

State of Arkansas

Developing a Future State Vision for Arkansas Healthcare and Human Services Programs

Future State Vision in Support of the Integrated Eligibility – Benefits Management Solution Procurement

Executive Validated Recommendations Final Report for Approval



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Purpose of the Document

- Document the consensus of the Visioning Workgroup and State Administration on the Future State Vision for a more Integrated Approach to the State's continuum of Healthcare and Human Services (HHS) Programs
- Identify the programs and key capabilities that should be included in the Integrated Eligibility and Benefits Management (IE-BM) procurement and resulting solution to support the Vision
- Provide the foundational content for the forthcoming IE-BM Request for Proposal and Business Process Analysis Report (Business Functional Requirements) to define "what" the State is requiring as the scope of the IE-BM solution





Background





Background

- The State of Arkansas Department of Human Services (ARDHS) had undertaken the design, development and implementation (DDI) of the IBM Cúram Eligibility and Enrollment Framework (EEF) to meet the business needs of the State's Integrated Eligibility and Benefit Management (IE/BM) operations for Supplemental Nutrition Assistance Program (SNAP) and Medicaid Eligibility Determination (MAGI-Modified Adjusted Gross Income and Traditional Medicaid)
 - To date only MAGI Medicaid has been completed and deployed
- Based on a comprehensive assessment, alternatives analysis and final report and roadmap the State will be "going to market" for a Systems Integrator to move the Integrated Eligibility and Benefits Management (IE-BM) Solution forward with Cúram or another solution if an alternative solution is proposed with compelling justification to be a better value option for the State
- A critical component of this re-procurement effort was to develop a future state vision and business case that will support Arkansas in developing a more integrated approach to the full continuum of the State's healthcare and human services programs





Visioning Workgroup Objectives

- Identify the challenges, trends and opportunities for enhancing the State's approach and model of practice of its Healthcare and Human Services (HHS) Programs
- Identify business and technology integration opportunities to enhance access, outcomes, cost, accountability and quality of the State's HHS Programs
- Define what is in scope for the current investment of major dollars in HHS technology enablement through the Integrated Eligibility and Benefits Management (IE-BM) Solution
- Define the Future State Vision for the State's HHS Programs and Key Business and Technology Imperatives
- Identify key next steps for executing on the future state vision and goals for the State's HHS Programs





Considerations for Vision Development

- Beginning in February 2016, through a series of facilitated meetings and working sessions, the Visioning Workgroup focused on the following –
- What will be the scope of the State's Healthcare and Human Services Vision?
 - What is in-scope and what is out of scope?
- What are the near-term opportunities presented by the E&E / BM Procurement that should be considered for inclusion in the Procurement effort, such as:
 - Programs to include not currently considered
 - Establishment of a statewide consumer portal access point
 - Enhance consumer self services for application, self care, self sufficiency and accountability
 - Single statewide screening and application capabilities for all eligibility driven programs (Single Application)
 - Cross Programs Business Intelligence and Analytics, including Predictive and Performance Analytics





Framework for the State's Health and Human Services Vision High Performance Person-Centered Model of Practice Enabled by Technology





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New Approaches to Technology

From Stand Alone Silos to Shared Technology Components and Services

- Leverages IT Best Practices and National HIT standards/initiatives and technology trends including:
 - Service-Oriented Architecture (SOA)
 - Modularity
 - Reusability (Build Once Use Many Times)
 - Multi-channel Access
 - Cloud and Software-defined Infrastructure
 - Social Networking and Collaboration
- Leverages the capacity of current transactional applications and minimizes need to replace all legacy applications at one time
- Improves both the Organization User, Consumer and Trading Partners' Experience
- Provides for improved data quality, standards and stewardship
- Strengthens Master Data Management Identity Access Management, Master Index Capabilities (Provides and Consumers), Consent Management, etc.
- Enhances Enterprise Content Management, Logical Data Warehouse, Business Intelligence and Shared Analytics (Performance and Predictive)





