

Medicaid Management Information
Systems
Enterprise Objective Monitoring and
Control Services

Puerto Rico Medicaid Information Technology Architecture State Self-Assessment Report



GOVERNMENT OF PUERTO RICO

Department of Health
Medicaid Program

Puerto Rico Medicaid Program

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1.0 Executive Summary

The Puerto Rico Department of Health (PRDoH), Puerto Rico Medicaid Program (PRMP), and Administración de Seguros de Salud de Puerto Rico (ASES) have expressed desire to advance Medicaid Information Technology Architecture (MITA) maturity levels through process and technology improvements. PRMP conducted its initial MITA State Self-Assessment (SS-A) in 2015. The MITA vision includes goals for improvement of data quality and data integration across the Medicaid Enterprise. The MITA SS-A is intended to provide insight into existing processes, identify potential areas for improvement, and assist PRMP in making strategic decisions to advance MITA maturity across the Puerto Rico Medicaid Enterprise (PRME).

Since the MITA SS-A in 2015, PRMP implemented the Puerto Rico Medicaid Management Information System (PRMMIS) and automated data transfer and validation processes resulting in increased data quality and reliability. As a result, individual capabilities in several business process areas experienced MITA maturity increases.

The 2019 MITA SS-A Annual Update assessed the PRME based upon an As-Is environment time frame between November 2019 and July 2020. The 2019 MITA SS-A Report provides information in the following sections:

- Section 2 – Puerto Rico (PR) MITA SS-A Background – provides an overview of the PRME, MITA, a summary of the 2015 MITA 3.0 SS-A, and the 2019 MITA SS-A Annual Update
- Section 3 – 2019 MITA SS-A 3.0 Toolkit – provides information on the project documentation, business process review, 2019 Annual Update materials, and validation materials
- Section 4 – PR Medicaid Enterprise Concept of Operations (COO) – provides information on the concept of operations and the vision for PRME; lists stakeholders and data exchanges; and identifies drivers and enablers, the As-Is and To-Be environments, and business improvements.
- Section 5 – 2019 Annual Update Assessment Results – provides an overview of the Business Architecture (BA) and the business assessment; BA profiles; and a list of business area owners, BA development, and gap analysis
- Section 6 – Business Assessment Summary – provides an update for each of the MITA business areas
- Section 7 – Information Architecture (IA) Update – provides an update on the PRME IA and components
- Section 8 – Technical Architecture (TA) Update – provides an update on the PRME TA and components

- Section 9 – Seven Standards and Conditions Update – provides an update on PRME support of the MITA Standards and Conditions
- Section 10 – Conclusion – provides an overall summary of the determination of the 2019 MITA SS-A Annual Update findings regarding MITA maturity.
- Appendix A – PR 2015 MITA SS-A Summary of Assessment – provides the summary of information by business area
- Appendix B – Business Process Forms and Capabilities – provides detail on where the information is maintained
- Appendix C – SS-A Terms and Acronyms

PRMP has developed or continues to develop the following:

- Business Process Forms to assess the following MITA business areas:
 - Business Relationship Management (BR)
 - Care Management (CM)
 - Contractor Management (CO)
 - Eligibility and Enrollment (EE) Management
 - Financial Management (FM)
 - Member Management (ME) (Future Release)
 - Operations Management (OM)
 - Performance Management (PE)
 - Plan Management (PL)
 - Provider Management (PM)
- Scorecards to measure process improvements achieved by technology investments.
- Documentation for the BA, IA, and TA, as well as the MITA Seven Standards and Conditions.

In addition, PR is currently implementing a Health Information Exchange (HIE) platform, which could support future connectivity and interoperability between PRMP and its stakeholders for a variety of business processes.

Upon completion and approval of the PR MITA 3.0 SS-A 2019 Annual Update, PR will have 12 months to prepare for and complete the 2020 Annual Update, which will assess the PRME based upon an As-Is time frame between November 2020 and July 2021.

2.0 Puerto Rico's MITA 3.0 SS-A Background

2.1 PRME

In PR, the Medicaid program operates completely under a managed care model. Under the managed care model, ASES contracts with five Managed Care Organizations (MCOs) to delegate execution of some functions of the MITA business processes. ASES, with support from several contractors, prepares and validates financial calculations.

The ASES Information Technology (IT) Department automates file transfers using a Secure File Transfer Protocol (SFTP) that routes files for processing according to the file extensions. MCOs are required to sign a trading partner agreement to transmit Health Insurance Portability and Accountability Act (HIPAA) of 1996 standard transaction set electronic data interchange (EDI) files. Responses for EDI files, including 837s and National Council for Prescription Drug Programs (NCPDP) 4.2 files, are completely automated by the PRMMIS.

ASES requires vendors to conform with standards and regulations defined by organizations such as the Centers for Medicare & Medicaid Services (CMS), World Wide Web Consortium (W3C), the American Institute of Certified Public Accountants (AICPA), and with those standards and regulations designated within the HIPAA, Code of Federal Regulations (CFRs), Generally Accepted Accounting Principles (GAAP), the Health Information Technology for Economic and Clinical Health (HITECH) Act, and HIE.

ASES requires each MCO to maintain a claims management system. Each MCO's system is required to meet W3C standards to facilitate integration with ASES and other PR systems that adhere to a service-oriented architecture. MCO systems must maintain audit trails, and all data must be retained for 10 years following the end of the contract term.

ASES also requires the MCOs perform any necessary changes to update interfaces to comply with ASES' systems, including those required by the PRMMIS, as well as new EE processes.

The PRME stakeholders included in this MITA assessment are supporting the MITA 3.0 Framework as described below.

ASES

ASES, or the PR Health Insurance Administration, was created under Act Number 72 of 1993 (Act 72), also known as the PR Health Insurance Administration Act. ASES is a public corporation working with the PRDoH as part of the PRME. According to Act 72, ASES is responsible for implementing, administering, and negotiating "a health insurance system by means of contracts with insurers, entities and health service purveyors, which will eventually

give all the residents of the island access to quality medical and hospital care, regardless of the financial condition and capacity to pay.”¹

ASES has legal authority to enter into contracts and engage professional, technical, and consulting services that are necessary for the performance of ASES and the compliance of its duties under the law. ASES has oversight responsibility for performance of the majority of the FM processes.

Abarca Health (Abarca)

Abarca Health is the Pharmacy Program Administrator (PPA). ASES contracts with Abarca to primarily support ASES and the Pharmacy Benefits Manager (PBM) during negotiation of drug rebates and development of the Maximum Allowable Cost (MAC) list and Preferred Drug List (PDL). Abarca prepares quarterly invoices for the collection of drug rebates from pharmaceutical companies based on the monthly pharmacy utilization information from the PBM.

DXC Technology (DXC)

PRMP contracts with DXC to provide a solution and technical support for the PRMMIS. In PR, DXC’s legal business entity name is Enterprise Caribe. DXC is the Operations Support & Systems Integrator for the PRMMIS, which went live in March 2018. DXC is also responsible for coordinating outcomes-based certification (OBC) efforts.

The PRMMIS will be rolled out in the following two phases:

Phase I included Data Warehouse, Enterprise (Security), Program Integrity, and Encounter Processing Modules. These modules were certified in October 2019.

