

MMIIS to MIES Modernization: A Journey In Case Management

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Agenda

- Speaker Introduction
- Challenges
- Defining System Requirements
- Development Methodologies
- Funding Considerations
- Solution
- Q&A

Introduction

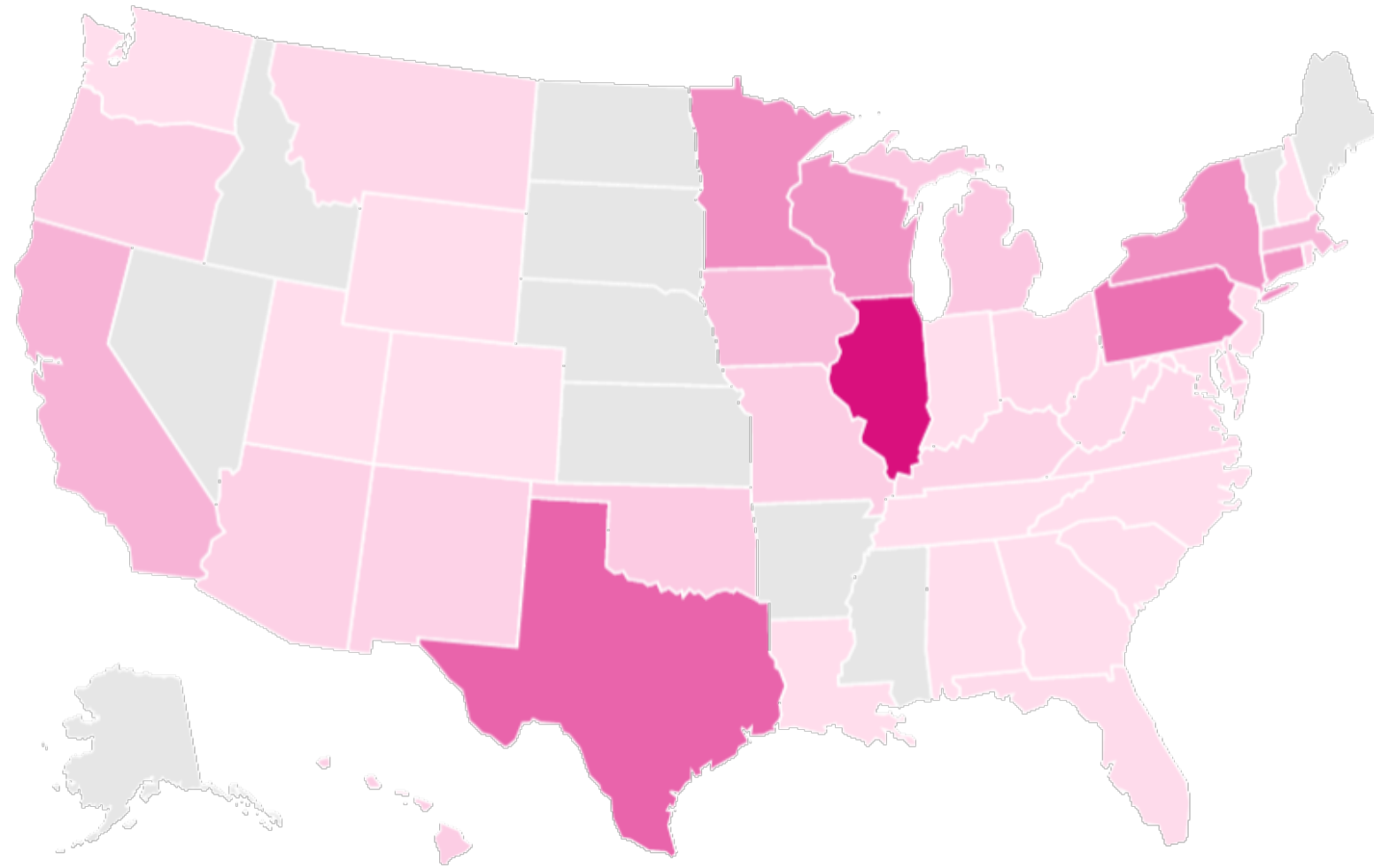
Ted Jones