Integrated HHS Enterprise Architecture

Key Benefits at the Delivery and Program Level

- Aligning with the needs of users (staff, consumers, contract providers) at every level
- Leveraging the vast data, information and vital statistics that are resident in the full continuum of HHS programs
- Shared Analytics and Business Intelligence Providing for performance analytics and forecasting and trend analysis across HHS Identifying "Patterns"
 - Identify "what works" and supports employment of "evidence based practices"
 - Findings and utilization in one program / service area impacts others
 - Enhanced Targeting of Investments and Interventions
 - Target Population Identification
 - Prevention and Community Education
 - Early Intervention
 - Appropriate Level of Intervention, Service, Support
 - Quality Assurance and Compliance
 - Continuity and Congruency of Services
- Providing robust capacity to improve performance, accountability and outcomes across the full continuum of health and human services
- Identifying cost reduction and cost savings opportunities as well as improvements in accountability and program integrity
- Linking regulatory / enforcement activities with program operations and contracting
- Enhancing capacity to do "Predictive Modeling" and "What If" scenarios to support program and policy development





HHS Enterprise Solution Pattern for the Future – Areas Explored Shared Technology Components Supporting Integrated HHS Functional Capabilities

- **Common Portal** Multi-Channel access and support for robust consumer self-service
- Integrated Eligibility Capability for Web-based, real-time eligibility determination including robust self-service capabilities – Screening – Application – Determination.
 Dynamic, rule-based rules engine that allows for update of eligibility rules without significant effort
- Master Data Management Key Person and Provider Indexes, Identity Management and Consent Registry
- Client Look-up, Search and View Query Results Capability to search for client summary and demographic information across programs and services, access to shared information such as identification of program enrollment and current services
- Referral Management Electronic creation and routing of referrals, acknowledgment and confirmation of referral acceptance, and as needed tracking of referral status
- Collaborative Service Delivery Capability for providers to communicate through secure messaging and sharing of coordinated case management notes and management of integrated plan of care. Service integration and prevention of duplication of efforts for "Common Clients"
- Shared Analytics and Business Intelligence (Pushed/Pulled) Access to cross-program reports and analytics that will improve decision support capabilities and provide trend based analysis and predictive reports. Automated notifications and alerts for users to provide client or population specific information





Visioning Workgroup Recommendations

Priority Areas Identified





Recommendations – Common Portal and Integrated Eligibility Shared Technology Components Supporting Integrated HHS Functional Capabilities

- The State should establish through the IE-BM solution a Common Multi-Channel Access Point (PC, Mobile, Kiosks, etc.) for Arkansans to:
 - Allow consumers to easily seek information on healthcare and human services programs
 - Support robust consumer self-service in applying for State programs and services that can provide efficiencies for the State in providing consumer support through the life cycle of application, determination and delivery of benefits/services
 - Allow clients to access information on their status of their relationship with the State (case or benefits) once enrolled in a State program
 - Support efforts to enhance operations and more efficiently utilize "brick-and-mortar" County Offices
 - Provide foundation for the future for the State's health and human service programs including but not limited to:
 - Centralized approach to Call Centers
 - Front-end solution support for the modernization of other State health and human services programs systems





Recommendations – Common Portal and Integrated Eligibility

Shared Technology Components Supporting Integrated HHS Functional Capabilities, Cont'd

- The State should move to a "Single Application" for the Screening, Application and Determination of Eligibility for the core in-scope healthcare and human services programs through the IE-BM solution. This Single Application should also incorporate the following functionality:
 - WIC preliminary eligibility as an addition channel to the current State WIC channel for accessing WIC services
 - Key question to ascertain if a consumer is to be considered for Child Support Services (CSE) and the information gathered through the Single Application is forward to CSE
 - Support for identifying consumers potentially eligible for Child Care Assistance and the forwarding
 of consumers to the Child Care program for full eligibility determination and enrollment
 - Department of Veterans Affairs eligible veterans information and the forwarding of consumers eligible for Veterans services and benefits
 - Support for the future of Arkansas Works under CMS Freedom of Choice regulations in the event the State moves to managed care. This may include additional functionality for the selection of an MCO; and a QHP or ABP for the Medicaid expansion population under the private option and soon to be under Arkansas Works
- The "Single Application" approach should provide for robust consumer self service





Recommendations – Master Data Management and Client Look-up Shared Technology Components Supporting Integrated HHS Functional Capabilities, Cont'd