Phase II included the Provider Enrollment Portal (PEP), which went live in March 2020, and the Case Tracking Module, which went live in May 2020.

MedRx360 (MedRx)

MedRx is the Medicaid Recovery Audit Contractor (RAC). ASES contracts with MedRx to perform retrospective audits of all medical claims, with the purpose of identifying and collecting overpayments made to providers on behalf of ASES.

MC-21 Corporation (MC-21)

MC-21 is the PBM. MC-21’s responsibilities under the contract with ASES include pharmacy benefits claims processing and adjudication, contracting and administration of the pharmacy network, formulary administration, and clinical programs.²

¹ “Puerto Rico Health Insurance Administration Act,” http://www.presupuesto.pr.gov/Budget_2012_2013/Aprobado2013Ingles/suppdocs/baselegal_ingles/187/72-1993.pdf, rev. June 20, 2012.

² MC-21, 2014-000044, <https://consultacontratos.ocpr.gov.pr//contract/details?contractid=3890427>

Milliman

Milliman is the actuarial vendor contracted with ASES to perform actuarial performance measurement, benchmarking, and consulting services for the calculation of capitation rates and determination of rate cells using Milliman’s proprietary tool, MedInsight. Part of the contract with ASES requires Milliman to construct a standard MedInsight data model and schema specifically for ASES, including allowances for customization for state-defined diagnosis, procedure, and other codes.

Milliman performs collection, reconciliation, reporting, and analysis of encounters and claims data from “insurers, Mental and Behavioral Services Companies (MBROs), PBM, and entities under contract with ASES.”³

Milliman provides periodic support, monitoring, reporting, and consulting services to ASES in addition to real-time executive, summary, and detail reports that are available to ASES through a secure internet connection.

Milliman is required to train ASES staff to access and interpret MedInsight data. Milliman provides ASES access to the following modules and capabilities within MedInsight:

- Medical Cost Analysis
- Milliman Health Cost Guidelines Grouping and Utilization Profiling
- Performance Measurement
- Population Management
- Risk and Severity Adjustment
- Episode Treatment Groups
- Executive Information System
- Executive Information
- Decision Support System

PRDoH

PRDoH is the single state agency designated to administer medical assistance in PR under Title XIX of the Social Security Act of 1935, as amended. PRDoH is accountable for helping to ensure the appropriate delivery of healthcare services under Medicaid and the Children’s Health Insurance Program (CHIP) in PR.

³ Milliman, 2020-000040, <https://consultacontratos.ocpr.gov.pr//contract/details?contractid=4974212>

PRMP

PRMP is a division of the PRDoH responsible for facilitating the processes of eligibility for Medicaid and access to health services offered to the indigent medical population and those with socioeconomic disadvantages who do not have a health plan.

2.2 MITA Overview

The MITA SS-A helps states establish strategic goals and objectives for PRDoH's organization, program, operations, and supporting technology. State Medicaid Agencies (SMAs) are required to submit an annual MITA SS-A to CMS to receive enhanced federal funding.

During the MITA SS-A, SMAs evaluate the MITA processes to determine the alignment and maturity with MITA standards.

PRMP requested BerryDunn's support in the development of the MITA 3.0 SS-A 2019 Annual Update through the Federal Fiscal Year (FFY) 2020 Enterprise Objective Monitoring and Control (EOMC) services statement of work.

2.3 PR 2015 MITA 3.0 SS-A

PRMP conducted a MITA SS-A during the months of May and June 2015 for the PRMMIS Release 1. The information included in the 2015 MITA 3.0 SS-A report was prepared as a result of multiple MITA working sessions that were conducted with PRMMIS program leadership from Medicaid and ASES (referred to as the Core Team), Team InterVoice, and additional subject matter resources as needed.

During each working session, the team reviewed the business process in detail, discussed the current state of the process in PR, and reviewed the process capability questions and MITA maturity matrices to assign appropriate maturity levels. The execution of the SS-A was accelerated using the business process knowledge that PRMP gained from a prior MMIS program phase of work to gather PRMMIS requirements that Team InterVoice and PRMP completed in 2014. Throughout the fall of 2014, Team InterVoice and PRMP completed their business requirement definition sessions, which were conducted in order to prepare PRMP for the phased implementation of PRMMIS.

The business processes of PR's Medicaid operations were compared against the MITA 3.0 Framework, as provided by CMS. The capabilities of each process were measured in order to capture the appropriate maturity level for the As-Is process. The expected To-Be levels were determined utilizing all the current facts that are known about PRMMIS Release 1 to identify business areas and processes in which PR expects to realize improvements in business capabilities that would increase their maturity level by the end of PRMMIS Release 1. Overall, 10 business processes across four business areas were identified for maturity level increases.

Puerto Rico expected to realize operational improvements in several capabilities across many business processes as a result of the PRMMIS Release 1 implementation; however, these

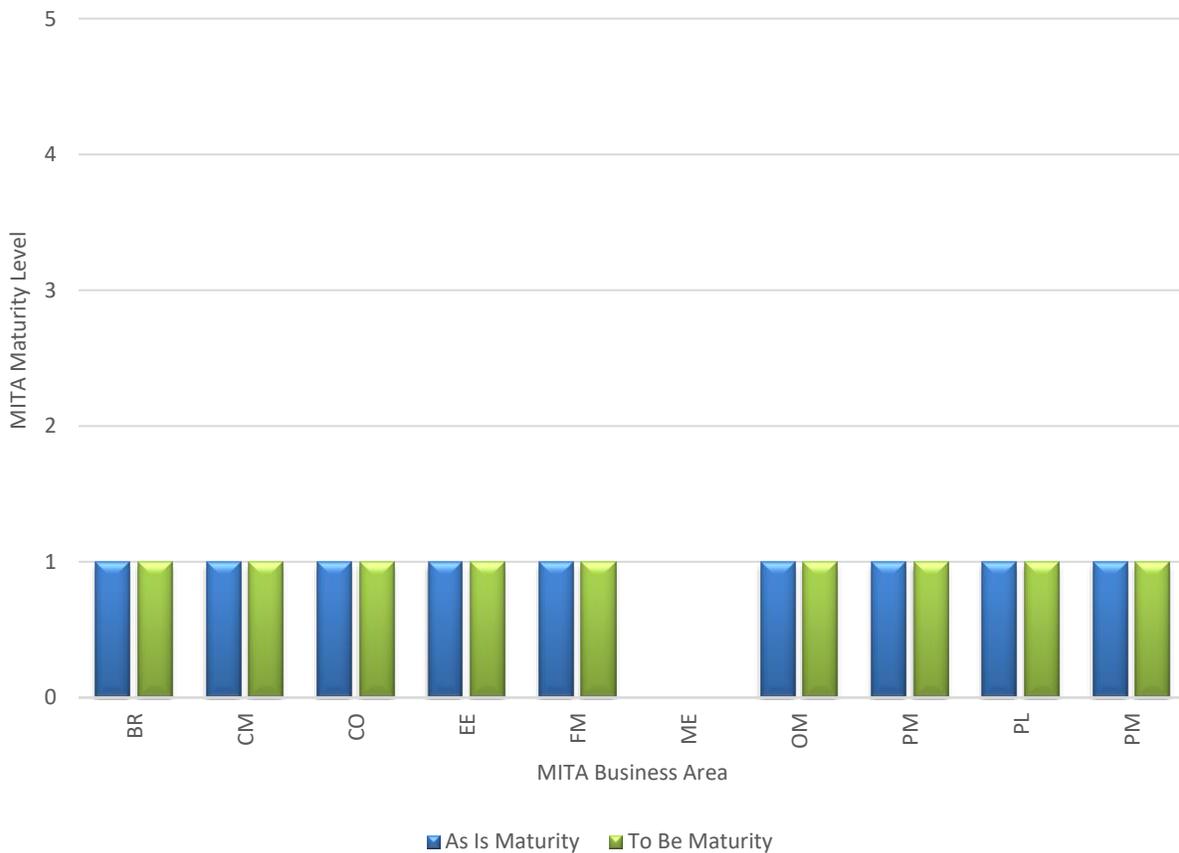
capability improvements were not expected to increase the overall business area maturity levels because not all capabilities and processes within each business area would realize maturity Level 2 capabilities. PR planned to implement the MMIS in multiple releases, and it is in later releases when the full benefits of the business process improvements would be realized as having increased maturity levels.