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

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



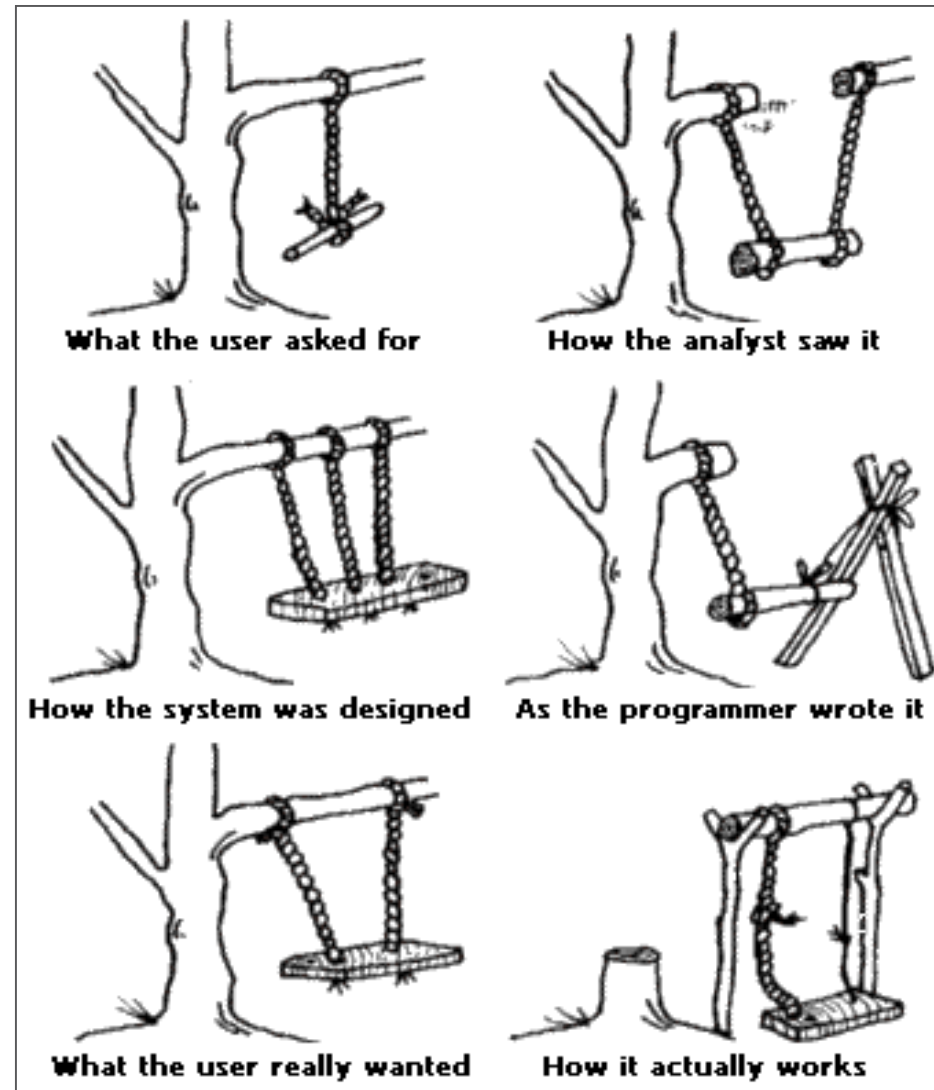
Customer



Designer/
Developer



Customer



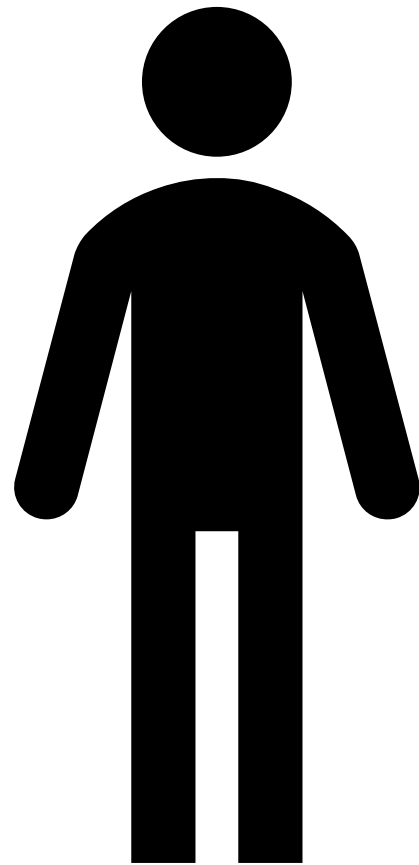
Business
Analyst



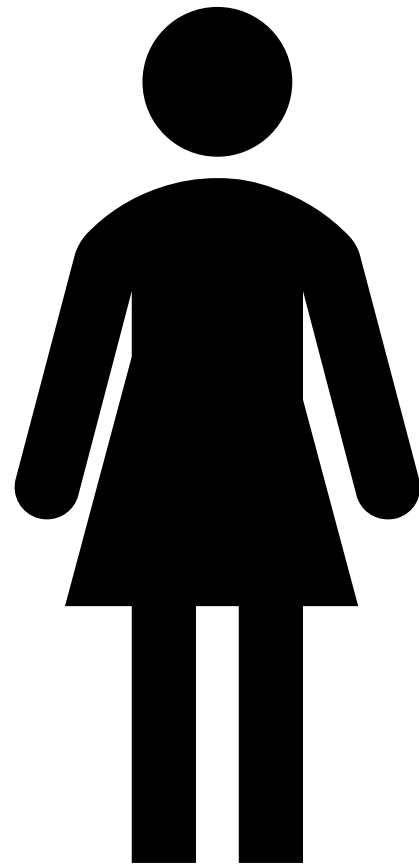
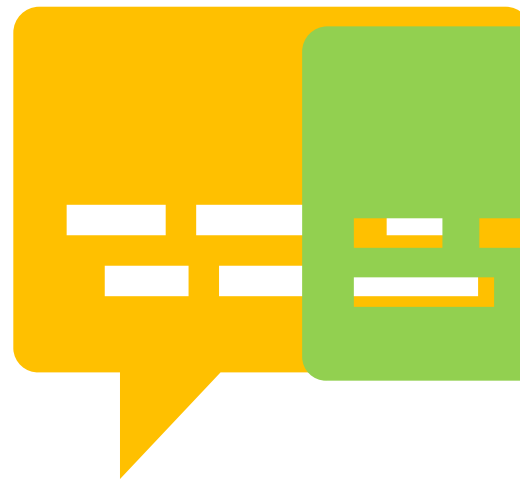
Technical
Developer



