT MANAGEMENT</b>	
Identify the project team and augment with consultants if needed	Complete
Determine the project management structure, including table of organization	In progress
Create a detailed project workplan	In progress
Develop a workplan budget and identify the source(s) of funding	In progress
Report project status to the Program Office and HHS Cabinet	In progress
Coordinate with other project teams through the Program Office	In progress
Develop a stakeholder/media/legislative outreach plan	In progress
Identify external stakeholders and create a stakeholder advisory group	N/A
Establish a process for regular stakeholder input	N/A
Host kick-off event(s) for the project team and stakeholders	Completed
<b>BUSINESS REQUIREMENTS AND SOLUTION</b>	
Define business requirements/policy objectives	Completed
Conduct an internal scan of solutions/capabilities	Completed
Identify and report gaps in existing operations/infrastructure	Completed
Conduct an external market scan and/or request for information (RFI)	N/A
Assess the federal landscape for opportunities, including funding, and threats	Completed
Identify best practices, within the state and externally	Completed
Recommend a solution to meet business requirements/policy objectives	Completed
Identify key deliverables necessary to implement the solution	Completed
Conduct an impact analysis of expected benefits and costs of the solution	Completed
<b>DELIVERABLES</b>	
Develop an implementation budget and identify the source(s) of funding	Completed
Develop an Operating Protocol if the Project Involves Shared Resources	Completed
Draft legislative and/or administrative rule language	In progress
Recommend an appropriation strategy, if needed, for mid-biennium review	Completed
Develop a detailed stakeholder/media/legislative strategy	N/A
Recommend a procurement strategy	Completed
Develop a request for a proposal, if needed	Completed
Support the procurement process (e.g., evaluation, vendor selection)	Completed
Support the completion and approval of federal compliance activities	In progress

**Project:** IE/BI Initiative. OP between the DAS and the ODM

OP Manager: Mark Vidmar, (614)752-4395, mark.vidmar@medicaid.ohio.gov

Updated: 8/8/2013

## **PROJECT PURPOSE**

This operating protocol is entered into by the Department of Administrative Services (DAS) and the Department of Medicaid (ODM). It is for the purpose of streamlining and simplifying eligibility processes and implementing specified activities related to federal requirements by identifying the work and payment for work associated with identified activities. This Operating Protocol (OP) is effective from 7-1-2013 to 6-30-2015.

## **Opportunities**

1. Replace the existing CRISE system with the IE/BI system in a multi phased approach.
  - a. Phase 1.0 Medicaid MAGI
  - b. Phase 1.5 Non MAGI Medicaid and associated other programs
  - c. Phase 2.0 Base System
2. Contract for staff for Medicaid IT Management

## **Hot Spots**

1. A key driver of this protocol is to help the State advance toward using health information technology to improve population health. Demonstrated progress in this area is federally required under the Seven Conditions and Standards<sup>1</sup> which include the Medicaid Information Technology Architecture (MITA) framework.
2. Allow Ohio consumers of Medicaid to move to a self-service model improving their experience and streamlining their applications for assistance.
3. The complex nature of the current eligibility system has created difficulties for Consumers, County workers and State staff as they attempt to enroll consumers in the existing system. After years of use, the changes to rules and subsequent coding within the mainframe system have created a situation where change is often not possible, which has in turn caused a significant increase in manual overrides.

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<sup>1</sup> The Seven Standards and Conditions are Modularity, MITA, Industry Standards, Leverage, Business Results, Reporting, and Interoperability

4. Version upgrades are also needed to comply with federally-mandated eligibility enrollment, and clinical coding requirements that will be effective in 2014. Failure to comply could impact federal funding.

## **Scope of Work**

The Office of Health Transformation (OHT), on behalf of Ohio's HHS agencies, is seeking to replace Ohio's current eligibility system (known as Client Registry Information System-Enhanced (CRIS-E)) with an integrated, enterprise solution that supports both State and County operations. CRIS-E provides intake and eligibility determination support for several of Ohio's HHS programs, as it also presents some case management functionality for several Ohio Department of Jobs and Family Services (ODJFS) programs. Nonetheless, CRIS-E is a legacy system that was designed over 40 years ago, built in 4 years, and finally implemented in 1978. In its current state, it is an amalgamation of workarounds and solution enhancements to ensure end-to-end support of cases that reside within CRIS-E.

OHT seeks to develop the SOA HHS enterprise platform upon which the Integrated Eligibility (IE) and HHS Business Intelligence (BI) System will be implemented in following phases.

**Phase 1** — Complete the SOA Software and infrastructure installation work stream, implement the self-service portal, implement SOA governance, and master data management. CRIS-E remains the system of record for non-MAGI processing. The IE/BI solution will not store or hold applications submitted prior to January 2014, but instead process eligibility upon submission

**Phase 1.5** — Includes the rest of the non-MAGI medical assistance programs and redeterminations. CRIS-E will no longer be the system of record for Medicaid applications

**Phase 2** — Replaces CRIS-E and provides production capability for fully integrated, multi-program eligibility system operations

## **PROJECT MANAGEMENT**

### **Project Team**

See project team information at the end of this document.

