



Medicaid Information Technology Architecture

February 10, 2003

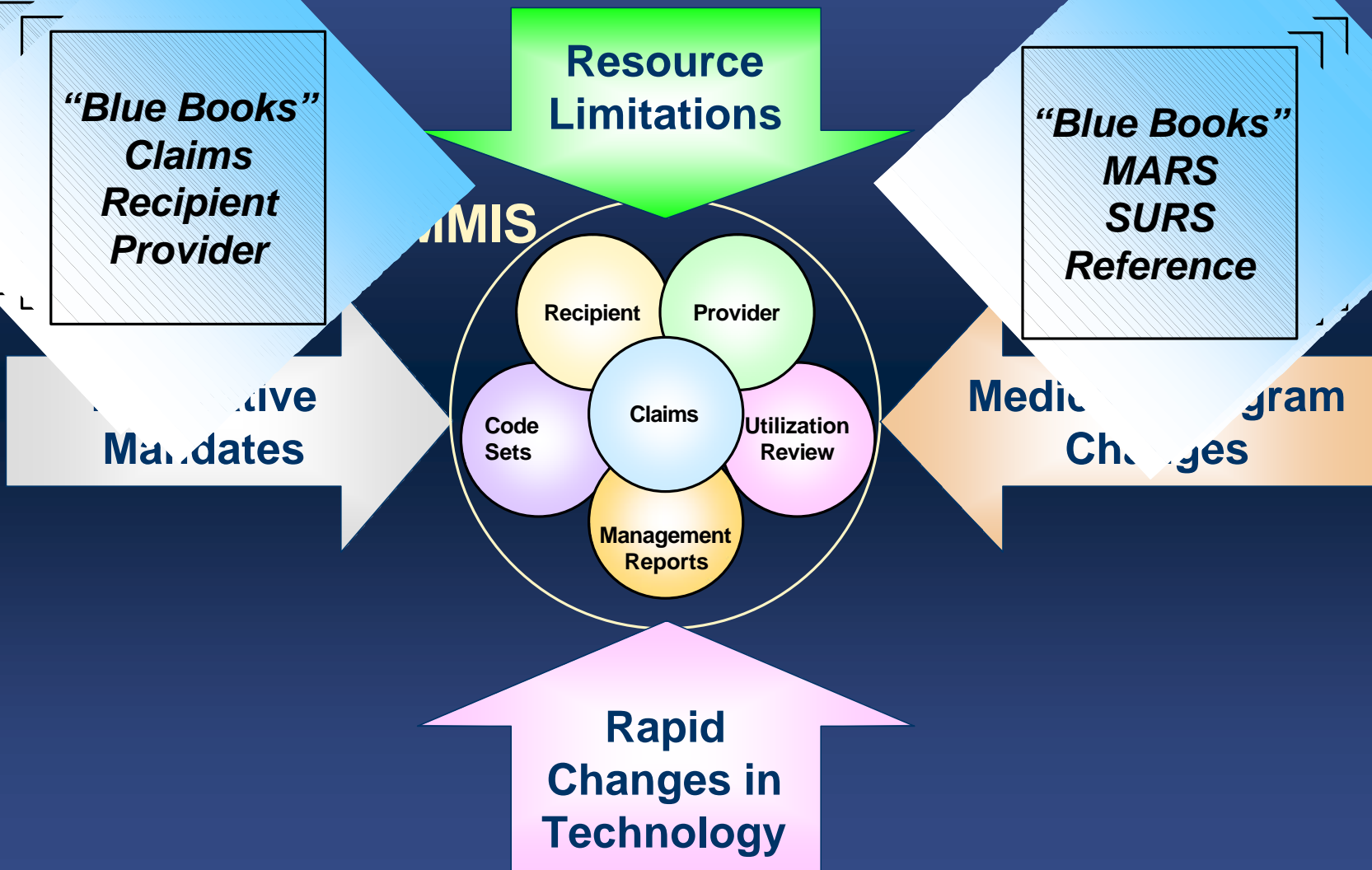


Agenda

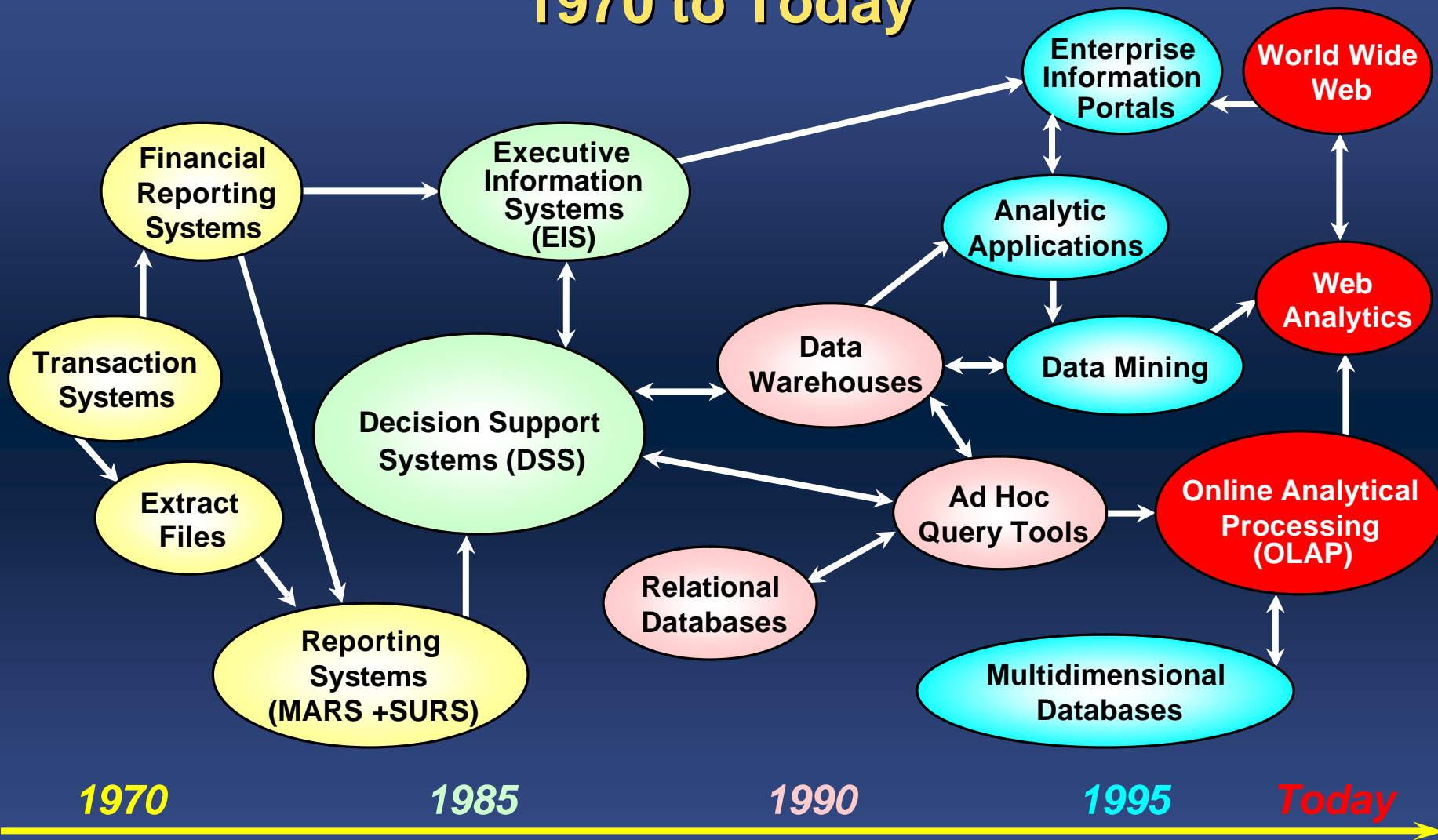
- **Where We Are Today**
- **The Vision for the Future**
- **How We Plan to Translate the Vision Into Reality**
 - **MITA Initiative**
 - **The Conceptual Architecture**
 - **The Approach**
- **What All This Means for States Over the Next 3 to 5 years**
- **Next Steps**

