

# Status Update

July 15, 2014



A service of Maryland Health Benefit Exchange

# Key Activities



- Contract was awarded to Deloitte on April 2, 2014 to transfer the Connecticut code base to upgrade the Maryland Health Connection
- A MOU was signed with CT, and the code base and project artifacts were brought to Maryland. The code and the artifacts were provided to Maryland at no cost. Project costs are related to labor, hardware, software and hosting.
- To succeed by November, Maryland will accept the system “as-is” with only minor retrofitting for branding, notices, interfaces and Maryland specific rules
- The implementation project was structured into two distinct phases.
  - Phase 1 – gap analysis to review entire system including architecture, interfaces, and business rules to have a complete inventory of all changes that were required by November 2014, and ensure timeline could be met based on the level of effort
  - Phase 2 – implementation in two releases
    - Release 1 – Plan Management
    - Release 2 – Eligibility and enrollment

# Key Activities



- Gap analysis ran for approximately four weeks and analysis was completed by May 15<sup>th</sup>
- Team reviewed all 563 business requirements, every screen, every processes, each interface, every notice, and current business processes
- Completed a two day session with CT to review technology, business process, and operations
- Approximately 83% of the solution requirements and design are being deployed **unchanged** from Connecticut's specifications. Only 17% of the system is being modified
- Minimal retrofitting includes branding, interfaces, notices and 13 technical and functional changes. No showstoppers were identified
- Retained underlying software and hardware configurations
- MHBE is leveraging existing software, hardware, and infrastructure services in the MD HBX implementation to the degree possible
- The MHBE code branch for the MD HBX is a separately owned and maintained set of software as of 5/30