The As-Is level across all business areas in 2015 was at a Level 1. The To-Be maturity level was expected to remain at a Level 1 for all business areas through the planned PRMMIS Release 1.

PR anticipated IA maturity level increases to three business areas with PRMMIS Release 1. Within the three business areas, maturity levels were projected to increase from an As-Is maturity Level 1 to a To-Be maturity Level 2 resulting from the PRMMIS Release 1. The PRMMIS Release 1 would enable the capability to perform the IA MITA maturity model components consistent with a maturity Level 2 rating as a result of completing data warehouse work streams, such as data governance and activities involved in extract, transfer, load (ETL) development for the PRMMIS.

The figure below represents the MITA As-Is and To-Be Business Area maturity results as assessed in the 2015 Assessment. The ME Business area was not assessed in 2015, as CMS had not released the business process definitions for this area.

Figure 2.3: 2015 MITA SS-A Business Area As-Is and To-Be Maturity



CMS accepted PRMP 2015 MITA SS-A in 2016. The 2015 MITA SS-A business area summary and profile tables can be found in Appendix A.

2.4 PR’s 2019 MITA 3.0 SS-A Annual Update

BerryDunn held the 2019 MITA SS-A Kickoff meeting in November 2019 with PRMP and ASES stakeholders. BerryDunn facilitated fact-finding sessions from February to June 2020 with the stakeholders and MITA business area owners identified in Sections 4.2 and 5.3 of this report. Sections 5, 6, 7, 8, and 9 provide the SS-A results for the BA, IA, TA, and the Seven Standards and Conditions.

An assessment of Health Information Technology (HIT) was conducted by BerryDunn, which occurred in parallel to but separate from the 2019 MITA 3.0 SS-A Annual Update. This HIT assessment utilized the Office of National Coordinator (ONC) Health Information Sharing Maturity Model (HISMM) as a framework for assessing maturity of the HIT capabilities in PR. The results of the HIT assessment are represented in this report as inclusive of general PRDoH vision and goals for HIT. The HIT vision and goals are respective of MITA goals and objectives as it relates to the Puerto Rico Health Information Exchange (PRHIE) and the future integration

into the PRME. In Section 6 of this report, some MITA business areas include references to the HIT capabilities that were documented in the HIT assessment as a PRDoH priority for the initial HIE implementation of the PRHIE. This information is provided as a contribution to the To-Be environment of the PRME MITA SS-A, as the PRHIE implementation has not occurred.

PRDoH's HIT Assessment Report was submitted for review on June 19, 2020 to the PRDoH HIT Coordinator. The report is pending formal approval as of September 4, 2020.

3.0 2019 MITA SS-A 3.0 Toolkit

The 2019 MITA 3.0 SS-A toolkit provides templates and tools necessary to conduct the MITA 3.0 Annual Update assessment and roadmap. The toolkit has been expanded to include planning tools, checklists, and workflows in support of the 2019 Annual Update. This section describes the background, purpose, and use of the toolkit.

3.1 Project Documentation

The documents necessary to complete the MITA 3.0 Annual Update and Roadmap for submission to CMS include:

- MITA 3.0 SS-A Annual Update Report
- MITA 3.0 Annual Update Roadmap
- IA, TA, BA, and Seven Standards and Conditions Scorecards

BerryDunn assessed the 10 MITA business areas and 80 business processes by defining each business process using the CMS-supplied MITA 3.0 Business Process form. BerryDunn assessed the MITA maturity for each process using the CMS-supplied MITA Capability maturity Matrices (CMM). The 2019 PR MITA SS-A Annual Update Report compiles the findings of these assessment documents into the business area summaries and profiles found in Section 6 of this report. Additionally, BerryDunn created business process form templates to capture the business process descriptions and used the CMS provided CMM to conduct a gap analysis of the As-Is and To-Be vision documentation to develop the MITA 3.0 SS-A Roadmap Transition and Sequencing Plan, as defined in the CMS MITA 3.0 SS-A Guidelines. Finally, BerryDunn compiled the maturity and gap analysis results in the MITA 3.0 Scorecards for each of the three MITA Architectures – Business, Information, and Technical – and the results of the MITA Seven Standards and Conditions assessment. For future reference, and as the maturity documentation necessary to begin the Annual Update for each following year, PRMP should consider maintaining the MITA 3.0 SS-A Annual Update Report and Roadmap after the submission of these documents to CMS.

3.2 Business Process Review

The approach taken to the MITA Business Process Review included a planning process, development of assessment and maturity methodology, and approach for validating business processes for the 2019 Annual Update. The process supported documenting changing requirements as the assessment progressed and process details and pain points began to emerge, even late in the project. The processes delivered working documents and material drafts throughout the assessment as business areas were completed. Business subject matter experts (SMEs) and technical SMEs worked together daily throughout the SS-A project to develop a business-driven assessment of the PRME. This included development of the documents produced and used to assist in this process, such as organizational charts, As-Is

and To-Be process flows, toolkit inventory lists, and scorecards. The initial MITA SS-A preparations and steps taken by the BerryDunn Team in the MITA SS-A process for the MITA SS-A Annual Update were:

MITA SS-A Preparations

1. Reviewed the 2015 MITA SS-A and identified additional business process areas of focus for the current MITA SS-A efforts.
2. Submitted documentation requests to collect documentation from ongoing projects, including evidence of system and process improvements from the PRMP and ASES business process owners:
 - Example documents typically included in a documentation requests included but were not limited to: MMIS certification artifacts, Detailed System Design (DSD) documents, State Medicaid Health Plans (SMHPs), strategic plans, data management strategies (DMSs), technical management strategy (TMS), etc.
3. Identified previously created MITA SS-A documentation that BerryDunn could leverage using the following templates for MITA SS-A Annual Update documentation:
 - Business Process Forms
 - Scorecards
 - Capability matrices
 - Business profile reports

The following details BerryDunn's approach to the MITA SS-A Update.