Where We Are Today

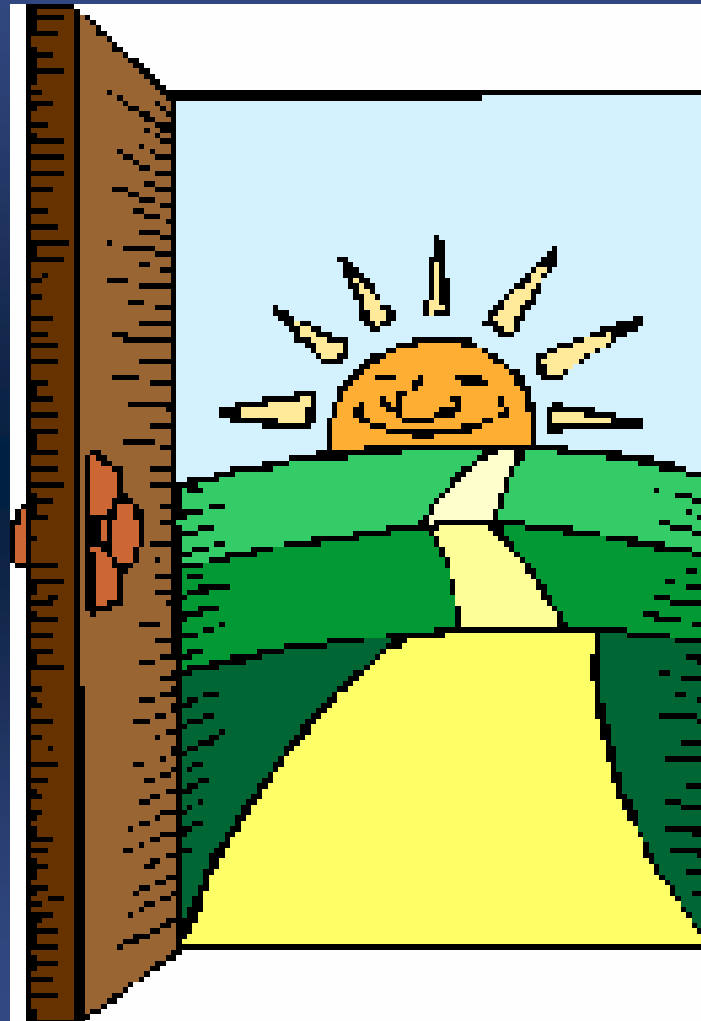
Driving Forces/Challenges



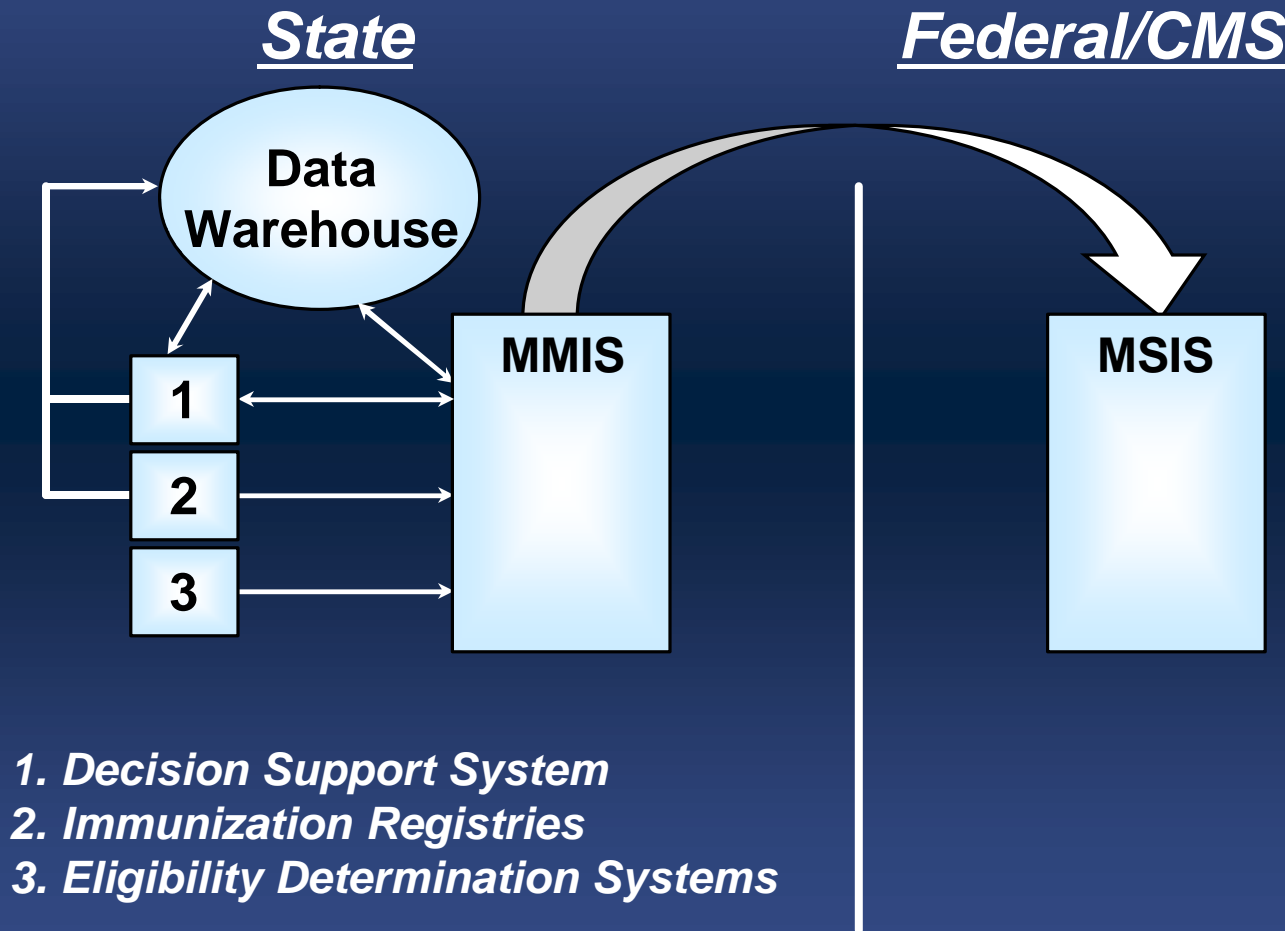
MMIS Evolution and Trends— 1970 to Today



