

**NEBRASKA**

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DEPT. OF HEALTH AND HUMAN SERVICES

# **Division of Medicaid and Long-Term Care**

## **MMIS Replacement Planning Report**

**July 30, 2021**

**LB 657 (2015)**



July 30, 2021

Patrick O'Donnell, Clerk of the Legislature  
State Capitol, Room 2018  
P.O. Box 94604  
Lincoln, NE 68509

Dear Mr. O'Donnell:

In accordance with LB 657 of 2015, please find the attached quarterly report on Medicaid management information system (MMIS) replacement planning.

Please contact my office with any questions at [Kevin.Bagley@Nebraska.gov](mailto:Kevin.Bagley@Nebraska.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Bagley".

Kevin Bagley, Director  
Division of Medicaid and Long-Term Care  
Department of Health and Human Services

Attachment

## Project Status Summary by Component

### Data Management and Analytics (DMA)

This quarter, the following deliverables were completed and approved:

- Disaster recovery plan, which contains instructions and provides references to information required in the event of a cataclysmic disruption of the HealthInteractive Analytics (HIA) solution at the primary hosting location.
- Operations Release 2 notes, which contains notes for updates made during this release.
- Rules of Engagement, the purpose of which is to coordinate the successful security testing of Nebraska's DMA application, network and infrastructure.
- Quarterly deliverable updates made to the change management plan, and the certification plan, all of which were submitted in April 2021.

The following deliverables are pending review and approval:

- Quarterly (Q3 2021) deliverable updates for the change management plan, operations project management plan, and the certification plan, all of which should be received by the State in July 2021.
  - The Q2 2021 operations project management plan will be approved; pending updates to the staffing plan.

The Operations Release 2 was successfully deployed in June 2021.

The third-party security audit is in progress, and results should be received by the State at the end of July 2021.

Design and development activities are underway for items to be included in Operations Release 3, which is scheduled for implementation in September 2021.

The organizational change management team conducted a 6-month post go-live pulse survey, and met with DHHS management to discuss results and next steps.

Regular communications continue to be circulated to HIA users, notifying them of data refreshes, system outages, and issue resolution

DHHS is actively engaged in the streamlined modular certification process and remains on track for a late summer final certification review event with CMS.

## Electronic Visit Verification (EVV)

This quarter, the Electronic Visit Verification (EVV) project was considered fully operational and in maintenance and operations mode. The official go-live for all EVV providers was January 3, 2021, and paper billing claim forms were turned off January 31, 2021. Turning off paper billing forms allowed DHHS to require all providers to use EVV if they wanted to continue receiving payment for services that require the use of an EVV platform.

DHHS receives provider claims submissions on a weekly basis every Tuesday morning. Since the first claim submission and at the end of this quarter, over \$77 million has been processed electronically accounting for over 625,000 individual claims. DHHS has also successfully submitted our first key performance indicators (KPI) reports to CMS for the first quarter of 2021. DHHS will continue to submit KPI reports on quarterly basis.

DHHS is currently planning for official CMS certification of the EVV system in October 2021. With EVV now in maintenance and operations mode, the focus is to resolve any defects that are found and to begin planning for system enhancements that were unable to be implemented before going live. DHHS is also beginning to plan for the addition of home health services to the EVV platform, which is considered phase two of the EVV system implementation.