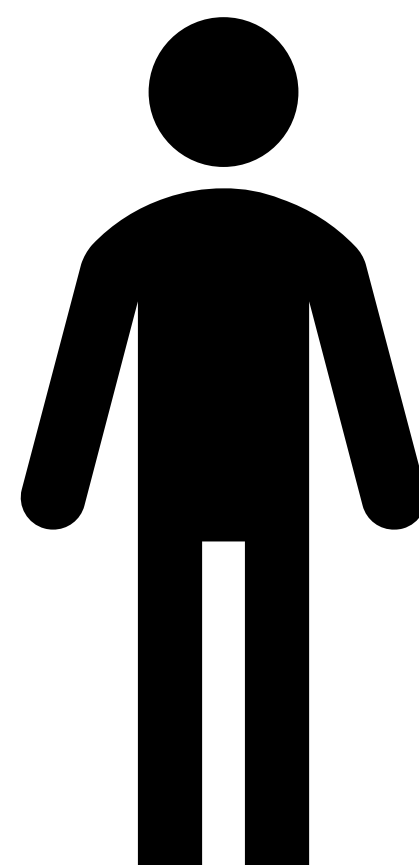
Tester



Business Users



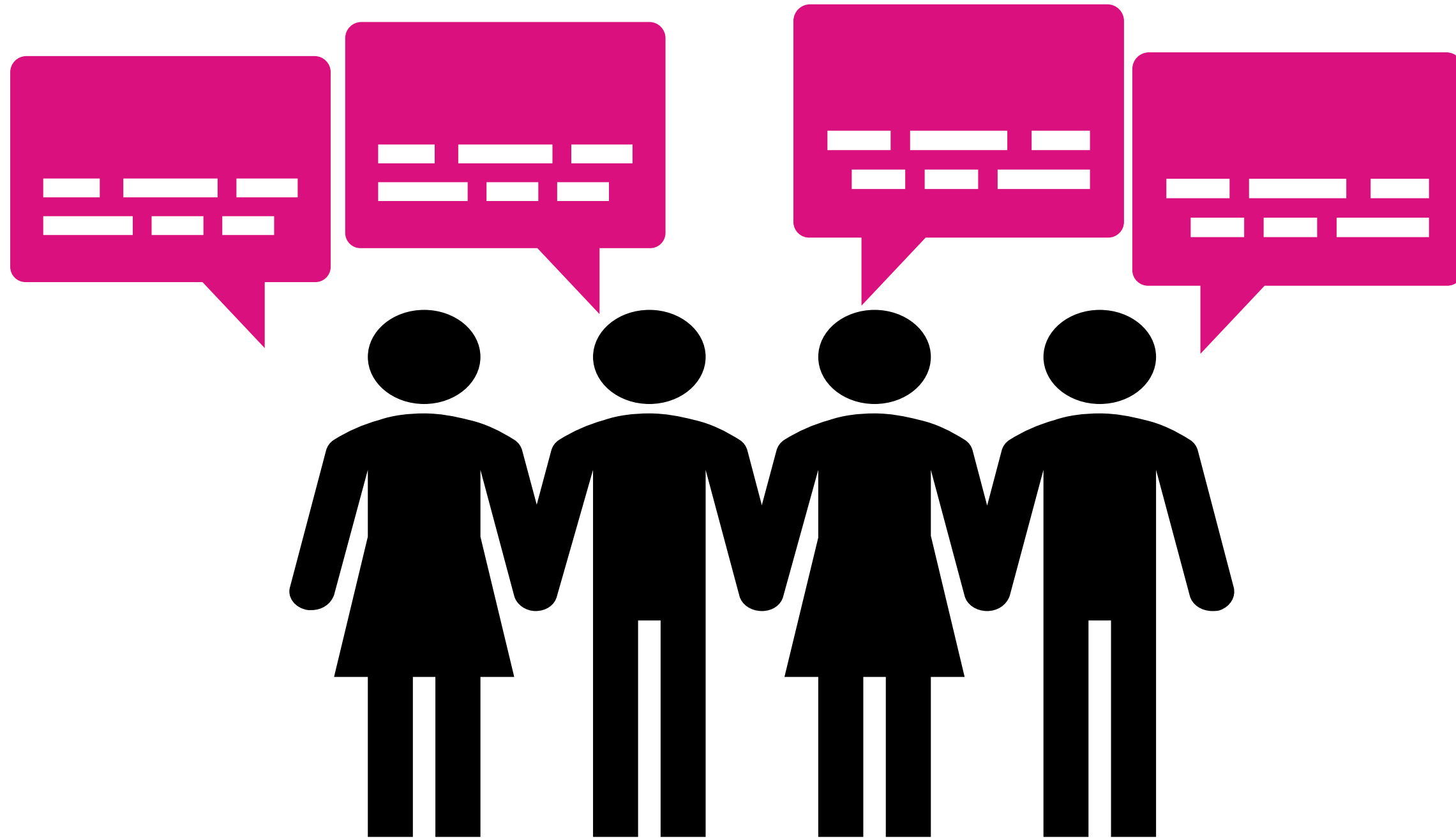
State IT/Systems Staff



Contractor BA



Contractor Developer



Business Users State IT/Systems Staff Contractor BA Contractor Developer

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?"