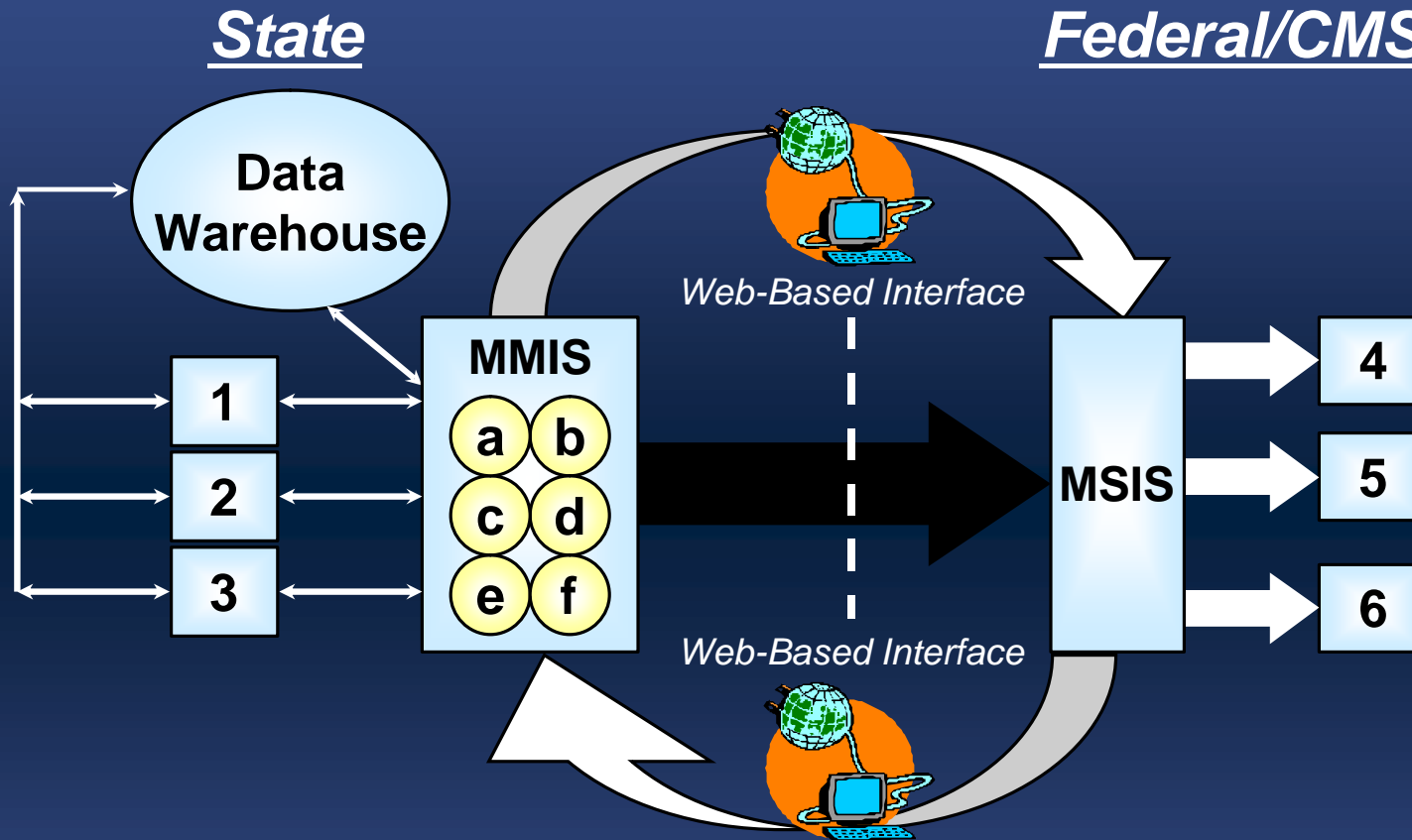
Vision for the Future



Current Medicaid IT Architecture



Planned Medicaid Systems Architecture

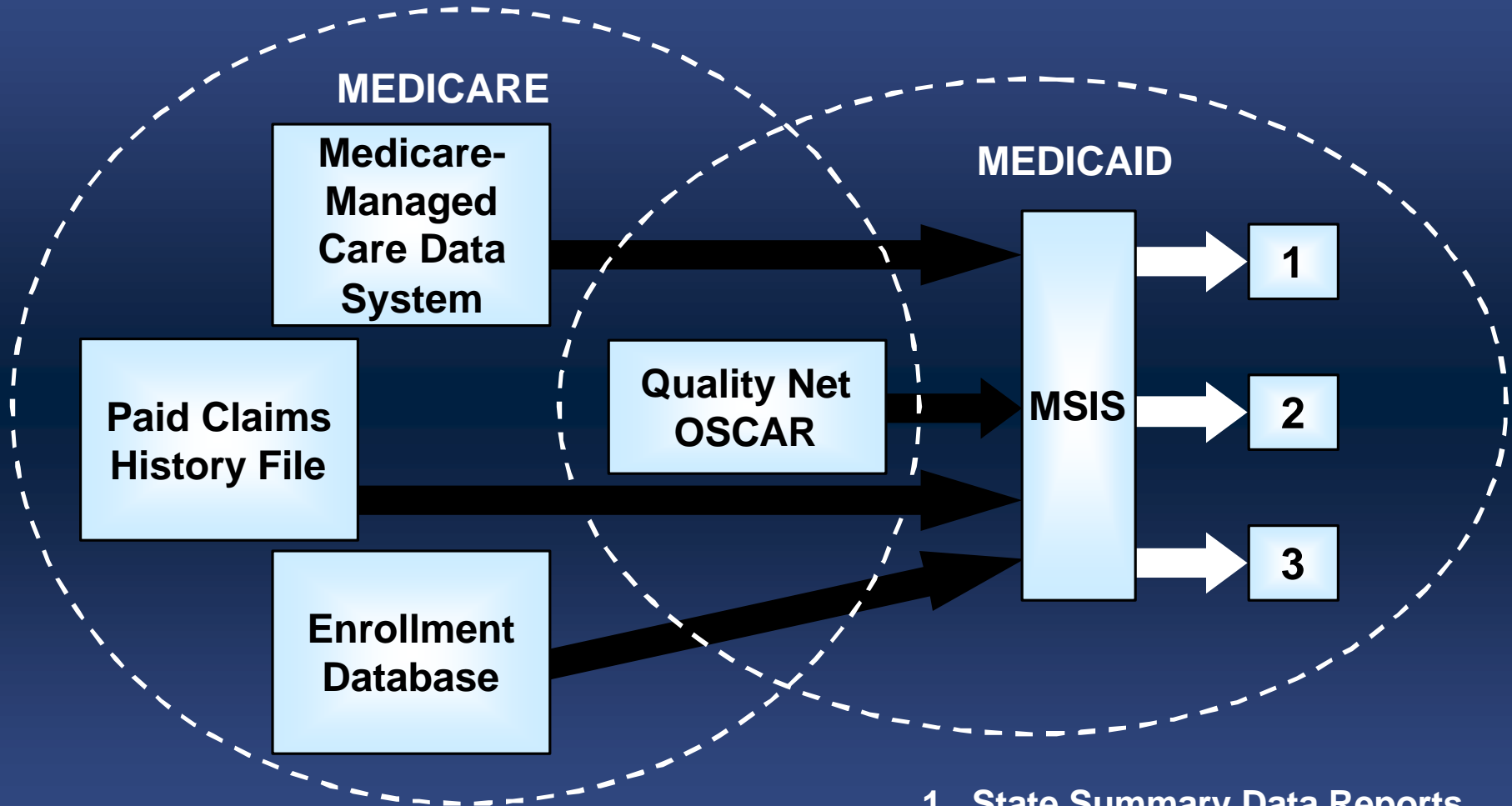


- 1. Decision Support System
- 2. Other Public Health Data Sets
- 3. Eligibility Determination Systems

- 4. State Summary Data Reports
- 5. Annual Person Summary
- 6. Clinical Services Data Marts

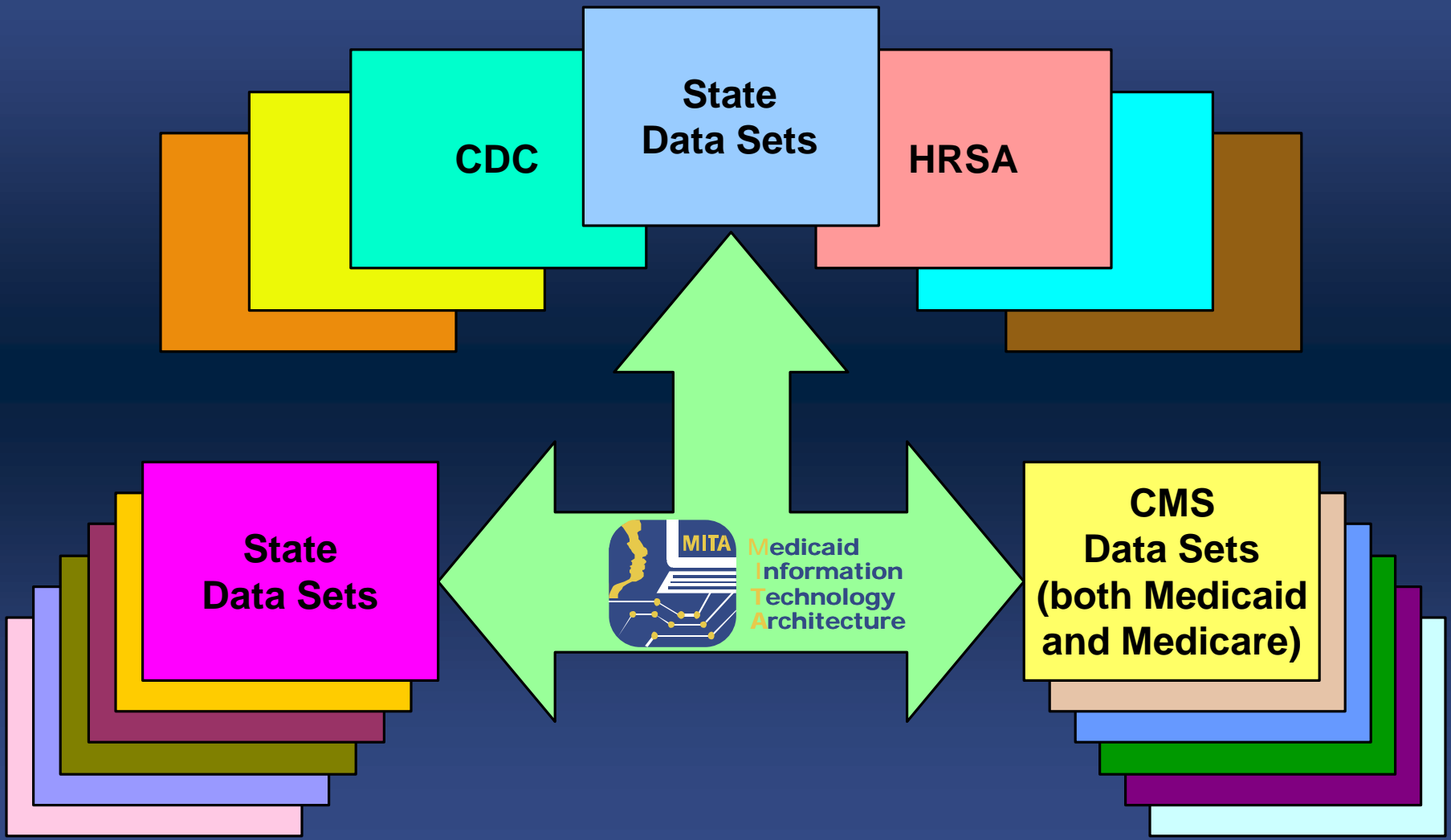
Note: States will be able to access data marts directly and the granular database through CMS on request.

