

MMIS Replacement Planning Project Legislative Quarterly Status Report October – December 2016

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This quarterly *Medicaid Management Information System (MMIS) Replacement Planning Project Report* is filed by the Department of Health and Human Services Division of Medicaid and Long-Term Care (MLTC), as required by LB 657 of 2015.

Project Status Summary

The MMIS project team is continuing with the planning for the replacement of the functionality within the existing MMIS that has served the state since 1978. Following is a list of accomplishments over the past quarter and our upcoming activities and milestones for the next quarter.

Accomplishments: October – December 2016

- Finalized DMA RFP proposal evaluations.
- Finalized DMA RFP Oral presentation evaluations.
- Finalized DMA RFP Best and Final Offer (BAFO) evaluations.
- Announced intent to award DMA contract.
- The Independent Verification and Validation (IV&V) contract with First Data Government Solutions, LP was approved by CMS and the project has commenced.

Current / Upcoming Activities: January – March 2017

- Process any and all DMA RFP award protests. NOTE: Due to an upheld protest, a revised intent to award the DMA contract to Deloitte was posted on February 1, 2017. This opens a new protest period. The previous intent to award was to Optum Government Solutions, Inc.
- Develop, receive CMS approval for, and execute contract for DMA with Deloitte.
- Develop detailed requirements for the Claims Broker Services (CBS) project.
- Commence the DMA project.

Project Status Summary by Component

The status for each MMIS project component is described below.

Data Management and Analytics (DMA)

Providing an improved capability to manage the vast amounts of data received by the Medicaid agency continues to be a top priority for DHHS. Managing the data, producing accurate and timely reports, and utilizing the data to make informed business decisions will continue to become more critical within the Medicaid program. The Request for Proposal (RFP) for the Data Management and Analytics (DMA) procurement was approved by all stakeholders and released to the public in June of 2016. There has been an overwhelming interest from the vendor community for this project. Five (5) vendors responded with proposals that were assessed through the evaluation process.

The project plan remains on schedule. The DMA solution is projected to be operational in October 2018.

Implementation preparation activities are in progress. These activities will ensure that MLTC is prepared to effectively begin work with the contractor when the DMA implementation project commences.

Independent Verification and Validation (IV&V)

Independent verification and validation (IV&V) is a process employed by a third-party for evaluating the accuracy and quality of a project throughout the project duration. For major information technology system projects receiving enhanced federal 90% match funding, CMS requires states contract with an IV&V contractor to perform these services and report to CMS.

MLTC released a joint competitive procurement for IV&V services for the DMA project as well as the eligibility and enrollment systems (EES) project. The procurement enables MLTC to engage the IV&V contractor to support multiple CMS enhanced funded projects related to the new modular MMIS enterprise replacement and their certification by CMS (as applicable).

The IV&V contract was awarded to First Data Government Solutions, LP. The contract was approved by CMS and executed. The project planning and elaboration phase commenced in December.

Claims Broker Services (CBS)

The Heritage Health contracts were awarded, with one Medicaid Managed Care Organization (MCO), United Health Care, contracted to process fee-for-service professional, institutional, and pharmacy claims. This solution capitalizes on United Health Care's capacity and technological infrastructure already developed and in place to pay claims through existing at-risk Nebraska Medicaid contracts. The claims broker services for dental claims will be included in MLTC's Dental Benefit Management procurement.

CBS planning activities are continuing with the drafting of a project management plan, resource plan, and communications plan. Two critical components to the planning activities are ensuring the project follows the Centers for Medicare and Medicaid Services (CMS) required Medicaid Enterprise Certification Life Cycle (MECL) and that appropriate planning identifies how the CBS will be certified. CBS certification is necessary in order to obtain enhanced funding from CMS for the ongoing operations of the system. CMS requires an Independent Verification and Validation (IV&V) vendor be involved throughout the implementation activities of the project and they encourage their involvement during the planning phase. The IV&V vendor contractor, First Data, will be engaged to provide assistance in this regard.

Project Milestones

The project team continues to complete tasks identified in a detailed work plan for the project. The planned milestones for the project are included below.

DMA Project Milestones	Target Completion
Submit contract to CMS for approval	March 2017
Finalize contract and start implementation	March 2017
Go-live	October 2018

Table 1: DMA Project Milestones

IV& V Project Milestones	Target Completion
Project Planning	January 2017
Implement IV&V Management Plan	March 2017

Table 2: IV&V Project Milestones

CBS Project Milestones	Target Completion
Project Planning	January 2017
Detailed Requirements Development	March 2017
CMS Implementation 90% Funding Approval	July 2017
Go-live	January 2019

Table 3: CBS Project Milestones