

DAY 02 | Tuesday March 22nd 07:30 a.m.08:30 a.m.

States of HIT Implementation Roundtables

Roundtable 01 | Evolution to Modular MMIS Procurement: An IV&V Perspective

Parrish Steinbrecher, Deputy Office Director, Health Information Office, Colorado Department of Health Care Policy and Financing

Lindsay Espenship, PMP CPHIMS, Public Knowledge, LLC.

Modularity is more than just a buzzword! Modularity is one of the seven standards and conditions that states must meet in order for Medicaid technology investments to be eligible for enhanced match funding. Colorado is in the final stages of launching a new modular MMIS system, and has been partnering with Public Knowledge, LLC from the beginning. The partnership includes Colorado's MITA self-assessment, RFP requirements development, procurement assistance, and IV&V oversight. This roundtable will discuss the evolution to a modular MMIS procurement from an IV&V Perspective. The focus will be on lessons learned, partnership strategies, and how to work together to reduce risk and hold vendors accountable to deliver on time and on budget.

Roundtable 02 | Optimizing Procurement Methodologies: RFP Development for Modular MMIS Development

Glen Yancey, CIO, Kansas Department of Health & Environment

Calder Lynch, Medicaid Director for the State of Nebraska

Gay Munyon, Chief of Medicaid Contract Management, Florida Agency for Health Care Administration

Published funding rules (CMS 2392-F Factsheet) and pending guidance regarding the modular certification process of MMIS means that the evolution away from large monolithic implementations towards the modular integration of best of breed point solutions is accelerating. Join this roundtable to learn from 3 states leaders, the lessons learned and the strategies being employed to optimize procurement methodologies and RFP development to meet with these goals.

Roundtable Topics Will Include:

How do you identify functional components that can be modularized?

Within a modular approach, how do you blend systems and services that make sense to meet with organizational goals?

How do you approach the management of a modular build out?

When hiring an S.I. - how do you leave space for best of breed solutions?

How do you manage risk, interdependency of different solutions and establish SLAs for shared outcomes?

How do you present RFPs in a way that attracts point solution vendors to the project to bid?

Roundtable 03 | CMS Feedback on CMS 2392-F and the Certification Process

Jim Gorman, Senior Technical Advisor, Data and Systems Group (DSG), Center for Medicaid and CHIP Services (CMCS)

Eugene Gabriyelov, Technical Director, Division of State Systems (DSS), CMCS, CMS)

Ed Dolly, CIO, WVDHHR

Jon Cain, Director of Integrated Systems Management, WVDHHR

Final abstract pending.

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Roundtable 04 | Open Data, Crowdsourcing and H&HS Transformation

Gregory Myer, Chief of Staff, Department of Health, State of New Jersey
Final abstract pending

Roundtable 05 | Predictive Analytics, Community Transformation and Population Health Management

Dorothy Young, Deputy Administrator for Health Services, Office of the Governor, Division of Medicaid, Mississippi

The Mississippi Division of Medicaid is utilizing population health analytics to identify, intervene and improve quality outcomes for the medically complex, vulnerable population it serves. Through a collaborative partnership with Delta Health Alliance and Cerner, the Mississippi Division of Medicaid established the Mississippi Delta Population Health Demonstration Project. Clinically led by Delta Health Alliance, the project outcome goals are to reduce the incidence of Type II diabetes by five percent (5%) and to reduce pre-term birth rates by five percent (5%). Through the use of Cerner population health solutions, Delta Health Alliance is able to aggregate, transform and reconcile in near real-time clinical data from the Delta Health Alliance Electronic Medical Record and claims data from the Mississippi Medicaid Management Information System. The integrated data analytics enables Delta Health Alliance and the Division of Medicaid to identify, score and predict the risks of individual patients and drive actionable and appropriate care programs for the Medicaid population.

Roundtable 06 | Modular MMIS Implementation by a DHS Information Technology PMO

Tim Taylor, Assistant Director for IT Services, Arkansas Medicaid
Debra Herrli, Arkansas Deputy Director, Cognosante

The project management office (PMO) is becoming instrumental for effectively delivering new state Health and Human Services IT projects – even more so when conducting modular implementations. Yet to be effective, state DHS PMOs must have the right experience, mix, and number of staff with the broad set of skills needed to conduct a complex project, and they must reflect the organizational culture, context, and strategy. To meet these requirements, ensure project management proficiency, and provide contractor oversight, the Arkansas Department of Human Services established a PMO to take a complex modular MMIS implementation from initiation through successful implementation.

Roundtable 07 | Meeting Consumer Demand for High Quality Provider Directories

Ron Urwongse, Senior Product Manager, CAQH
Krista Lehm, Director Contracting, HealthSpring, Cigna-HealthSpring

Concerns with provider directory inaccuracies are increasing among consumers – many base their choice of plan or healthcare provider on this information. Accordingly, regulatory agencies have imposed new requirements on health plans to regularly update their provider directories. Several health plans collaborated to develop an innovative, multi-stakeholder approach to meet the requirements and improve the availability of high-quality provider information. This roundtable shares varied approaches to address the requirements; discusses the need for a robust, accurate, and low-cost source of provider data; and summarizes the impact to industry initiatives including provider enrollment optimization, consumer engagement, value-based reimbursement and clinical data exchange.

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Roundtable 08 | Implementing a Multi-State HIE: Navigating the Complex Challenges

Kevin L. DeWald, Executive Director, SD Health Link, DOH

When South Dakota Health Link implemented a multi-state Health Information Exchange (HIE), it learned that success isn't only dependent on the technology. To satisfy users, a HIE must be tailored to the way each health system and member operates. This session will offer insights into solving the technical challenges of implementation and navigating the complex challenge of working across multiple states.

Roundtable 09 | DHIN's Role in Enabling Delaware's SIM/Health Delivery System Transformation Efforts

Jan Lee, CEO, DHIN (Delaware Health Information Network)

DHIN plays a central role in delivery of shared HIT resources identified in Delaware's innovation plan. Such services include ADT-based alerts and notifications, and both basic and advanced analytics tools. The major payors in Delaware have agreed that a significant portion of provider payment under their value-based contracts will be based on a common set of clinical quality metrics, utilization and cost metrics, and patient satisfaction metrics. DHIN is currently developing version 2 of the scorecard. DHIN will also provide a state-wide patient portal to support consumer engagement efforts.

Roundtable 10 | NY MMIS Pilot Certification: Embracing Change to Optimize Outcome

Helen Winchester, NYMMIS Project Certification Lead, New York State Department of Health

In 2014, New York State Department of Health agreed to participate in a Medicaid Enterprise MITA and MMIS Certification pilot. This roundtable will discuss the State's ongoing experience with the currently evolving certification process and the impact on its own MMIS implementation. We will identify the specific challenges and describe mitigating strategies. Additional focus will be given to vendor maturity and its vital role in Module Certification