Future CMS Medicaid + Medicare IT Data Sharing



1. State Summary Data Reports
2. Annual Person Summary
3. Clinical Services Data Marts

Inter-Agency Data Sharing



How We Plan To Translate The Vision Into Reality

The MITA Initiative

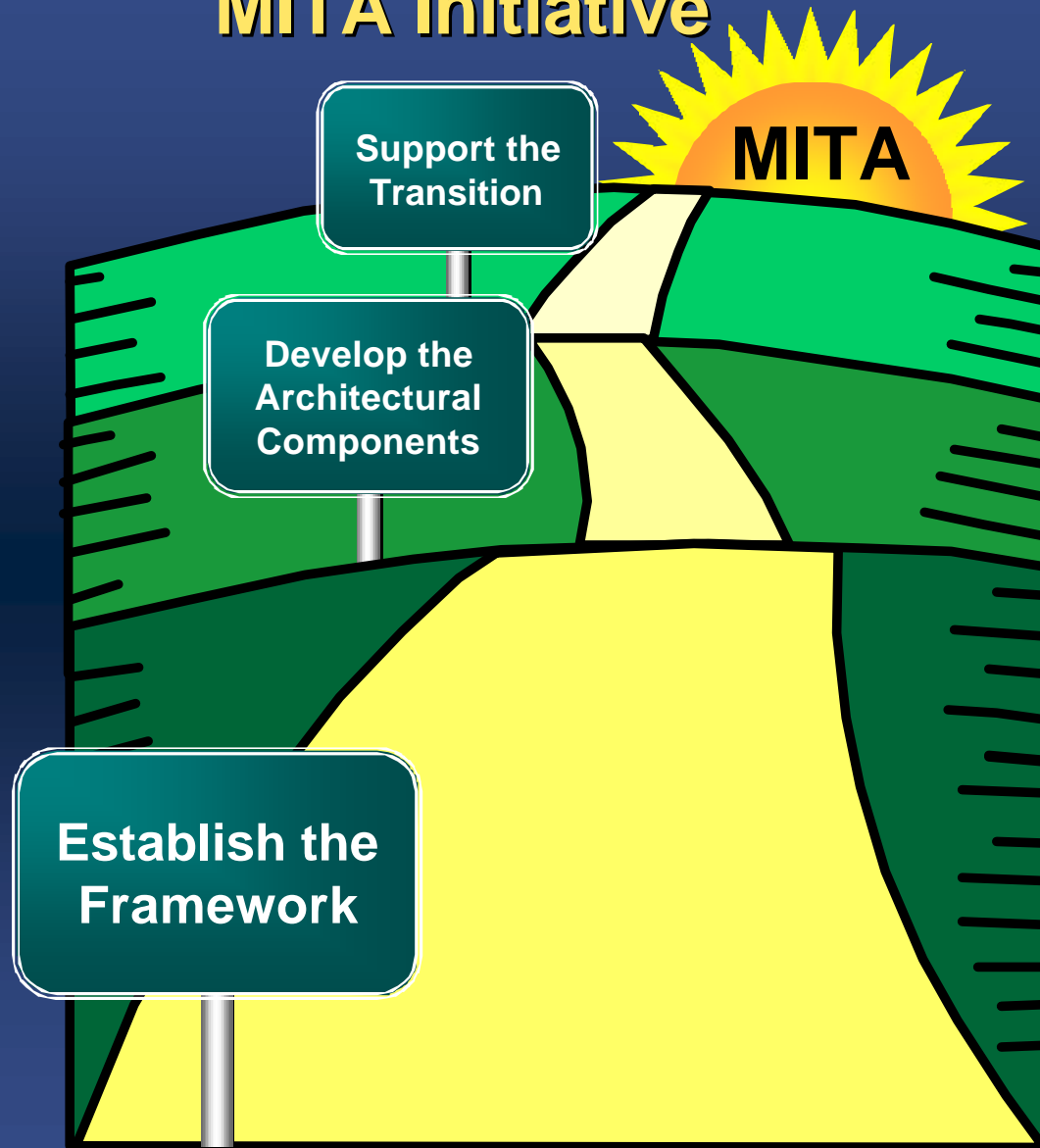
The MITA Initiative

A national framework supporting improved systems development and health care management for the Medicaid enterprise

MITA Initiative Key Principles

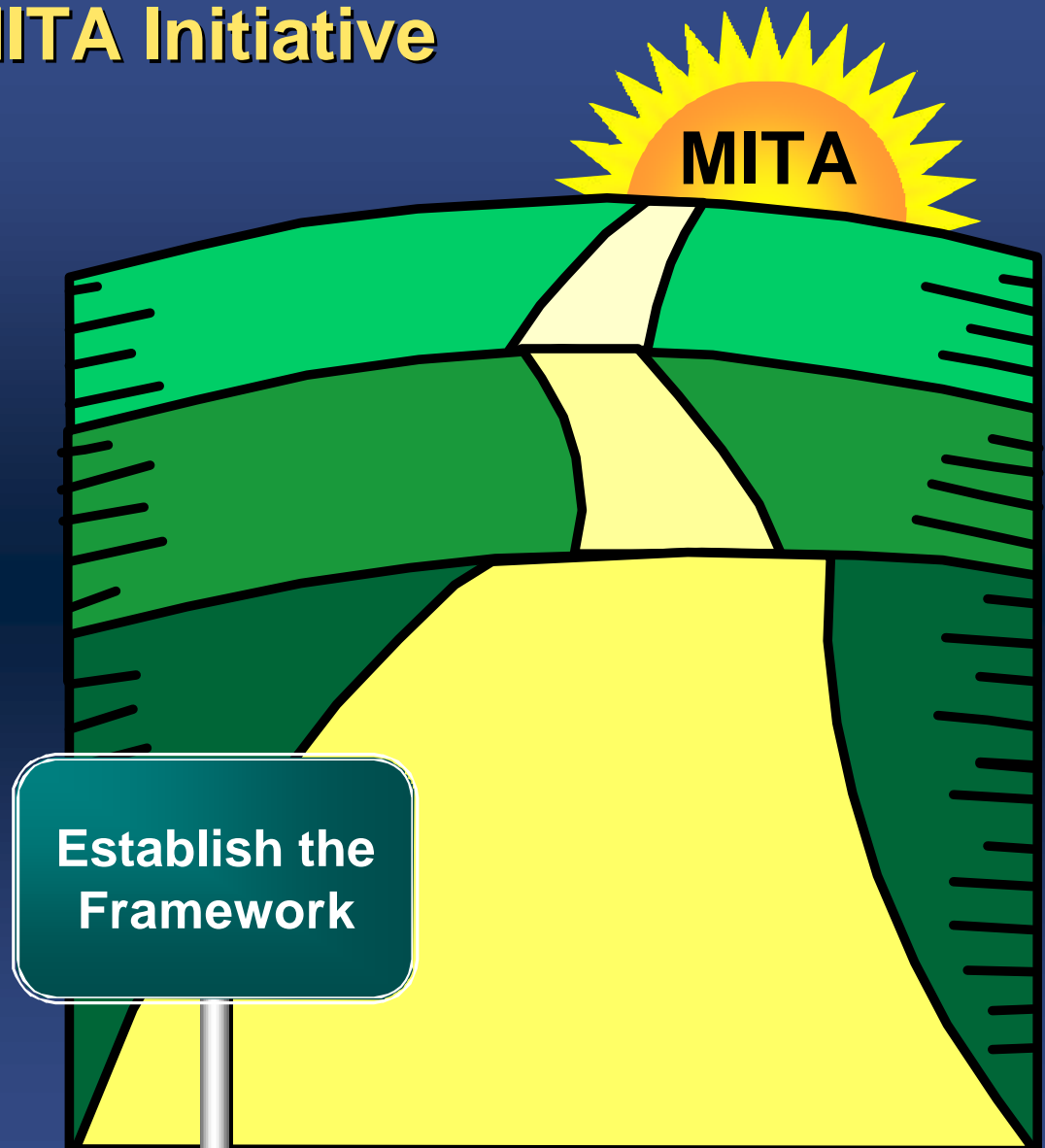
- Data Sharing
- Reusable Components
- Modularity
- Open Architecture
- Standards
- Collaboration
- Security