MITA SS-A Update Approach

1. Confirmed the scope for the MITA SS-A with PRMP across the various business areas, business process areas, and supporting MITA SS-A documentation.
2. Identified and confirmed existing business process area owners within PRME.
3. Conducted As-Is and To-Be MITA SS-A business process area work sessions to understand the As-Is and To-Be environments for each business process area.
4. Updated Business Process Forms and matrices and performed a SME review of related documentation.
5. Completed and analyzed MITA scorecards, business profile reports, and performance measures to determine process improvement approaches within each business process.
 - a. As a part of performance measures definition, BerryDunn worked with PRMP to identify business process outcomes and related key performance indicators (KPIs) for each of the business processes. This effort focused on leveraging those outcomes and KPIs from the PRMMIS Phases I and II efforts; however, it

also focused on the identification of any new outcomes and KPIs that could be of focus for PRMP operations.

6. Validated MITA SS-A documentation with PRMP and obtained final approval of documentation from business area owners.
7. Updated and drafted the MITA SS-A Report, including the gap analysis and related performance measures (i.e., outcomes and KPIs).
8. Connected with resources identified by PRMP (i.e, vendors and staff) to confirm details of MITA SS-A and its associated documentation.
9. Reviewed and confirmed the finalized MITA SS-A Report and associated documentation with PRMP.

BerryDunn will facilitate discussions with CMS about the MITA SS-A Report and its associated findings upon PRMP's request.

3.3 2019 Annual Update Materials

Materials provided to PRME participants included:

- **MITA 3.0 Business Process Templates** – A CMS Business Process Template, which defines the current state of each business process identified in the PRME architecture. Each Business Process form was developed and completed for each business process and documented changes and improvements that have occurred since the 2015 MITA 3.0 SS-A was completed.
- **Capability Matrices – Business, Information, Technical, Architectures, and Seven Standards and Conditions** – Business Capability Matrices (BCMs) were developed for each business process in the MITA 3.0 Framework. Matrices were used for the IA and TA, and Seven Standards and Conditions during the MITA 3.0 SS-A. During the 2019 Annual Update, each completed capability matrix was used to document maturity levels.
- **Scorecard Templates** – A scorecard template was developed for each business process. Scorecards documented the PRME performance measures in use for the current and future environments. The 2019 Annual Update provides details about the scorecards with the results of the assessment of maturing processes.
- **Profiles** – For each business area in which processes have matured subsequent to the MITA 3.0 SS-A, a profile was completed for the 2019 Annual Update that demonstrates the maturity levels of each architecture and the Seven Standards and Conditions.

3.4 Validation Materials

For the 2019 Annual Update, BerryDunn created the Business Process Forms and capability matrices upon completion of the fact-finding sessions for each business area and reviewed this information with the business process owners from PRMP and ASES. At PRMP's request,

BerryDunn prepared summary documents of the findings of each of the fact-finding sessions for each business area. These Business Area Summary reports were approved by PRMP and ASES prior to the preparation of this MITA SS-A Report. Section 6 of this report contains the information validated and approved in the Business Area Summary reports. BerryDunn documented the gap analysis in the preparation of Scorecards based on documentation related to the processes under assessment and validated in the Business Area Summary Documents. The Business Process owners and Business Area owners will receive the Business Process Forms, Business Area Summary reports, MITA Scorecards, and CMMs to maintain on file for future reference and the next MITA Annual Update. The Business Area Profile reflecting the validated As-Is and To-Be maturity for each business area is contained in Section 6 of this report.

4.0 PR's Medicaid Enterprise COO

The COO helps frame PR's vision and showcases its target future environment. The COO is a compilation of information that supports department and agency plans for the future state of its Medicaid programs and services, as well as aligns the BA, IA, and TA with the MITA 3.0 Framework. The COO forms the basis of the MITA 3.0 SS-A Roadmap Transition and Sequencing Plan for eliminating the gaps and establishing the transformation pathway to achieve the goals and objectives of the COO through the management of MITA business process improvement.

The COO consists of the following components:

- Vision for the Medicaid Enterprise: Information on the Agency vision for a future that meets Medicaid goals as defined by the SMA and CMS.
- Stakeholders and Data Exchanges: A description of Medicaid enterprise stakeholders, as well as data exchanges that occur among stakeholders.
- Drivers and Enablers: Information that provides a summary of drivers or enablers of technology that propels and supports the transformation of the SMA.
- As-Is and To-Be Environments, and Business Improvements: Information that describes the As-Is environment, validates the levels of operational maturity found in the state today, and describes both the target vision over a time frame and the impacts of the transformation to each of the identified stakeholders.

4.1 Vision for the Medicaid Enterprise

PRMP is the single state agency responsible for administering PR's Medicaid program. The PRME system goals include:

- Transform PRMP into an information-driven agency.
- Improve program oversight.
- Leverage technology advancements to improve healthcare outcomes for its citizens.
- Increase credibility of the Medicaid program office within the Government of PR and with the CMS.

A determination of the future state for PR Medicaid was performed in alignment with the Medicaid Enterprise priorities and vision guiding the 2019 MITA SS-A:

- **Objective #1 Technology, Data and Business Process Integration:** Integrate business processes and technology within the Medicaid Enterprise.
- **Objective #2 Enhanced Data Quality:** Strengthen the trust of and improve the quality of data across the Medicaid Enterprise.

- **Objective #3 Improved Timeliness of Data Integration:** Provide tools and training related to support for PRMP staff to further understand and analyze data from across the Medicaid Enterprise.
- **Objective #4 Business Relationship Management:** Further define and document PRMP and PRDoH policies and procedures in support of the Medicaid Enterprise.

Improvements are needed to meet these goals and objectives to achieve maturity of the Medicaid Enterprise. The following solutions have been identified in the MITA SS-A as strategies that will result in these improvements:

- DMS
- Data Governance
- Data Standardization
- Interoperability Compliance Strategy
- Conceptual Data Models (CDMs)
- Logical Data Models (LDMs)
- Increased data sharing from needed data sources
- Improving automation of data transfers
- Implementing process for Manage Estate Recovery
- Reducing duplication of responsibilities and data
- Medicaid Enterprise Organizational Structure (MEOS)
 - Organizational improvements to support PRMP goals and business needs.
- PRDoH HIE and Enterprise Data Warehouse (EDW) Implementation (HIE/EDW)
 - A Medicaid EDW supporting the HIE will improve accuracy, timeliness, and access to data needed for improvements in the FM, OM, PE, PL, PM, and CM business processes.
- Provider Enrollment Portal (PEP)
 - Integrates with the Medicaid Management Information System (MMIS) and Data Warehouse to improve access, accuracy, and timeliness of PM, FM, and CM business processes.
- Puerto Rico Eligibility and Enrollment (PREE)
 - Improves access, accuracy, and timeliness of member services and CM.
 - Integrates with the PRMMIS and Data Warehouse.
- Modernization of FM processes

- Integration with PRMMIS and Data Warehouse supports accuracy, access, timeliness, and utility of FM, OM, PE, and PL business processes.
 - Supports improved Program Integrity.
- KPI subproject
 - Measures effectiveness of implementing improvements and identifying needs.
 - Supports Strategic Planning.
 - Supports improved Program Integrity.
- Increased automation of reporting (XML Reporting)
 - Automates reporting by MCOs.
 - Data Warehouse supports automation, facilitates analytics, and ad hoc reporting.
 - Supports improved Program Integrity.