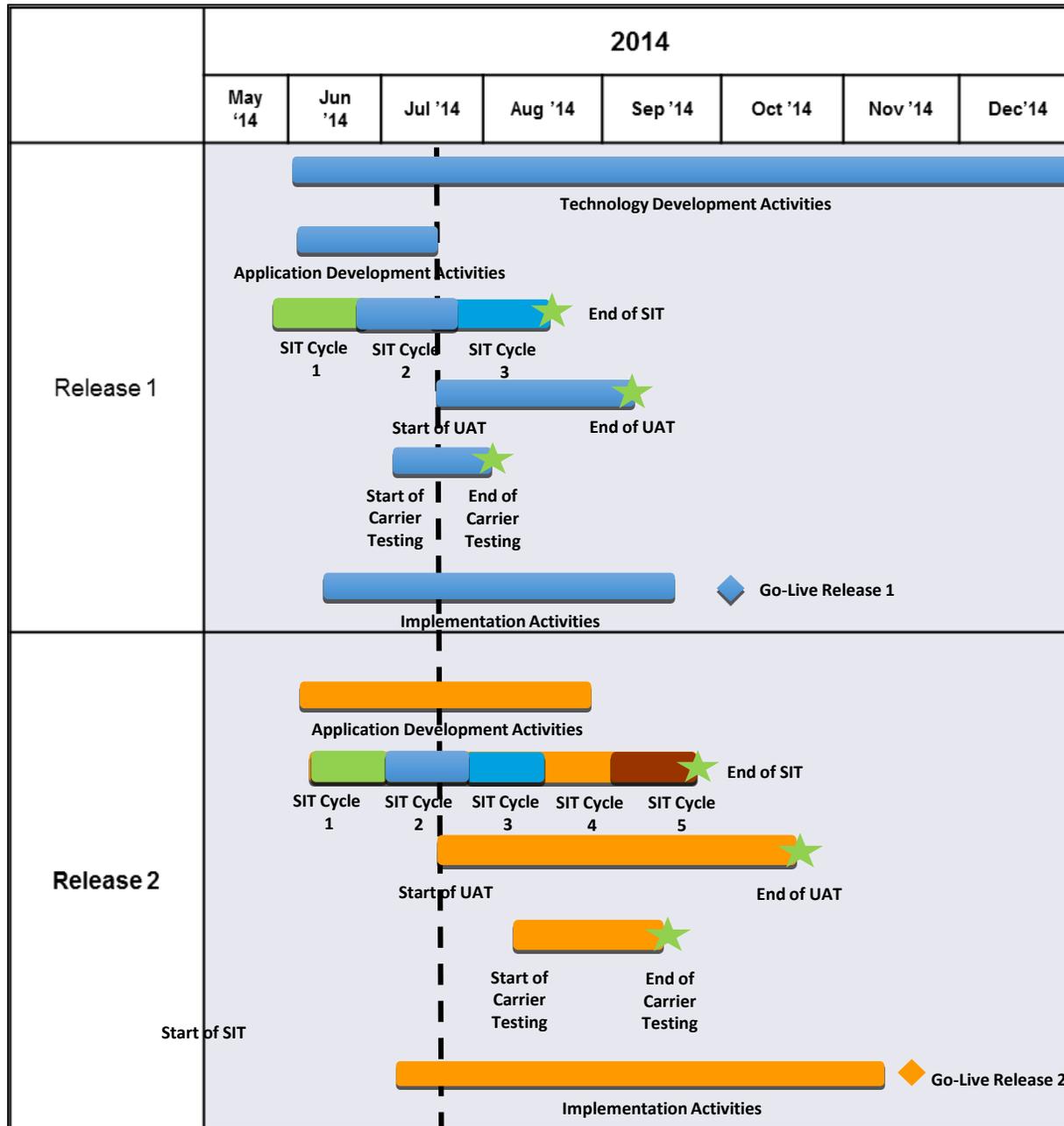
Number	Category	Gap Description	Approach	Release
1	Plan Management/ Eligibility and Enrollment	MD rates plan quality on a 5-star rating scale, whereas CT HIX rates plans on the 4-star NCQA rating scale	The 5-star rating scale (including half stars) will be adopted. The system will be updated to support this change	Release 1
2	Plan Management	The CT HIX solution uses an outdated SERFF template for Plan Management, which must be updated to the 5/1/2014 version for MD consumption	The SERFF template will be update for Release 1	Release 1
3	Eligibility and Enrollment	MD Medicaid coverage codes do not directly align to CT HIX coverage codes, as MD requires a larger set of coverage codes for their Medicaid programs	The Medicaid coverage codes for Maryland will be adopted. The system will be updated to determine the Medicaid coverage codes for Maryland	Release 2
4	Eligibility and Enrollment	MD's definition of child is an individual 21 years old or younger for certain programs whereas CT is 19	The system will be updated for Maryland to use the correct age when coverage is determined	Release 2
5	Eligibility and Enrollment	If elections are made prior to the 18th of the month, coverage and APTC amounts are effective from the 1st of the next month. CT uses 15th of the month.	The system will be updated for Maryland to use the 18th of the month	Release 2
6	Eligibility and Enrollment	8001/MMIS - Outbound interface to Interim database	Outbound call to interim database will be developed to pass the appropriate values. Matching will happen at the interim database	Release 2
7	Eligibility and Enrollment	Maryland carrier specific configuration changes (834)	The 834 will be implemented as is. Minor carrier specific configuration changes will be performed	Release 2

Number	Category	Gap Description	Approach	Release
8	Eligibility and Enrollment	Update the authorized representative form with Maryland form (for paper process only)	Authorized representative form will be updated with Maryland form (for paper process)	Release 2
9	Technology	Need for changes to printing of notices.	Sir Speedy, the vendor for CT will be used for MD HIX printing purposes	Release 2
10	Technology	Need new batch scheduler.	Procured the Linux version of the same tool used in CT	Release 2
11	Technology	Need to align document management solution.	The strategy for document management includes the port of the file net toolset to be used exclusively for HIX functionality. Local scanner in each MD office will be configured by the State to create scans of documents on the worker's desktop and use a file net utility to upload to file net	Release 2
12	Technology	Need new mass email tool.	Elastic email, which is the provider in CT will be used by Xerox	Release 2
13	Technology	Need to align scanning capability with Connecticut technology	Scan-Optics will be the scanning function utilized for the MD solution based off the similar setup for the CT solution	Release 2