MITA Initiative



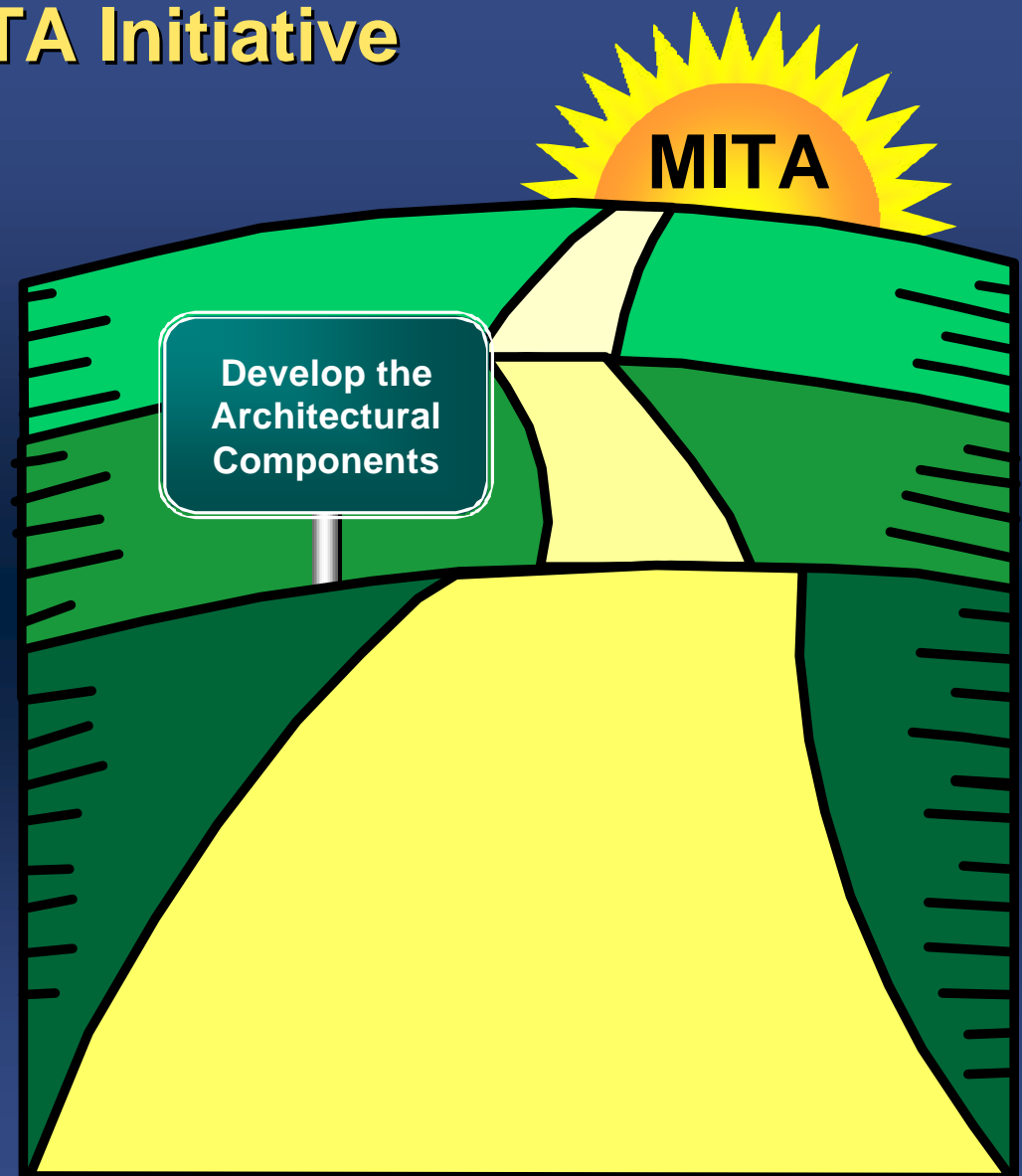
MITA Initiative

- Strategic Plan
- Conceptual Architecture
- MITA Steering Committee
- MITA Technical Group
- Review Policies
- Methodology Guidelines
- Publicize and Market



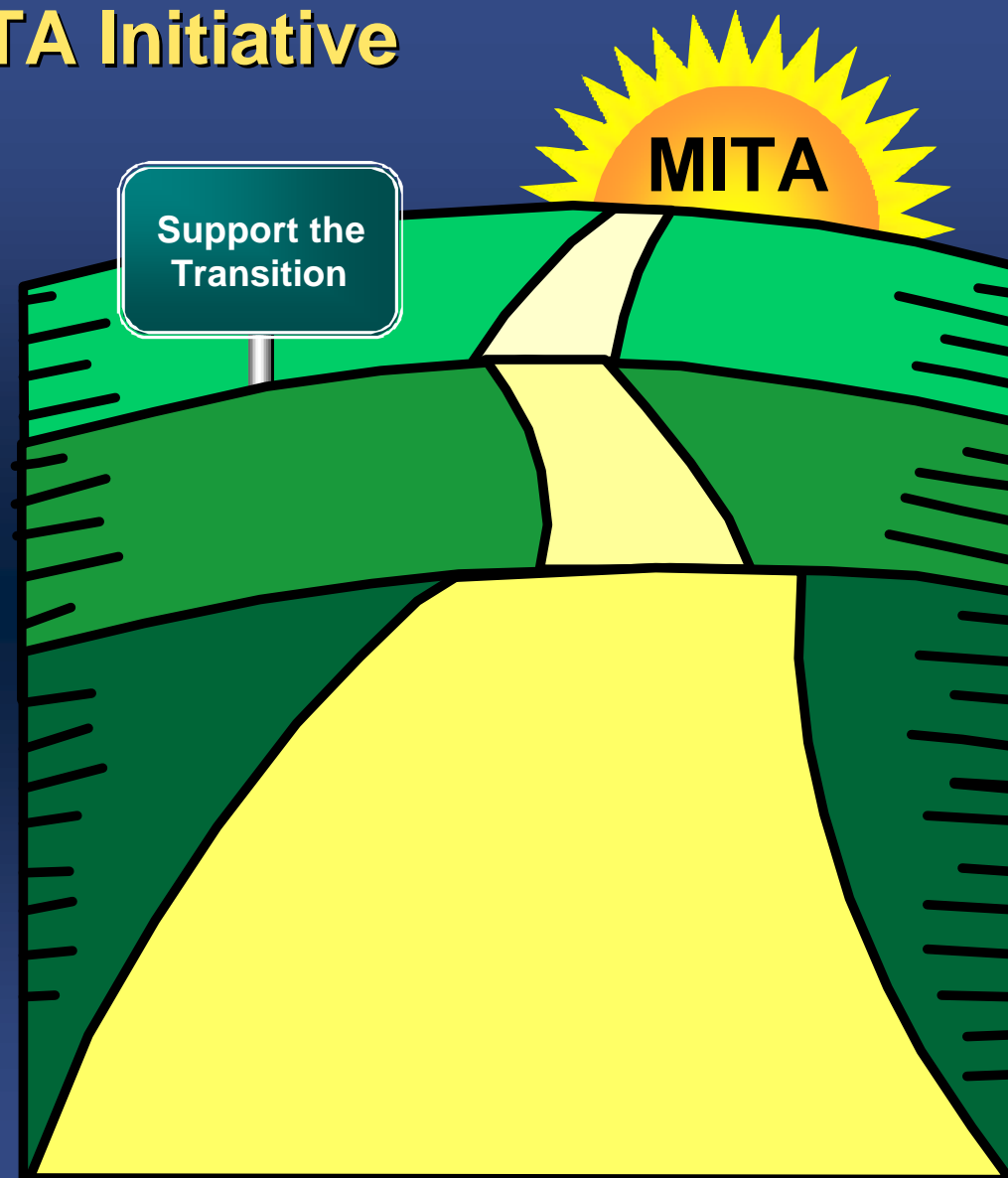
MITA Initiative

- Common Requirements
- Implementation Standards
- Reusable Components
- Enterprise Process Model
- Enterprise Data Model

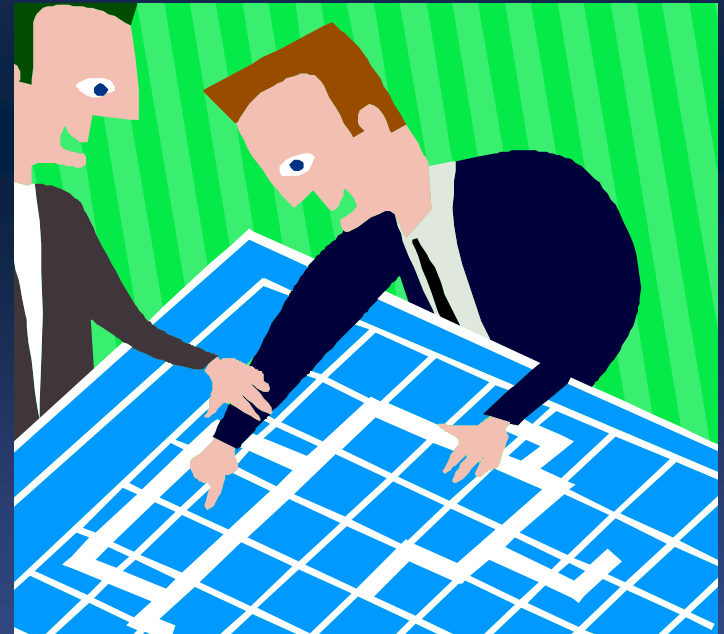
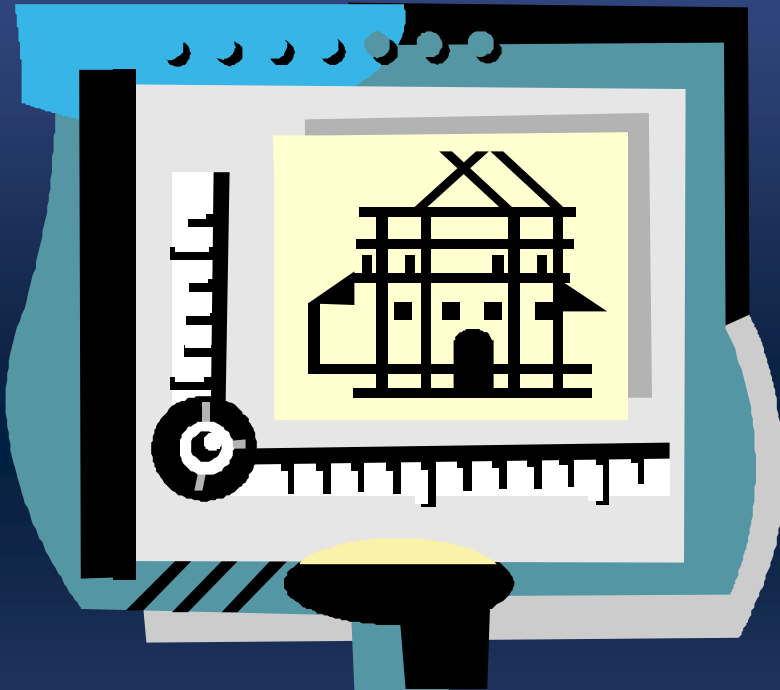


MITA Initiative

- Transition Plan Template
- Other Tools and Templates
- Education



The Conceptual Architecture



Establish the Framework— Conceptual Architecture

The goal is to provide the states with a conceptual architecture which will serve as a framework for improved system development and data exchange within and among states, federal agencies, and other health care partners.