4.2 Stakeholders and Data Exchanges

Several stakeholders exchange information with the PRMP. In accordance with the MITA 3.0 Framework, these data-exchange stakeholders are comprised of beneficiaries, providers, MCOs, payers, payer agencies, regulators, legislators, and the public. The information that these stakeholders provide is critical to the operation and success of the PRMP. The key stakeholders in the PRME include:

- PRMP
- ASES
- PRDoH
- PRMMIS
- PRHIN
- CMS
- Contractors:
 - DXC
 - Milliman
 - MedRx
 - Abarca
 - MC-21
 - MCOs

The table below identifies the key stakeholders and major data exchanges.

Table 4.2: Key Stakeholders and Major Data Exchanges

Key Stakeholder and Definition	Major Data Exchanges
<p>Providers: Includes pharmacists, hospitals, case managers, and home- and community-based caregivers serving the Medicaid population.</p>	<ul style="list-style-type: none"> Providers submit enrollment applications via the PEP. Providers submit claims to MCOs for reimbursement electronically, using HIPAA standard transactions and paper-based claims. Medicaid responds to providers electronically via the PEP. Paper is used to exchange some information with providers. Providers receive electronic payments via Electronic Funds Transfer (EFT).
<p>MCOs: Organizations who contract with the state to provide Medicaid recipients with a defined set of services. Current MCOs are Molina, Medicare y Mucho Más Multihealth, Plan de Salud Menonita, First Medical, and Triple-S Salud.</p>	<ul style="list-style-type: none"> X12N 820 transactions are sent to MCOs weekly. MCOs submit encounter data to Medicaid using the X12N 837 standard transactions. MCOs submit encounter data no later than 90 days after the end of the quarter in which the encounters occurred.
<p>Beneficiaries: PR residents who apply for or who receive Medicaid Enterprise benefits.</p>	<ul style="list-style-type: none"> Applicants submit applications directly to a caseworker. Beneficiaries submit eligibility verifications in electronic and paper format. Beneficiaries receive multiple notices regarding eligibility from the Medicaid Enterprise and the MCO.
<p>CMS: A branch of the U.S. Department of Health and Human Services (HHS). CMS is the federal agency that administers Medicare, Medicaid, and CHIP. CMS provides information for health professionals, regional governments, and consumers.</p>	<ul style="list-style-type: none"> Medicaid Enterprise submits invoices and Transformed Medicaid Statistical Information System (T-MSIS) reports via an interface. Medicaid Enterprise electronically submits CMS budget reports using the Medicaid Budget and Expenditure System/State Children’s Health Insurance Program (CHIP) Budget and Expenditure System (MBES/CBES).
<p>Other Payers: Other benefit programs with liability to cover medical costs for Medicaid recipients. Includes private insurers.</p>	<ul style="list-style-type: none"> Benefit information is exchanged prospectively.

Key Stakeholder and Definition	Major Data Exchanges
<p>Other Agencies: State, local, and federal agencies that exchange information with Medicaid (e.g., Medicare, Internal Revenue Service [IRS], Treasury, and Department of Finance and Accounting).</p>	<ul style="list-style-type: none"> Medicaid Enterprise responds to requests for information from the state legislature, governor, and other state agencies; CMS; other federal agencies; and the public by manually accessing data from multiple sources using different media, connectivity, format, and data content.
<p>Mental/Behavioral Health Providers: The integration of physical and behavioral healthcare can improve quality and decrease costs, especially for Medicaid beneficiaries with complex health care needs⁴.</p>	<p>Integration of physical and behavioral health models that data exchange/interoperability can support:</p> <ul style="list-style-type: none"> Managed Care Enhanced Care/Case Management Patient Centered Medical Home Health Homes Medicare Advantage Organizations (MAOs)
<p>Public Health Registries: Existing and planned registries internal to the PRDoH where PRMP was identified as being a primary user in the HIT Assessment.</p>	<ul style="list-style-type: none"> PR Immunization Registry (PRIR): Data exchange types include electronic health records (EHRs), SFTP/batch jobs, and secure email with potential future support to include data exchange with PRHIE. Updates are planned in the To-Be environment. Other registries are planned to be enabled to participate in the PRHIN in the To-Be environment of the HIE implementation.⁵
<p>Major Laboratory Networks: Rapid introduction of the COVID-19 Proof of Concept that connected major labs to the Epidemiology Department in compliance with CMS security standards is serving the island’s population, including Medicaid patients.</p>	<ul style="list-style-type: none"> Unidirectional modality of test results only for COVID-19 to the data exchange hub. The Data Exchange Hub transfers data to the secured Data Warehouse where it is transformed to the Epidemiology Health Level Seven (HL7) format and structure.⁶ Automated lab data through digital exchange to reduce cost.

⁴ *Assessing Changes to Medicaid Managed Care Regulations: Facilitating Integration of Physical and Behavioral Health Care*, Commonwealth Fund, Elizabeth Edwards, October 24, 2017.

⁵ Health Gorilla: Implementation Phase of the Puerto Rico Department of Health HIE. June 2020

⁶ Health Gorilla: Implementation Phase of the Puerto Rico Department of Health HIE. June 2020

As PRMP continues to outline and define its vision for the IA and TA, data exchange and interoperability continue to expand within and across the enterprise. Other stakeholders will continue to be identified and tracked in the present and in the future.

4.3 Drivers and Enablers

Drivers and enablers propel and support the transformation of the Agency. While specific drivers and enablers vary over time as goals are accomplished (and in response to policy and legislative changes), the role of drivers and enablers in transformation does not change.

Drivers—including legislation, policies, and other initiatives—directly impact the strategic direction of PR Medicaid by focusing efforts on a target (e.g., compliance or greater interoperability). Enablers are the projects that drive PRMP’s strategic direction and turn that direction into operational impacts that meet the established strategic goals and objectives. These are projects aimed toward business process or technology improvements.