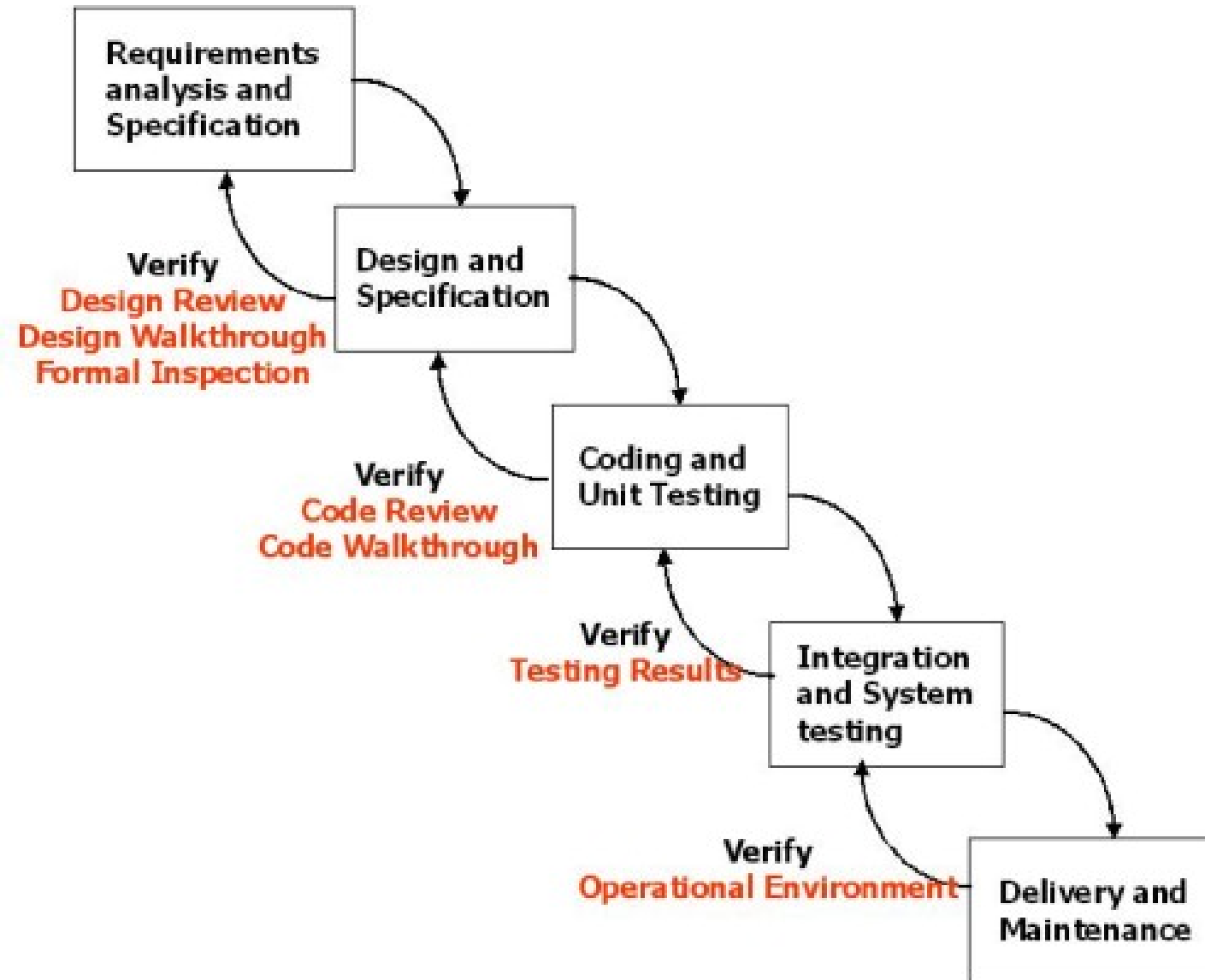
Truth # 8: Even the best requirements cannot – and should not – replace human dialogue

