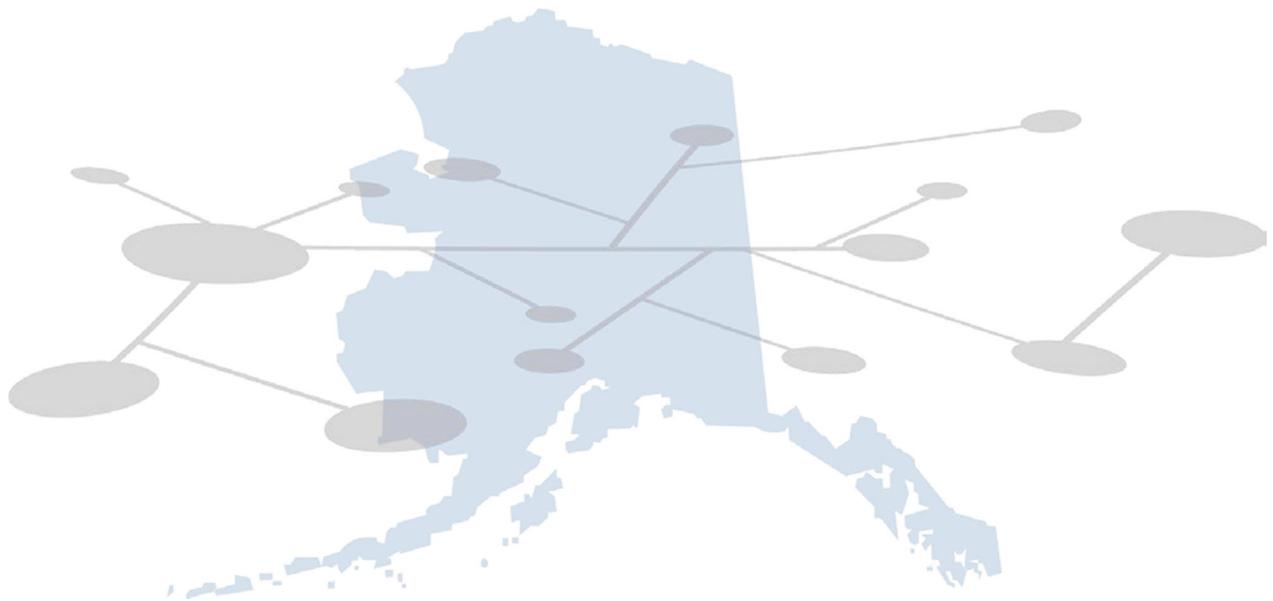


# Alaska Medicaid Management Information System (AK MMIS)

Update – March 2019



**Systems and Analysis Unit**  
Division of Health Care Services  
Department of Health and Social Services



**Alaska Medicaid Management Information System (MMIS)**  
**Update – March 2019**

**Background**

In October 2013, the Department of Health & Social Services went live with a new Alaska Medicaid Management Information System (MMIS) solution. Conduent implemented the solution and is the fiscal agent for MMIS operations. The primary goal was to phase down a legacy MMIS at the end of its life cycle. Customization to the new system included new functionality and consolidation of multiple data interfaces from other systems, creating one framework for Medicaid related services for providers, patients, Medicaid operations and State of Alaska (SOA) staff.

Some new AK MMIS features include, but are not limited to:

- Web-based user interface
- One suite of applications accessed through single sign-on
- Secure/controlled access
- High availability, except for planned maintenance outages
- Relational database
- Real time adjudication
- Configurable for future growth and functionality
- Data replication nightly
- Concurrent execution of major processes
- Direct access to images and attachments
- Support of multiple financial cycles
- Fee-for-service processing
- Provider web portal
- Electronic Funds Transfer (EFT) option for provider payments

Although the October 2013 MMIS “go-live” presented some program and operational challenges, both SOA and Conduent teams continued to work together to improve effectiveness and efficiency over the succeeding months. Today, the joint team is committed to ensure 215,000 Alaskan Medicaid members continue receiving healthcare services without interruption.