### **Project Management**

DAS will be responsible for overall management of this project. Vendors are responsible to provide a detailed project plan and to meet agreed-upon deadlines as approved by DAS project director, and to provide updates to the project plan on a monthly basis. This protocol does not apply to any IE/BI activities of any agencies other than DAS or ODM.

As risks and change orders are identified, the Project Management Office will review potential actions and determine the best action to implement. The project team will follow the Project Management Body of Knowledge (PMBOK) processes and best practices as committed to in the Expedited Advanced Planning Document (EAPD) approved by CMS on July 25, 2012.

### **Work plan**

Vendors will provide detailed project plans. Below are the high level implementation dates for this project:

1. 10-1-2013 Medicaid MAGI Program (Phase 1)
2. 7-1-2014 Non MAGI Medicaid Program (Phase 1.5)
3. 7-1-2015 Base System (Phase 2)

## Project Budget

OHT is coordinating project budgets with DAS, ODM, and OBM. Meetings to review and update the budget will be held no less often than quarterly to ensure the budget is a dynamic representation of the work associated with this Operating Protocol. Work defined in this Operating Protocol is:

1. Integrated Eligibility/Business Intelligence (IE/BI)
2. Staff Augmentation for Technology

BUDGET ESTIMATES – revised 7/15/2013		FY14	FY15	TOTAL
1.	Integrated Eligibility/Business Intelligence (IE/BI)	\$218,339,355	\$105,927,101	\$324,266,456
	<i>IE/BI DDI @ 90%</i>	\$152,081,073	\$54,384,001	\$206,465,074
	<i>IE/BI DDI @75%</i>	\$20,900,480	\$0	\$20,900,480
	<i>Operations of IE/BI @ 75%</i>	\$45,357,802	\$51,543,100	\$96,900,902
2.	Staff Augmentation for Technology	\$418,314	\$0	\$418,314

## Stakeholder Input

Current Eligibility and Enrollment functionality and data is utilized by several offices and agencies. Stakeholders using the functionality and data include, but are not limited to:

1. Ohio Department of Medicaid (ODM)
2. Department of Job and Family Services (ODJFS)
3. Department of Administrative Services (DAS)
4. Office of Health Transformation (OHT)
5. Office of Budget and Management (OBM)
6. Other Cabinet Level Agencies

## BUSINESS REQUIREMENTS AND SOLUTION

### Business Requirements/Policy Objectives/Deliverables

The business requirements are being detailed by the project teams, are contained within the RFP and the contract that resulted from it.

[PUBLIC LAW 111 - 148 - PATIENT PROTECTION AND AFFORDABLE CARE ACT](#)

## **Procurement**

DAS managed the competitive procurement of IE, IVV, and OCM vendors. The procurement process comports with applicable federal legislation listed below including that for procurement.

## **Federal Funding and Compliance**

The expenditures associated with this contract are expected to receive 90%, 75%, and 50% federal financial participation as appropriate to the category of work and as determined according to OMB Circular A87 and the waiver of that exception specifically for the ACA eligibility and enrollment system. The project and expenditures associated with the project will comply with the following federal and state legislation:

Health Insurance Portability and Accountability Act of 1996 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.

### **Federal Funding**

[OMB Circular A-87, Cost Principles for State, Local and Indian Tribal Governments \(05/10/2004\)](#)

[Federal Funding Accountability and Transparency Act of 2006](#)

[Transparency and Accountability in Federal Spending Act of 2008](#)

[OMB Circular A-133, Audits of States, Local Governments and Non-Profit Organizations \(includes revisions published in the Federal Register 06/27/2003 and 06/26/2007\)](#)

[Tri Agency Letter on details of cost allocation waiver dated 1-23-2013](#)

[Affordable Care Act FAQ 4-25-2013](#)