# Key Activities



- Visual design standards were selected on 5/9 and branding is underway
- Hosting contract was awarded on June 1, 2014
- Completed a technical deep dive session with CMS on 6/17. Discussed technical platform, infrastructure and solution footprint. Meeting went well and no additional meetings or documentation required
- Completed the CMS gate review on 6/23. Successfully demonstrated integration with the Federal hub - able to verify SSN, income and identity. Had a successful system demo, and were able to demonstrate all required functionality
- Established new competitively awarded QA and PMO contracts effective 7/1
- Contracts with Scan Optics and Sir Speedy approved by the board on 6/30
- Schedule and milestones remain on schedule
- Working on options for renewals with Carriers
- Have completed 3 of 4 iterations of development
- Significant testing is factored into the process including unit, integration, user testing, and performance testing.
- On July 18, to facilitate transition, we will be retiring the external Curam application and using the internal portal through navigators and the call center and the SAIL program for enrollments into QHPs and Medicaid.



# Project Milestones - Completed



Milestone Date	Milestone Description	% Complete
April 15, 2014	Gain interim approval from CT to use CT test environments and CT HBX software	100%
	Begin conference room pilot sessions	100%
	Secure provisional software licenses for MD HBX lower environments	100%
April 30, 2014	Finalize CT software transfer MOU	100%
	Issue Task Order 1 – Data Center, Hosting and Disaster Recovery	100%
	Establish sandbox environment with running version of CT HBX	100%
May 15, 2014	Establish development environment	100%
	Receive Federal Hub credentials and test initial Hub connectivity	100%
	Complete draft version of gap analysis	100%
	Finalize deliverable schedule and contingency plan	100%
	Update CT capacity plan to reflect MD HBX capacity needs	100%
June 1, 2014	Complete conference room pilots and gap analysis for CT transfer items	100%
June 15, 2014	Document MD MMIS data exchange design	100%
	Establish integration testing environments	100%
June 23, 2014 (to accommodate CMS schedule)	Demonstrate integration with Federal Hub services in lower environment	100%
	CMS Gateway Review: Design	100%
July 1, 2014	Finalize software procurements	100%

# Project Milestones – Upcoming (as of 7/11)



Milestone Date	Milestone Description	% Complete
July 15, 2014	UAT and Training environments	73%
July 22, 2014	Staging Environment	45%
July 31, 2014	Training Plan	50%
	OCM and BT Plan	50%
	Initial Role Mapping Lists	40%
	First Draft Change Impact Assessment	45%
August 15, 2014	Begin carrier integration testing	0%
	Begin MMIS integration testing	0%
	Draft Training Materials to CMS	0%
September 1, 2014	Establish MD HBX Production environment and connectivity	0%
	Begin UAT for Plan Management	0%
	Perform initial plan data upload	0%
	Conduct performance testing	0%
September 8, 2014	Release Web-Based Training	0%
	Begin Train – the - Trainer	0%
September 9, 2014 (subject to CMS schedule)	CMS Gateway Review: Operational Readiness	0%
September 15, 2014	Release 2 UAT	0%
September 29, 2014	Release 2 Instructor Lead Training Materials to Print	0%
October 1, 2014	Plan Management goes live	0%
October 6, 2014	Release 2 – Instructor Lead Training Start	0%
November 15, 2014	Eligibility and Enrollment goes live	0%

# Risks



Risk	Mitigation
Gap is identified during business process design.	Ongoing dialog on business process (OCM) activities and development team on business processes that are not addressed by the system.
Staffing and skillset of team	MHBE continues to monitor Deloitte staffing and available resources. Additional changes have taken place to reinforce the Deloitte PMO and OCM areas. Additional leader brought on with deep technical and MD specific HIX experience.
Risk	Mitigation
One carrier is behind on the coding changes needed to complete the 834 interface. Integration testing with the Carrier is at risk.	Twice weekly working sessions with the carrier have been scheduled and are underway. Deloitte to dedicate EDI business rule SME.
Risk	Mitigation
Training and UAT environments must be accessible via the internet to support the OCM, training and testing activities based on the current plan and schedule	Deloitte is working on options for making the training and UAT environments internet accessible. Environments are not yet established. Fallback would be VPN. Currently MHBE does not have a suitable VPN solution, and training and testing would be severely impacted.

# Questions and Answers



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