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

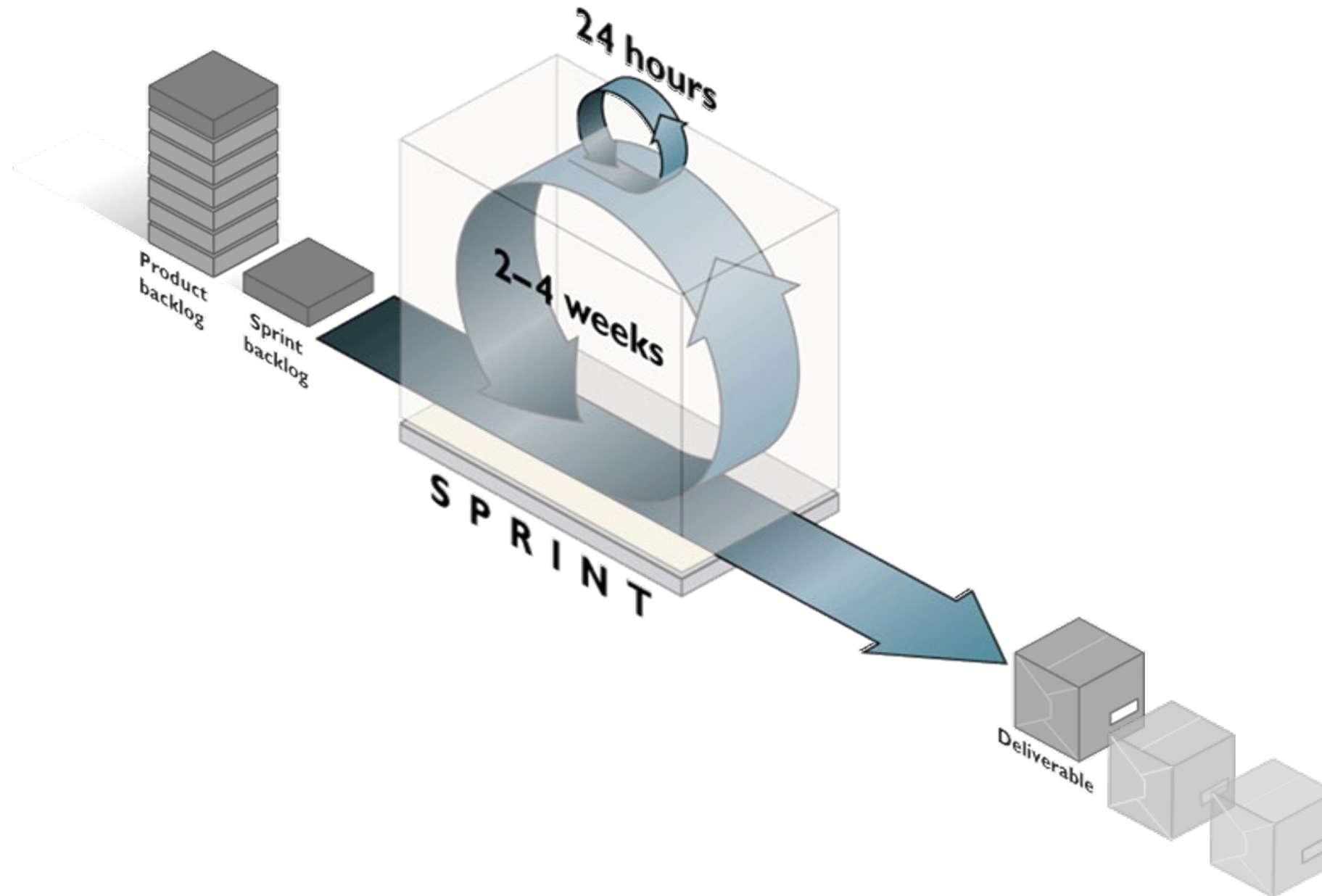
Truth # 10: You'll never have perfect requirements