### **Procurement Standards (Competition/Sole Source):**

SMM Section 11267

45 CFR Part 95 Subpart F §95.615

45 CFR Part 95 §92.36

**Access to Records**

42 CFR Part 433.112(b) (5) – (9)

45 CFR Part 95 Subpart F §95.615

SMMS Section 11267

**Software & Ownership Rights**

42 CFR Part 433.112(b) (5) – (9)

45 CFR Part 95 Subpart F §95.615

SMMS Section 11267

**HIPAA Privacy & Security**

45 CFR Part 160 and Part 164, Subparts A and E.

**Cost Allocation**

2 CFR Part 225 formerly OMB A-87.Appendix C to Part 225—State/Local-Wide Central Service CAP

**Other applicable Federal and State Laws**

**Project:** IE/BI Initiative. OP between the DAS and the ODM

OP Manager: Mark Vidmar, (614)752-4395, mark.vidmar@medicaid.ohio.gov

Updated: 8/8/2013

## PROJECT TEAM

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8/8/2013

## Operating Protocol

- A. Applicability.** This Operating Protocol is developed pursuant to O.R.C. Sections 191.01-191.06 and is applicable to following state agencies: ODM (MCD) and DAS
- B. Purpose.** The purpose of this protocol is to manage the relationship between ODM and DAS in the development of the IE/BI system.
- C. Funding Responsibilities.**
1. The funding sources identified for the time period specified in the table below are committed to the project.
  2. If the table below indicates any federal funds are to be sub-granted to lower level sub-recipients, the agency issuing the sub-grant will be responsible for communicating federal and state compliance requirements governing program funding. Such requirements include, but are not limited to, 45 CFR 92, OMB Circular A-133 and cost principles outlined within 2 CFR 220, 2 CFR 225 or 2 CFR 230 as applicable to the sub-recipient.

Operating Protocol Funding Table for:

Time Period- 7/1/13 thru 6/30/15

Agency	Fund Source-Fund	Fund Source-ALI	Amount	CFDA #	Will Funds be Sub Granted?	Description of How Funds Will Be Transacted
ODM	3F00	651624	\$185,818,567		No	Will be used for the DDI of IE/BI @ 90% FFP
	5U30	651654	\$20,646,507			
ODM	3F00	651624	\$15,675,360		No	Will be used for the DDI of IE/BI @ 75% FFP
	5U30	651654	\$5,225,120			
ODM	3F00	651624	\$72,675,677		No	Will be used for the Operations IE/BI @ 75% FFP
	GRF	651425	\$24,225,226			
ODM	TBD	TBD	\$418,314		No	Will be used for the contracts for Peter Quinn (50% of 1 year), Greg Jackson (100% of 1 quarter), and Mary Carroll (50% of 1 quarter)

General process and timeline for invoice payment based on business days:

- Day 1 Vendor invoice received by OIT
- Day 1-3 Vendor invoice reviewed and approved by OIT
- Day 1-3 OIT creates and issues invoice to ODM
- Day 4 – 17 ODM reviews, approves and issues payment for OIT invoice
- Day 18 – 22 OIT remits payment to vendor

**If ODM receives an improper invoice from DAS, ODM must notify DAS within 10 days of the receipt of that invoice. ORC 126.30 and OAC 126-3-01 require payment of interest for any invoice not paid within 30 days of receipt. Failure of either party to adhere to the schedule could require implementation and an obligation to pay interest by the agency responsible for the delay.**

**D. Personnel.** Personnel identified for the time period specified in the table below are committed to the IE/BI project for ODM, DAS, and JFS.

Operating Protocol Personnel Table for:  
Time Period- 7/1/13 thru 6/30/15

Agency		Position	FTE Value	Functions Performed
ODM	TBD	Various		Various project related function in build and run
DAS	TBD	Various		Various project related function in build and run

**Employee Billing:**

DAS established a new state position at DAS to assist with specified IE project obligations under the OP. ODM agrees to do a one-time advance of \$22,000 to cover the initial cash flow for this position. This funding will be included in the IE/BI line that is 90% DDI. This employee will complete effort reporting in OAKS HCM to document work completed for Integrated Eligibility (IE). DAS/OIT will track and collect payroll and effort reporting data and issue a bi-weekly invoice to ODM for those hours which are specific to IE. OIT invoices will include all necessary documentation and signatures to support ODM in the review, approval and payment process. ODM

will follow the guidelines for the general payment process and will issues payment no later than 30 days from the date indicated on the invoice.

**E. Health Transformation Project General Billing Workflow:**

All Health Transformation project invoices will follow the same general review, approval and payment process and timeline. All vendor invoices must be paid within 30 calendar days of the date of invoice. Allowing for weekends and holidays, the process must be accomplished in 22 or less business days.

**Data Sharing.**

1. Data sources and elements to be shared for the ODM and DAS for the time period specified are shown in the table below.

<b>Operating Protocols Data Sharing Table for:</b>				
<b>Time Period: 7-1-2013-6-30-2015</b>				
<b>Agency</b>	<b>Data Source</b>	<b>Description of Data Elements</b>	<b>Is Data Protected Health Information?</b>	<b>Description of Data Sharing Procedures</b>
DAS	MIT5	Medicaid related	Yes	NIST SP-800-53
DAS	CRISE	Medicaid related	Yes	NIST SP-800-53

2. If a participating agency reasonably determines that its protected health information shared with another agency has been maintained, used or disclosed in violation of state or federal law, the agency may cease sharing access to the information until the matter is satisfactorily resolved among the agencies and the Governor's Office of Health Transformation. The agency, agency contractors or agency sub-contractors responsible for any breach of PHI will be responsible for rectifying that breach.