The following national policy drivers have shaped, and will continue to shape, the landscape of PR Medicaid:

- CMS OBC Pilot Initiatives
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020
- 2020 Updates to the Adult and Child Core Health Care Quality Measurement Sets
- Medicaid Bipartisan Budget Act (BBA) of 2018 and Changes to Medicaid Provisions Passed in April 2019 – Third-Party Liability (TPL) in Medicaid and CHIP
- Medicare-Medicaid Integration and Unified Appeals and Grievance Requirements for SMA Contracts with Medicare Advantage Dual Eligible Special Needs Plans (D-SNPs) for Contract Year 2021
- Proposed Rule: Medicaid Fiscal Accountability Regulation (MFAR)
- Managed Care Contract Review Redesign Project
- 21st Century Cures Act
- Section 5052 of the SUPPORT for Patients and Communities Act – State Plan Option Under Section 1915(l) of the Social Security Act
- Serious Mental Illness (SMI) and Serious Emotional Disturbance (SED) Demonstration Opportunity
- CMS Medicaid Innovation Accelerator Program (IAP) Collaborative Between the Center for Medicaid and CHIP Services (CMCS) and the Center for Medicare and Medicaid Innovation (CMMI)
- OBC for Electronic Visit Verification (EVV) Systems

- MITA Framework, Version 3.0
- Transformed Medicaid Statistical Information System (T-MSIS)
- International Classification of Diseases, Version 10 (ICD-10) (Compliance Date of October 1, 2015)
- Medicaid Provider Enrollment Compendium (MPEC): Compliance With Specific Federal Regulations at 42 CFR § 455⁷
- Medicaid and CHIP Mental Health Parity Final Rule
- Medicaid and CHIP Managed Care Final Rule
- Mental Health and Substance Use Disorder (SUD) Parity Compliance Toolkit
- Affordable Care Act (ACA)
- National Correct Coding Initiative (NCCI)

PRME Drivers

- HIE/EDW
- Medicaid Enterprise Organizational Structure Initiative
- 21st Century Cures Act: Interoperability and Patient Access Final Rule
- American Recovery and Reinvestment Act (ARRA): Medicaid Promoting Interoperability Programs (PIP)
- Substance Use Disorder Prevention That Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act
- HIPAA
- PR Law 40 of 2012, Puerto Rico Health Information Electronic Exchange and Administration Act
- Broadband Expansion Laws, HB1294 and HB1976: Critical foundation for expansion of both provider and patient HIE, access, and usage⁸
- Puerto Rico Joint Senate Resolution 491: Reduction of barriers and increased flexibility for providers practicing telemedicine⁹
- Puerto Rico Act No. 70-2017, Controlled Medication Prescription Monitoring Program

⁷ "Medicaid Provider Enrollment Compendium (MPEC)." CMS. <https://www.medicaid.gov/affordable-care-act/provisions/downloads/mpec-032116.pdf>

⁸ Puerto Rico Department of Health. Health Information Technology Assessment Report. July 2020.

⁹ Ruling Letter. CN-2020-270-DD. Access to Telemedicine Services in Health Insurance Plans. http://ocs.gobierno.pr/enocspr/files/Cartas%20Normativas%202020/CN-2020-270-D_ENG.pdf

- Public Health Services Act (PHSA), Section 330
- Puerto Rico Executive Order 2020-062, and amendment OE-2020-064: Response to the COVID-19 pandemic response and reporting
- Occupational Safety and Health Administration (OSHA) Act
- CARES Act

Enablers have been implemented or are planned in response to these drivers, including (but not limited to) the following:

- MITA 3.0 SS-A 2019 Annual Update
- PRMMIS (MITA)/PRDoH HIE/EDW
- DMS
- TMS
- Provider Enrollment Project
- PREE System
- Program Management Support
- Organizational Integration Support Services for the PRME
- Annual MARS-E Assessments
- NIST Security Assessments
- Additional Security Assessment Services
- PRHIE
- Municipal Contact Tracing and Assistance System
- Prescription Drug Monitoring Program (PDMP)
- Emergency Implementation of Lab Reporting using BioPortal

4.4 As-Is and To-Be Business Improvements

The As-Is and To-Be environments are represented in the SS-A documentation gathered and analyzed for this Annual Update, including Business Process Forms, capability matrices, and scorecards. The As-Is environment will drive the state's To-Be goals and objectives. Business improvements are documented in the 2019 MITA 3.0 Roadmap. Additionally, BerryDunn reviewed information from CMS advanced planning document (APD) approval letters that reinforce the PRME As-Is environment. The As-Is environment drives the state's To-Be goals and objectives.

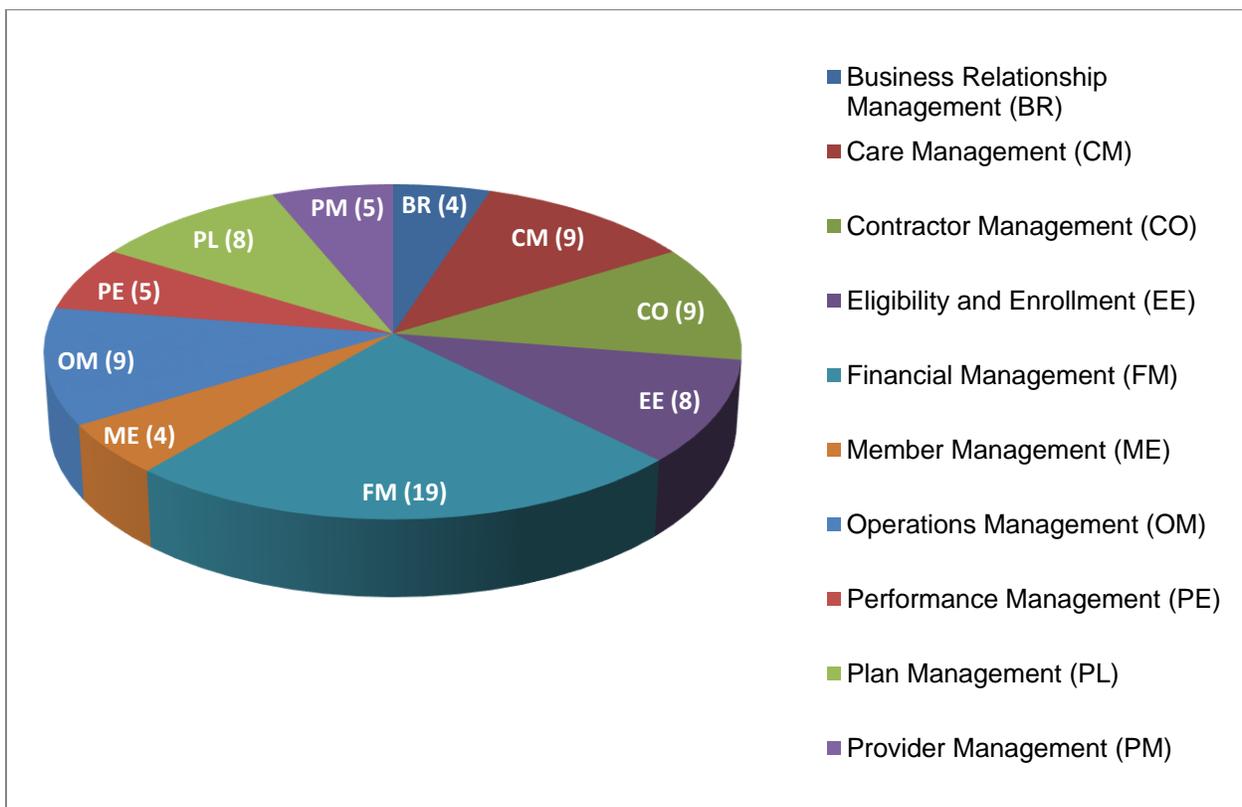
5.0 2019 Annual Update Assessment Results

5.1 Business Assessment Overview

The MITA 3.0 Framework consists of 10 business areas, 20 business categories, and 80 business processes that outline the business operations of the enterprise.

Figure 5.1, on the following page, indicates the number of business processes in each of the 10 MITA business areas.