- The IE-BM Solution should include key Master Data Management (MDM) capabilities that will support the in-scope programs but can also be leveraged across other HHS programs, these should include:
 - Identity Access Management Supporting a single sign on set of capabilities
 - Master Person Index Trusted and reliable real time ability to identify State HHS clients across the full continuum of Arkansas HHS programs and services
 - Master Provider Index Trusted and reliable real time ability to identify State purchase of service providers across the full continuum of Arkansas HHS programs and services that will provide the foundation for future capabilities that can include but not be limited to:
 - Establishment of a Statewide provider index of all State purchase of services providers and contracts providing HHS programs and services
 - Provide enhanced tracking, analytics and reporting on providers' contracts and budgets across State HHS programs and to support Program Integrity activities
 - Provide the capability for a "provider vault" that can provide efficiencies for providers in submitting key required contract documents (501 (c) (3) documents; articles of incorporation; financial statements; board of directors; audit reports; etc.) once that then can be leveraged by all State HHS agencies contracting with a provider without multiple submissions to multiple State agencies
- These MDM capabilities should be located (published) through a State Enterprise Service Bus to be accessible and usable by all State HHS programs beyond the scope of the IE-BM solution





Recommendations – Master Data Management and Client Look-up Shared Technology Components Supporting Integrated HHS Functional Capabilities, Cont'd

- Client Look-up, Search and View Query Results Through leveraging MDM capabilities of the IE-BM Solution, support the capability to:
 - Search for client summary and demographic information across the in-scope HHS programs and services
 - With appropriate controls allow appropriate access to shared information such as identification of program enrollment and current services for in-scope HHS programs and services
 - Support Change of Circumstances efficiencies apply across all relevant programs and services
- The use of an open Rules Engine that will meet the full scope of the IE-BM solution but can also be leveraged, in the future, by other State HHS programs to meet their specific needs





Recommendations – Reporting and Shared Analytics

Shared Technology Components Supporting Integrated HHS Functional Capabilities, Cont'd

- The IE-BM procurement effort should include the capabilities for developing a robust infrastructure (leveraging where possible current State capabilities at DHS and DIS) to provide for enhanced **Reporting, Shared Analytics and Business Intelligence** capabilities to support:
 - Automated notifications and alerts for users to provide client or population specific information
 - Access to State's HHS program reports and analytics across the continuum of the State's programs and services that will:
 - Improve decision support capabilities at the delivery, management and executive levels
 - Enhance performance analytics
 - Provide for predictive analytics
 - Improved Program Integrity (fraud, waste and abuse) anticipation, targeting, investigation, prevention and mitigation efforts and results





Additional Considerations

- The State should ensure that the core components of the new IE-BM Solutions are built in a manner that meets near term, and future term HHS needs and capabilities for the States. The IE-BM core components need to support:
 - Service-Oriented Architecture: The target architecture should consist of common shared technology components and services that are compliant with industry standards for serviceoriented architecture to facilitate reuse, adaptability and interoperability – *Modular and Reusable* -*Build it Once* – *Use it Many Times*
 - Interoperability Standards: Build upon national standards around the interoperability of key components to provide for future extensibility and capabilities for end-to-end integration of data and for the State's HHS programs and services consumers and staff
 - Scalable and Extensible: Allows for future incremental expansion of functionality over time on the IE-BM base that is scalable to accommodate additional users and extensible in expanding capabilities to additional State HHS programs and to meet changing business needs and Federal and State changes in mandates, rules and regulations
 - Data Availability: The most up-to-date version of data available in real time or near real time as
 possible for users at all times within cost and performance constraints
- The State will also need to assess and define the activities and resources necessary for those programs outside of the scope of the IE-BM solution to leverage the capabilities identified to enhance the coordination of the State's continuum of HHS programs and services





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Next Steps

- Once approved, the validated Visioning Workgroup's recommendations will provide the content for the Narratives required for the Business Process Analysis Report and the IE-BM Request for Proposals (RFP), Business Case and Scope
- Working with the HHS programs and services identified in the recommended scope to gather and document the functional requirements to be included in the RFP
- Finalize the non-functional requirements and general system design requirements to ensure the vendor community understanding the technology, implementation and performance requirements for the IE-BM solution aligned with the Visioning Workgroup's recommendations







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