While working through the post implementation challenges of the MMIS and planned functions, other enhancements and system changes are under development or were deployed into the MMIS:

- |   |          |
|---|----------|
| • IRIS: New State accounting system         | Jul 2015 |
| • Medicaid Expansion                        | Sep 2015 |
| • International Code of Disease 10 (ICD-10) | Oct 2015 |

# Alaska Medicaid Management Information System (MMIS)

Update – March 2019

Page 3

• Transformed Medicaid Statistical Information System (TMSIS)	July 2017
• Social Security Number Removal Initiative (SSNRI)	April 2018
• HIPAA Operating Rules (HOPR)	July 2018
• Automated Service Authorization Portal for Dental Services	In Progress
• Managed Care Initiative for Anchorage and Mat-su Region	In Progress
• 1115(a) Waiver for Behavioral Health Services	In Progress
• Enhanced Medical Claims Physician Administered Drug Editing	In Progress
• DRGs for Payment of Inpatient Claims	Just Started
• Enhanced Provider Enrollment Portal	Just Started
• Decision Support System	Just Started

A 3-month cycle was instituted to address system defects and allow for vetted change requests needed by system users. The Configuration Control Board is a joint planning, approval and management team lead by the SOA and Conduent. The 3-month cycle has quality review throughout the development cycle to ensure technical solutions are correct while trying to prevent collateral defects through regression testing. Though the process is stringent and time bound on scheduled milestones, there is still flexibility to allow for “hot fixes” when a priority issue requires immediate attention. This is a collaborative and thoughtful process that continues to produce good results.

## **AK MMIS Current Status**

The MMIS was certified by CMS on September 28, 2018. This allows the State to receive 75 percent federal funds for the operation and maintenance of the MMIS rather than 50 percent federal funds for an uncertified system.

Current Medicaid claims production cycles process an average of 9 million claims a year for an average of \$42 million each week.

There are currently 74 known defects and the number has been steadily declining over the past 6 months.

Enterprise is processing claims correctly at an average rate of over 99 percent.

Several projects currently being worked are anticipated to have a positive budgetary impact, including the Managed Care Initiative, the 1115(a) Waiver for behavioral health services, DRGs for payment on inpatient claims, and the medical claims physician administered drugs editing.

Other ongoing projects will increase efficiency and decrease administrative burden for the providers. These include the automated service authorization portal for dental services and the enhanced provider enrollment portal. The automated service authorization portal will allow providers to enter the information directly into the system and receive their approvals quicker.

The enhanced provider enrollment portal will allow providers to request updates to their provider enrollment records electronically and will result in more accurate enrollment data and timely claims payment. These projects should enhance processes for providers and recipients alike.

### **Federal Certification**

Paramount to the viability of the Medicaid program in Alaska is maximizing federal funds available through a matching program. A critical milestone for the AK MMIS was a successful Centers for Medicare & Medicaid Services (CMS) certification that directly affects the federal matching funds allowed to our state. Federal certification was received for the MMIS on September 28, 2018 allowing the State to receive 75 percent federal funds for the operations and maintenance of the system.

Federal MMIS certification is the procedure by which CMS validates that the State Medicaid Claims Processing systems support the efficient and effective management of the program and satisfy the requirements set forth in Part 11 of the State Medicaid Manual, as well as subsequent laws, regulations, directives, and State Medicaid Director letters. The certification process also validates the systems are operating as described in the prior approval documents, i.e., Advance Planning Documents, Requests for Proposal, and all associated contracts submitted to CMS for the purpose of receiving Federal Financial Participation (FFP).

### **Financial Impacts to the System**

The CMS authority for requiring Federal certification is based, in part, on language found at Public Law 92-603, and the Code of Federal Regulations (CFR) at 42 CFR 433 and 45 CFR 95.611(d). In the absence of Federal certification, Medicaid systems are not authorized to receive enhanced Federal matching funds for their operation. While the MMIS onsite visit has historically been viewed as the final litmus test of a system's operational effectiveness, the development process leading up to Federal certification is critically important.