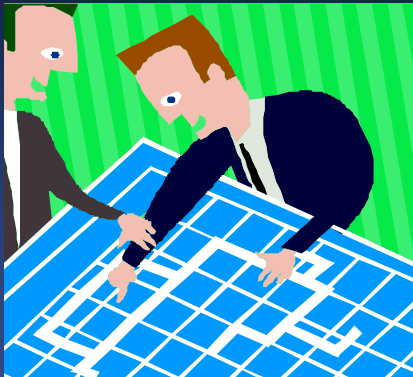
What Is the MITA Conceptual Architecture?

- **MITA IS NOT:**

- Installable software
- Mandated requirements
- A single mold (one size does not fit all)
- A model system

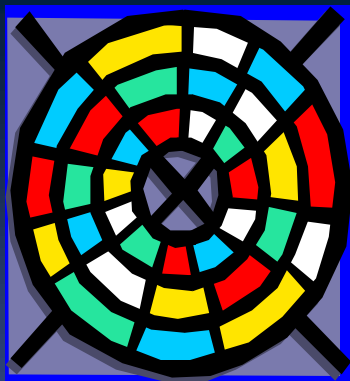
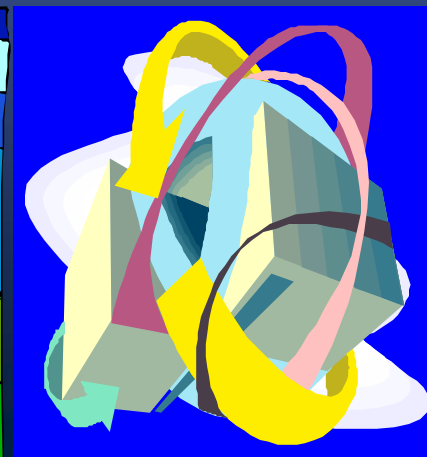
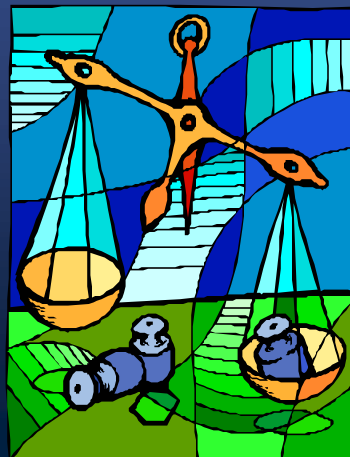
- **MITA CAN BE
(WITH YOUR HELP):**

- Guidelines incorporating new technology
- Roadmap for implementation
- Consensus on what should be required when systems are replaced



Key Principles—Making Them Real

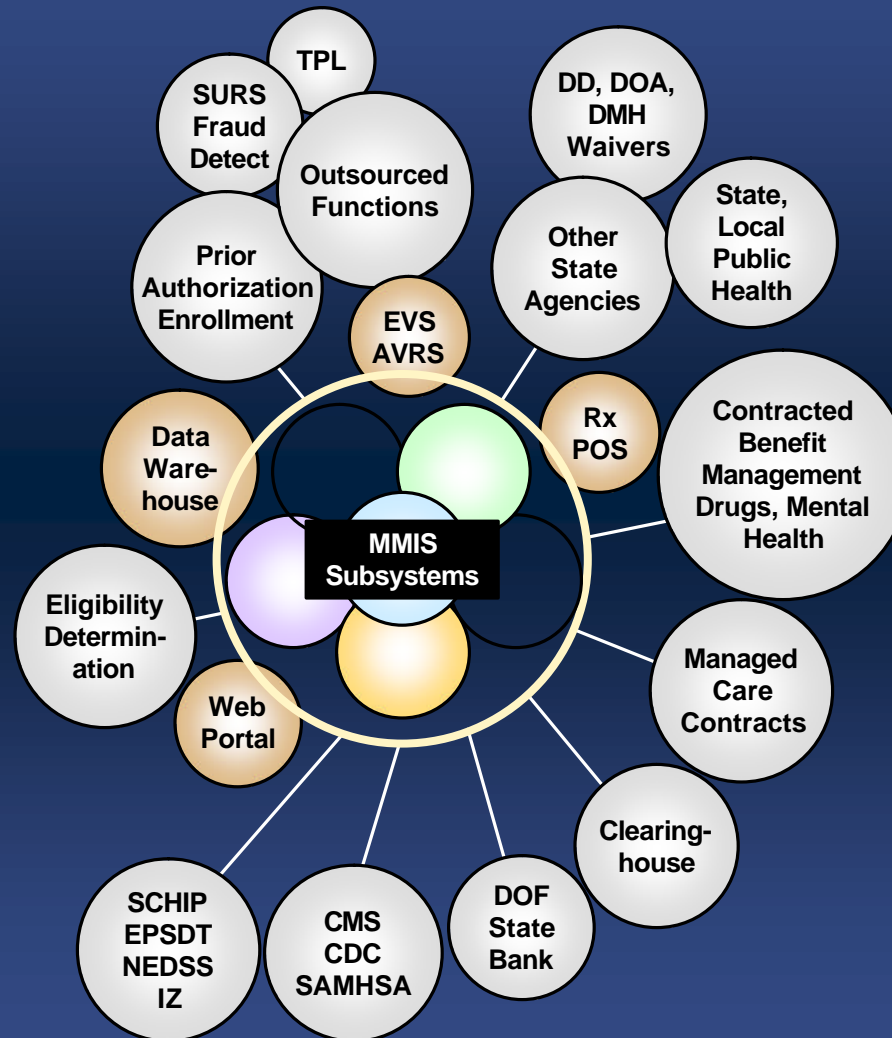
- Standards
- Reusable components
- Multi-centric