Waterfall vs. Agile: Who's Right?

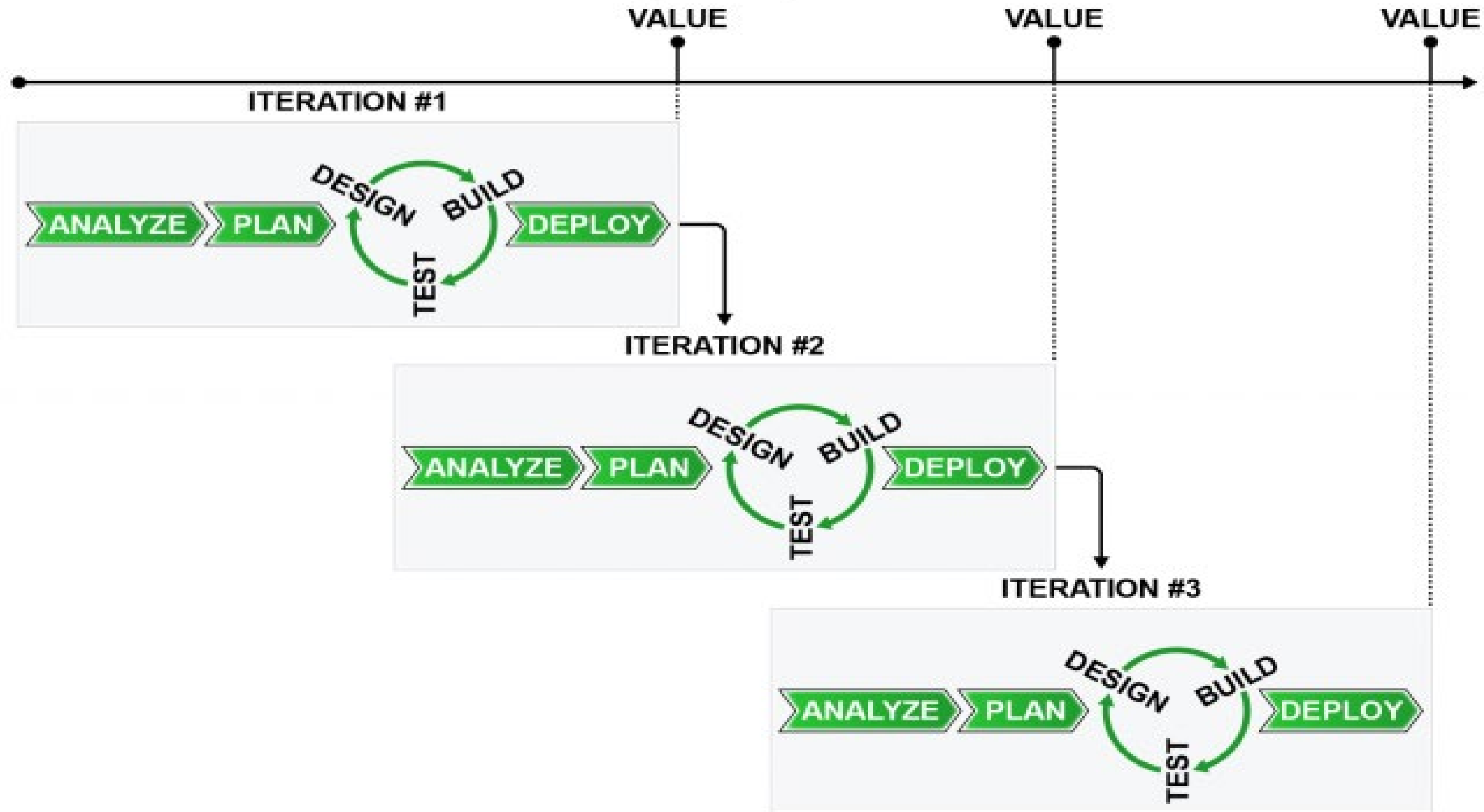
Traditional Waterfall Process Visualization