In September 2016, officials from CMS, Division of Health Care Services (DHCS) along with senior Conduent leaders, experienced certification project leads, subject matter experts, business analysts and a multitude of augmenters and partners joined together to support the CMS certification onsite visit. Artifacts and documentation were collected, interviews and meetings were conducted to capture/inventory relevant data and gain an understanding of the current posture and security of the MMIS. Much preparation occurred ahead of time, and this, along with the presentations during the certification visit week, allowed for an effective and positive review by CMS. It is also noteworthy that throughout the entire certification process, CMS has been very supportive and thoughtful in providing feedback to position the MMIS for a favorable certification.

After significant work effort by the Division of Health Care Services management and staff, all action items were addressed and federal certification was completed on September 28, 2018.

### **AK MMIS Stability**

Critical for the success of the Medicaid program in Alaska is the availability, stability, accuracy and security of the MMIS. The system continues to evolve and changes have been implemented to improve processes, correct defects and enhance overall functionality.

System availability continues to remain relatively high. There is an ongoing effort to improve system speed and performance while keeping scheduled and unscheduled downtimes to absolute minimum levels.

Looking towards the future of the Alaska MMIS, it is critical to maintain all hardware and software associated with the operation of the MMIS in order to maintain the level of stability currently achieved. At this time, much of the hardware and software used to support MMIS processing is approaching end of life. The beginning stages of a technical stack upgrade have been initiated which will move the MMIS from a physical box structure to a virtual hardware structure. This will allow the move from a 32 bit to a 64 bit middleware tech stack which will reduce overall triage times and enhance performance. This will also provide the flexibility to commission and decommission virtual environments quickly and at a lower cost.

### **Claims Processing and System Accuracy**

The primary focus of claims processing is to ensure claims are correctly processed within federally mandated timeframes so providers can be paid promptly for care they provide. Many provider organizations rely heavily on timely and prompt Medicaid payments for their revenue cycles. Delays caused by claims held in suspense or other reasons can create financial difficulties for providers.

Overall claims processing has improved significantly, particularly the total number of claims suspended over 120 days and over 60 days. Overall, over 99 percent of all Medicaid claims are paid within 60 days with the performance improving each month. This gives Alaska providers confidence in planning their revenue cycles knowing that Alaska Medicaid is one of the quickest payers in the state.

### **Next Steps**

Our goal is to have an accurate, efficient system to pay Medicaid providers who deliver critical health services to Alaskans. In order to maintain this type of system, the Division of Health Care Services will be heavily focused on completing the technical stack update. In addition, the Division will be working with a third party vendor to complete a MITA 3.0 State Self-Assessment. The results of this assessment will be used to evaluate business processes that are supported by the MMIS and identify areas of improvement with those business processes. This will provide the Division with a roadmap for future system enhancements.

The provider enrollment portal and the decision support system have already been identified as problem areas where significant efficiencies could be obtained. The Division has participated

in numerous demonstrations and review of proposals to identify a cost-effective, user-friendly solution in each of these areas that will meet the State's needs. Contracting should begin in the near future to begin moving forward with design and implementation for these upgrades.

### **Summary**

Much effort, investment and collaboration has been and will continue to be made to improve the MMIS and Operations. There is a strong focus and active involvement by Conduent top leadership, along with a dedicated account team and SOA leadership, to make sure that the MMIS Fiscal Agent is effectively supporting the Alaska Medicaid program, the providers and ultimately the Medicaid members. There is a concerted effort to address concerns quickly, collaboratively and in a results oriented manner.

The success of the MMIS for Alaska is dependent on successful partnerships and teams to meet the challenges today and in the future that will, amongst other things, maintain CMS certification to maximize federal investments to Alaskans while also allowing the growth of an expanded Alaska Medicaid member population.

Overall the MMIS is on the right track. Alaskans are realizing the benefits from the new system. Medicaid change will continue and there will be continued evolution and fine tuning of process, tools and skills. Working together, with common goals, shared commitment and vision, much can be done to support Alaskan provider organizations and the Medicaid members they serve.