Figure 5.1: MITA 3.0 Framework Business Processes



5.2 BA Profiles

BerryDunn assessed the current As-Is and future To-Be maturity levels for the BA, IA, and TA during the development of the Annual Update using the guidelines as set forth in the MITA 3.0 Framework, including the MITA Maturity Model (MMM), the BCM, the Information Capability Matrix (ICM), the Technical Capability Matrix (TCM), and the Seven Standards and Conditions Matrix. The To-Be assessment reflected planned changes to the business process due to technology, increased efficiency, and/or policy changes within the next five years.

Profiles for the BA, IA, and TA were developed to outline maturity levels by business process based on the 1 – 5 scale as indicated in the MITA 3.0 Framework. The architecture profiles are

located on the PR SharePoint site in the folder created for each MITA architecture and the Seven Standards and Conditions.

5.3 Business Area Ownership

The current BA of the PRMP was assessed through a series of fact-finding sessions. Owners were identified for each of the business areas, categories, and processes.

Table 5.3: Business Area Ownership for 2019 Annual Update

Business Area	Owner	Agency
BR	Edanit Torres Cotto	ASES
CM	Carlos Delgado, Director	ASES
CO	Edanit Torres Cotto	ASES
EE	Carlos Delgado	ASES
FM	Carmen Rodriguez	ASES
ME	This business area will not be assessed until released from CMS.	N/A
OM	Carlos Delgado	ASES
PE	Carlos Delgado	ASES
PL	Luz Cruz Romero	PRMP
PM	Carlos Delgado	ASES

5.4 BA Development

During each validation session, participants reviewed business area details, noted differences, and assigned As-Is and To-Be maturity levels using matrices for the BA, IA, and TA, Seven Standards and Conditions. To-Be maturity levels were assigned using a five-year time frame as a future point in time.

5.5 Gap Analysis

BerryDunn performed an analysis of gaps between the As-Is and To-Be environments for each business process, incorporating ongoing and upcoming projects and initiatives. Gaps—created by obstacles in capability that must be overcome before the process can advance to the desired maturity level—were identified when the As-Is maturity is expected to improve in the To-Be environment. A solution is required in order to close these gaps and move the process to a higher level of business process capability maturity due to the improvements that are achieved by the solution.

If a process is not anticipated to mature (e.g., a process was at Level 1 and will remain at Level 1), there is no gap. In some instances, a process might be expected to mature in part, but

improvement is not sufficient to fully meet the criteria to achieve a higher maturity level; in these instances, the partial improvement is noted. The gap analysis describes the initiative, project, or activity that PR has selected to achieve maturity for the process.

The 2019 MITA SS-A Annual Update determined that 14 processes have increased in MITA maturity since the 2015 MITA SS-A, and 32 processes are expected to increase in MITA maturity within the next five years.

Figure 5.5.1: 2015 to 2019 MITA Maturity Improvements

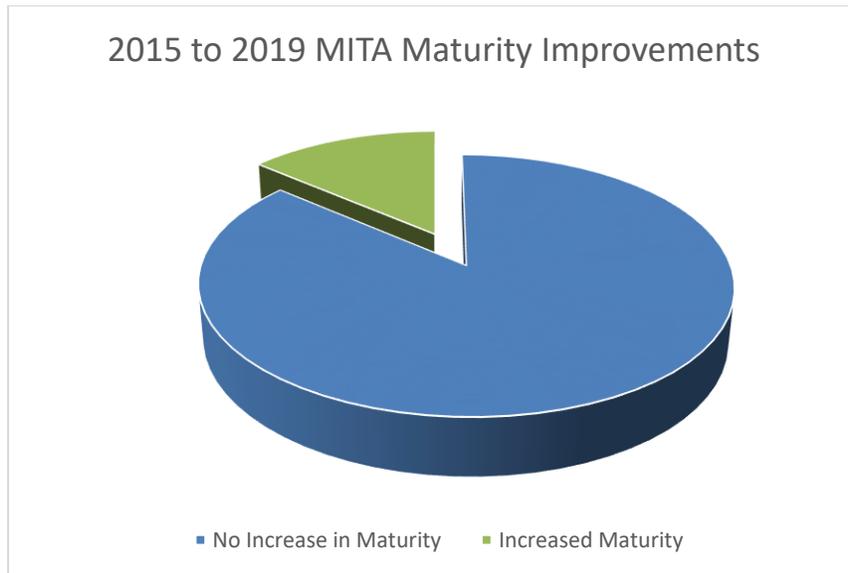
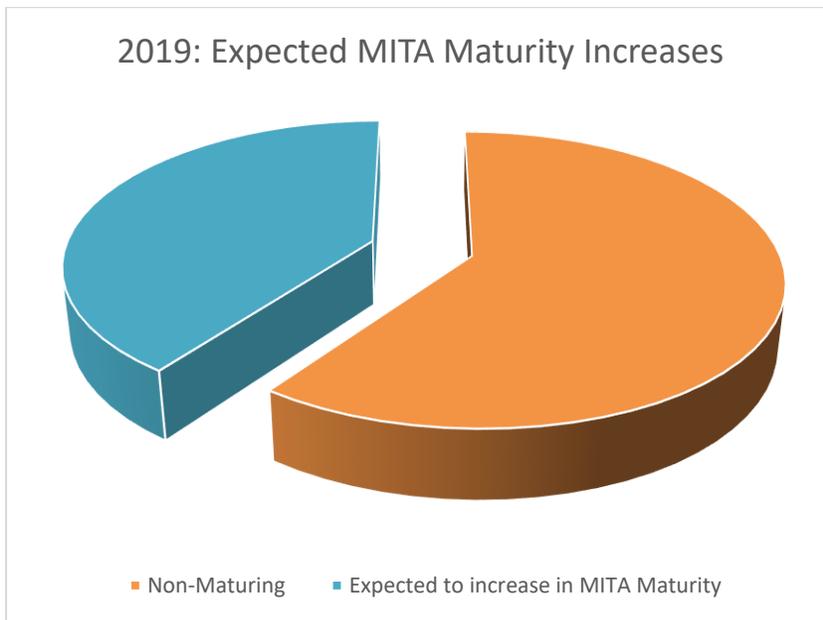


Figure 5.5.2: 2019 MITA Maturity Increases



To provide a comprehensive view of each business area, a high-level gap summary and full gap analysis are included in Section 6.0 of this report.

6.0 Business Assessment Summary

Sections 6.1 – 6.10 contain summary information for each of the 10 MITA 3.0 business areas.

Each summary description contains the following:

- **Overall Business Area Description:** Includes a general description of the business processes contained in each business area.
- **Medicaid Enterprise MITA 3.0 Business Area Assessment:** Summarizes the results of the 2019 MITA 3.0 SS-A for that business area.
- **BA Maturity Assessment:** Includes the As-Is maturity levels for the 2019 Annual Update (current) business environment.
- **HIT Assessment:** Includes the high-level summary of planned HIT capabilities impacting business processes and the HIE initiative alignment.
- **Vision:** Includes the To-Be maturity levels for the future business environment.
- **Gap Analysis:** Discusses the gaps between the As-Is and To-Be maturity levels, and includes the solutions for each business area to close the gap within the prescribed five-year time frame.
- **Maturity Level Profile Tables:** Tables that outline the assessed As-Is and To-Be Levels for the BA, IA, TA, and Seven Standards and Conditions.