Agile (Scrum) Visualization



AGILE MODEL



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

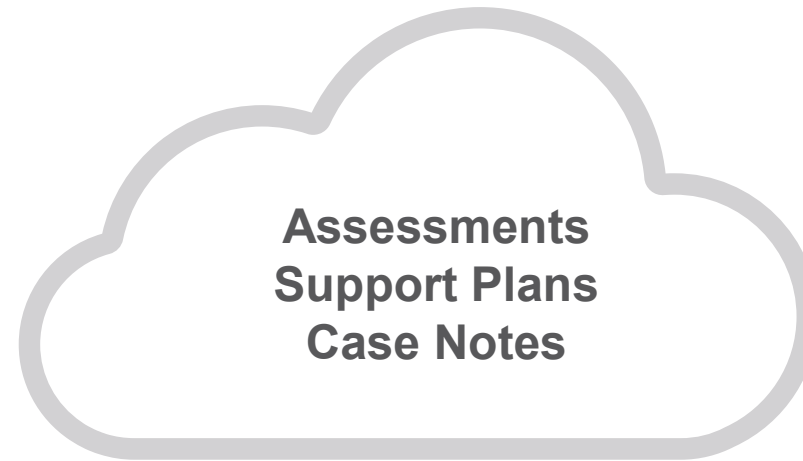
Problem

- 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

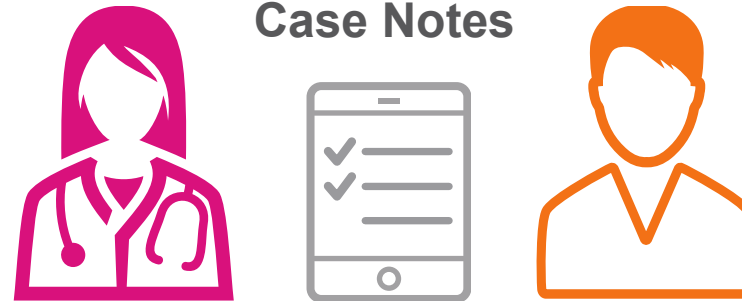
- Assessment and support plan data is locked for all other users
- Check-in, check-out mechanism with FIFO (first in, first out)
- Indicator on member record that data is locked which indicates the name of the user that owns the lock

Offline Workflow



Assessments
Support Plans
Case Notes

Assessments
Support Plans
Case Notes



Plan your Day

Engage the participant

Wrap up your Day

- Connect to the internet
- Check out participants
- Locked data



- 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