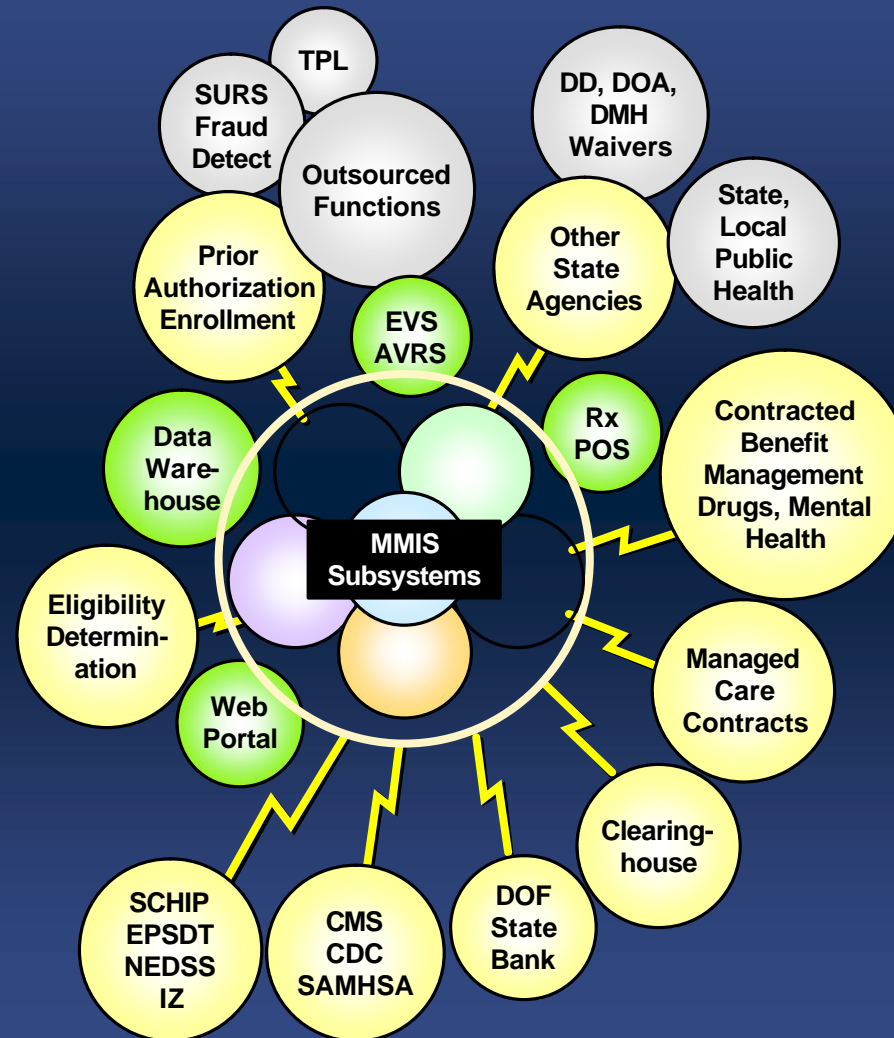
Conceptual Architecture—Past



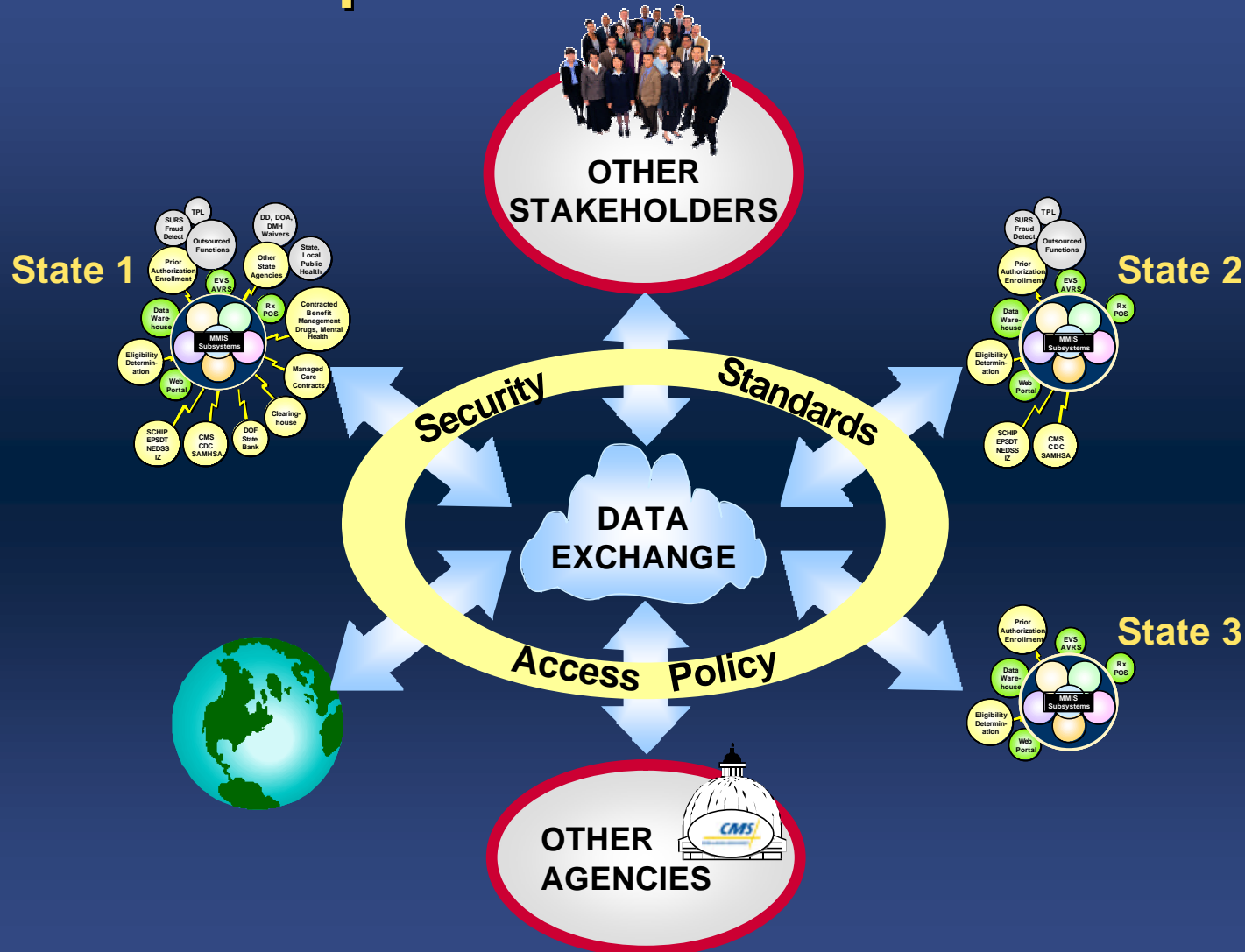
Conceptual Architecture—Past



Conceptual Architecture— Bridge to the Future

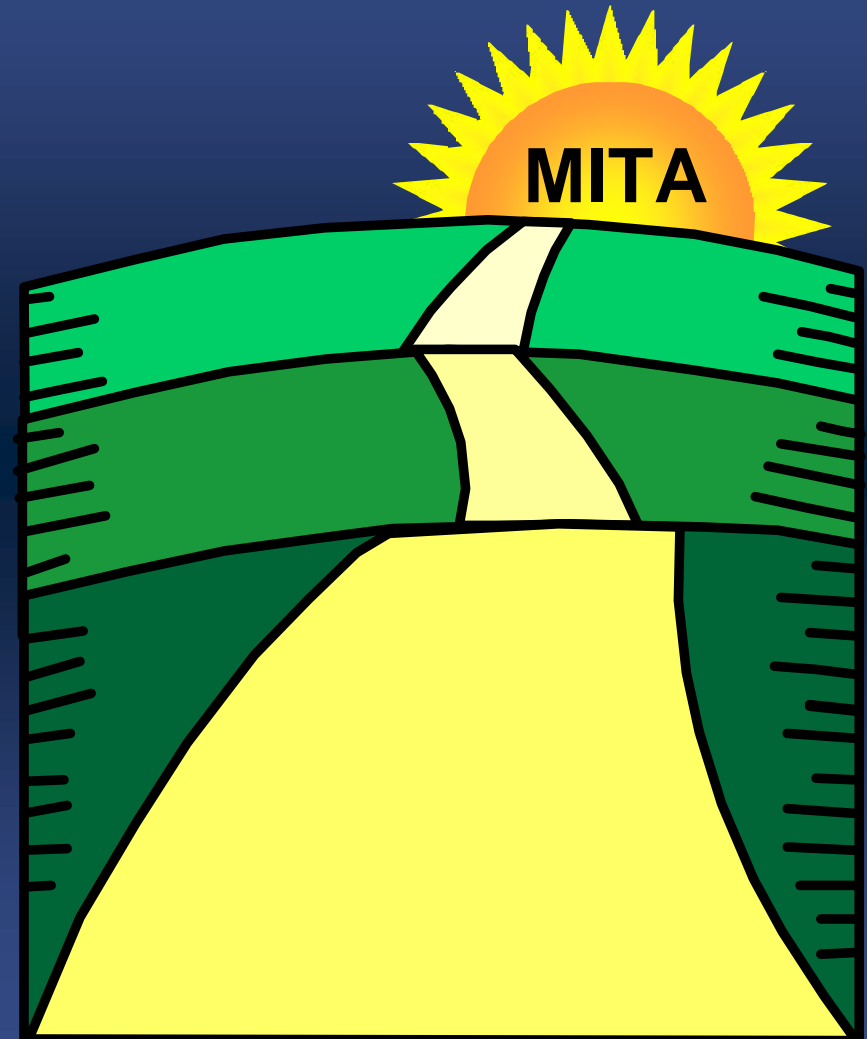


Conceptual Architecture—Future



From Concept to Approach

- What the Conceptual MITA will look like
- How we plan to build it

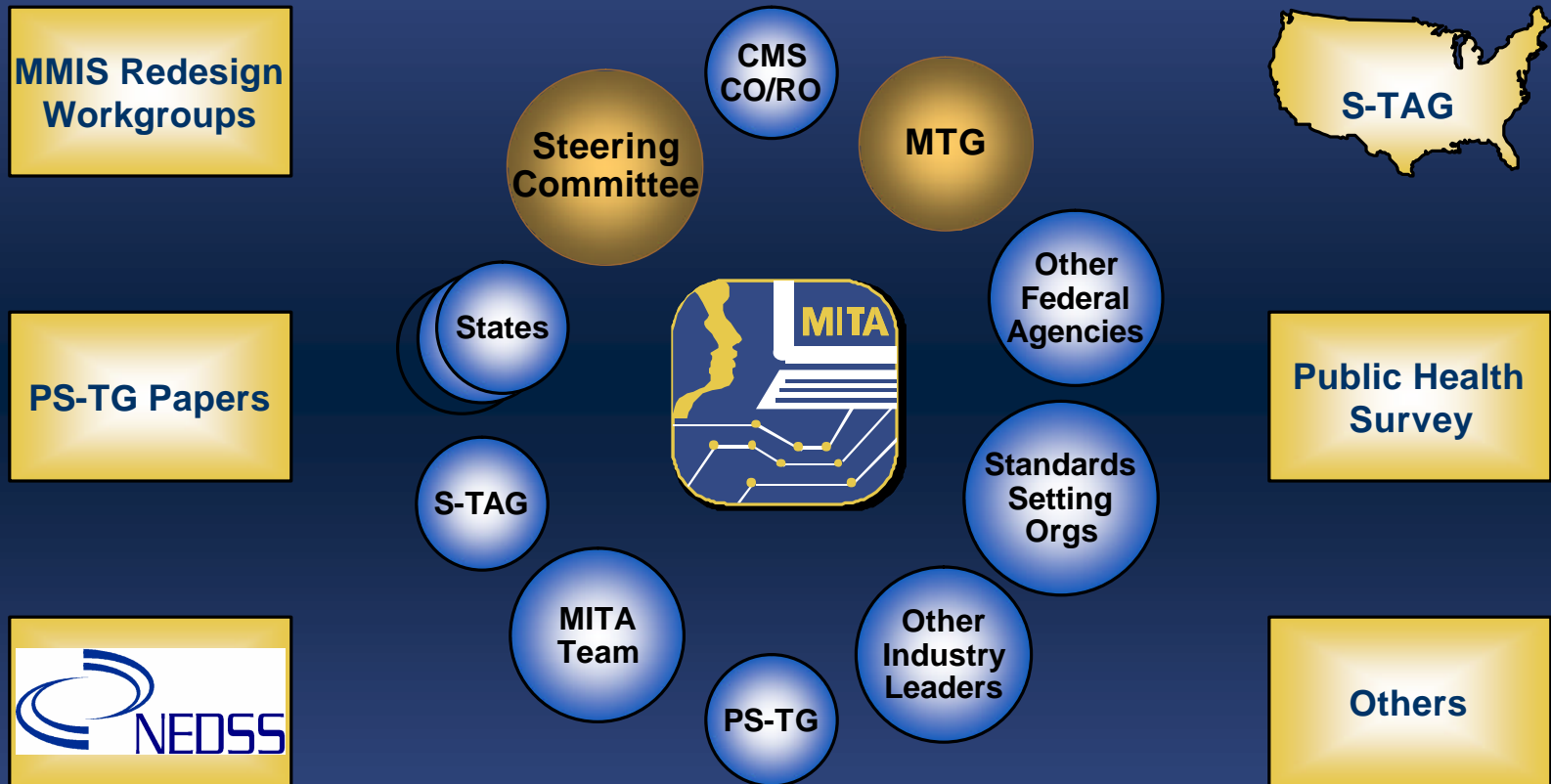


The Approach

Conceptual Architecture—Approach

- **Build Partnerships**
- **Leverage Work Done to Date**
- **MITA Project Process**
 - **Data Collection**
 - **Analysis and Design**
 - **Validation**

Conceptual Architecture Approach

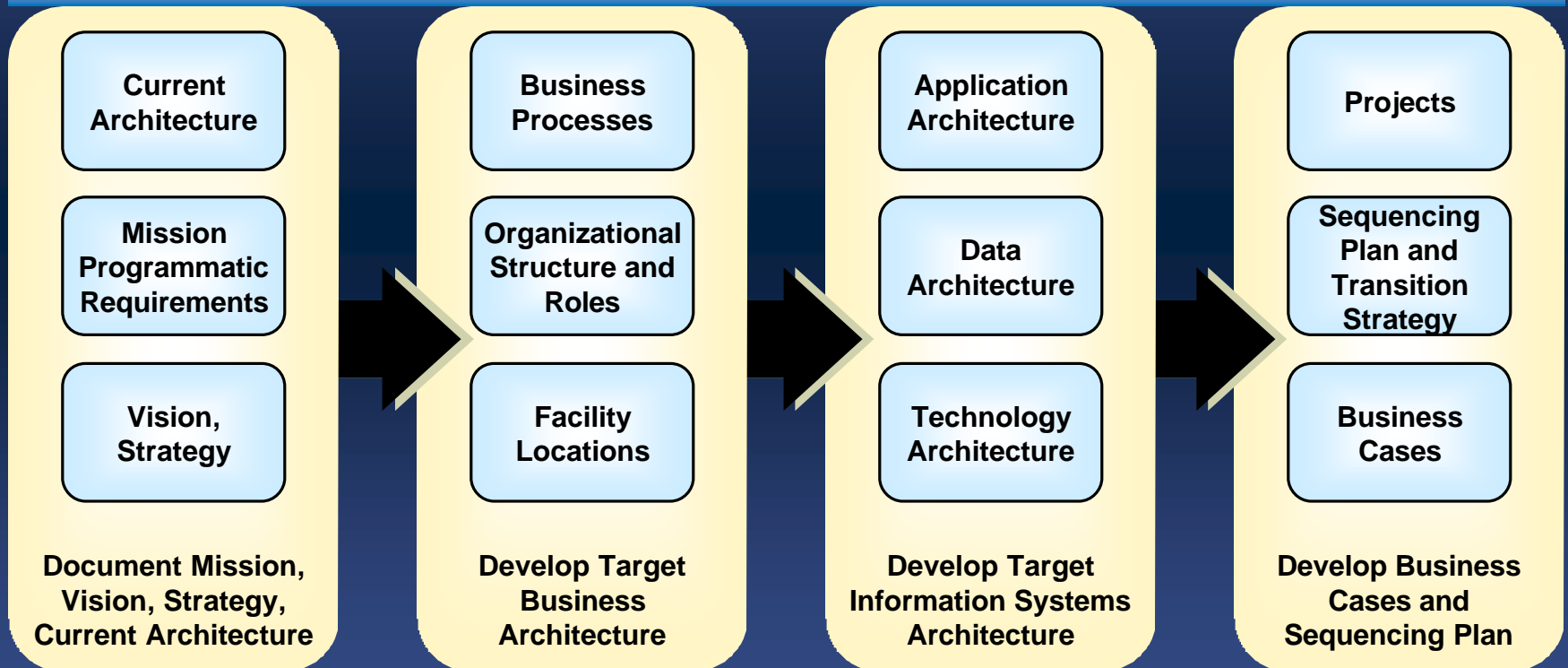


Conceptual Architecture— The Process

Data Collection

Analysis and Design

Validation



Conceptual Architecture— The Process

Data Collection

Analysis and Design

Validation

What All This Means for States and CMS Over the Next 3 to 5 Years

Why Is the MITA Initiative So Important?

MITA will enable:

- **Improved managing and monitoring of programs through the sharing of data**
- **Efficient use of scarce resources through the development and sharing of reusable software**
- **Quick response to changes in programs**
- **Greater access to high-quality data**

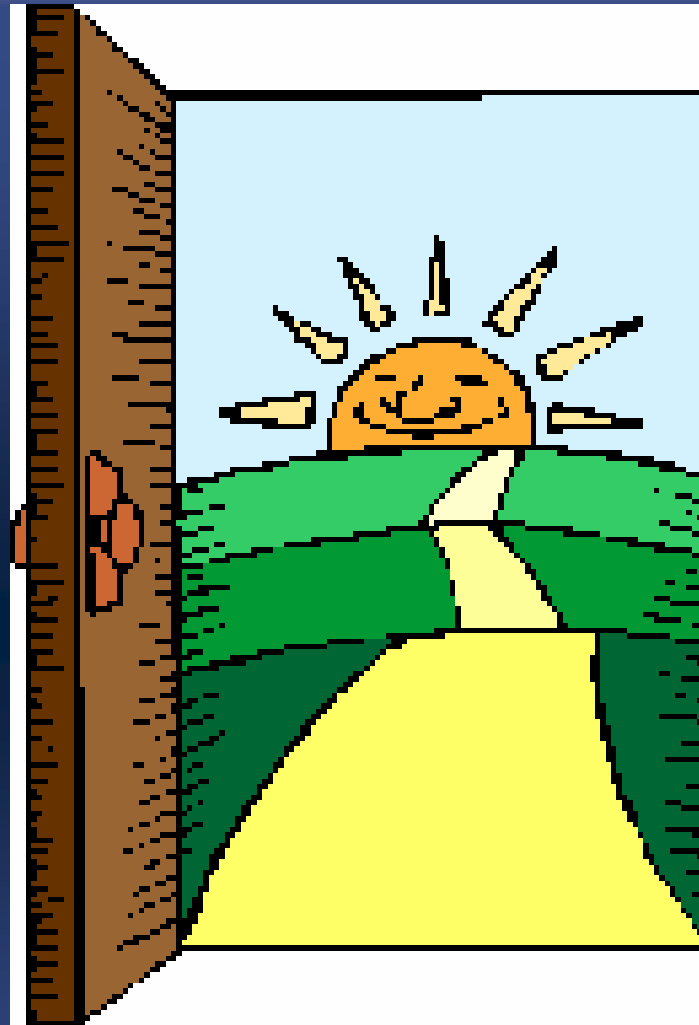
Why Now?

- No better time than now to improve our systems and realize the benefits of improved effectiveness and efficiency
- Wait too long and the cost of deferred modernization becomes so steep that catch-up is unaffordable
- Great strides have been made in data standardization—we can benefit NOW
- Achieve a significant return on our investment TODAY
- MITA can make the business case to CMSO senior leadership about how we can redefine the MMIS boundaries and create appropriate financial incentives to support the vision

We Need Your Help

Sunday	Monday	Tuesday	Wednesday	Thursday
		Bridge to the New Architecture	MITA Focus Group: Industry Visioning Session MITA Focus Group: State Visioning Session	Report of Visioning Session Results
Lunch Break				
MITA Meeting with S-TAG, NMEH, and PS-TG Members	MITA Overview NEDSS and the Medicaid IT Architecture – Complimentary Initiatives			

MITA Room (Cabildo C)—Questionnaire



MITA is a journey, not a destination.

MITA

Share the Vision

Chart the Course

Shape the Future