Figure 6.0.1, below, summarizes the BA As-Is and To-Be maturity levels assessed in the 2019 Annual Update.

Figure 6.0.1: Comparison of 2019 To-Be and 2019 As-Is BA Maturity

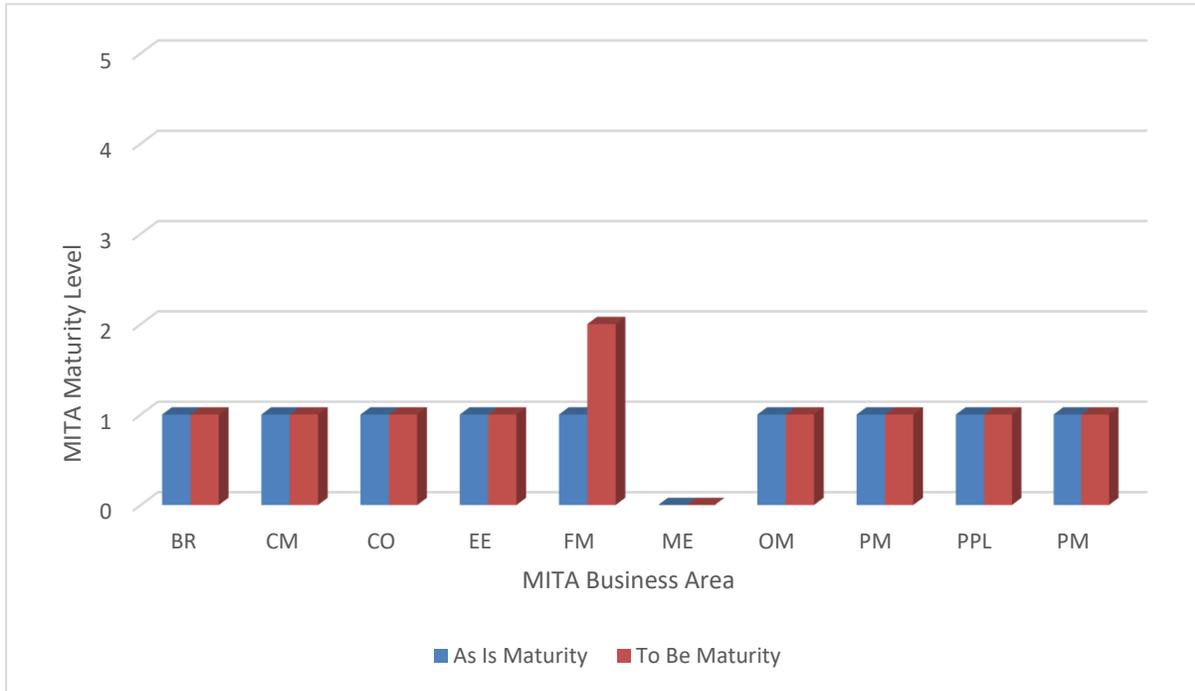
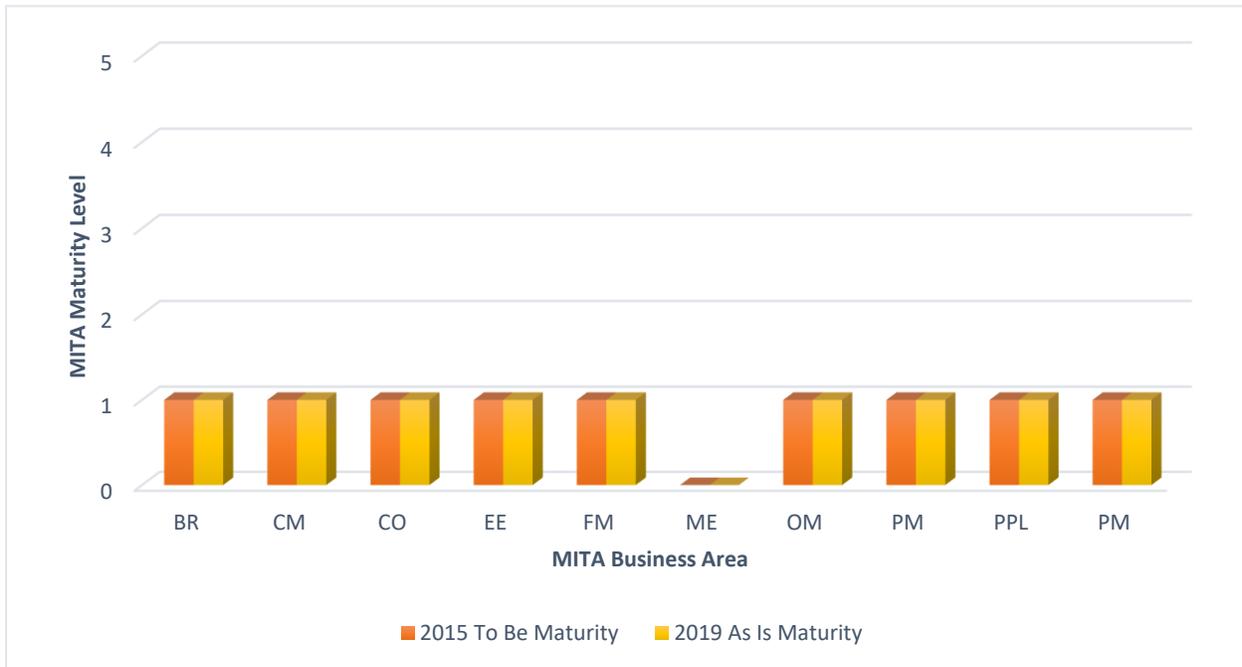


Figure 6.0.2 compares the 2019 Annual Update BA As-Is maturity to the 2015 To-Be environment.

Figure 6.0.2: Comparison of 2015 To-Be and 2019 As-Is BA Maturity



6.1 Business Relationship Management

The BR Business Area includes four business processes. These business processes include activities related to contractual agreements and the exchange of information required to establish and maintain business relationships with business and trading partners. PR enters into a variety of business relationships with intrastate agencies and MCOs, and enters other contractual relationships with vendors. This business area describes the types of relationships; how the relationships are established, maintained, and terminated; and how data is exchanged among partners.

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the period assessed for the 2019 MITA 3.0 SS-A Annual Update, the overall BA maturity level for BR was an As-Is Level 1 and a To-Be Level 1. The process assessments in the current environment were completed using the CMS MITA Business Process Forms, Excel spreadsheets, email, and paper documents.

BA Maturity Assessment

The overall BA maturity level for the BR Business Area has remained the same, at As-Is Level 1, since the previous assessment. All BR business processes conducted by PRMP and ASES with contractors and sister agencies with whom they share data for the business needs of the PRME are completed using Excel spreadsheets, emails, electronic documents, and forms

managed using SharePoint workflows, and notification and user management functions supported by web-based communications through SharePoint.

HIT Assessment Findings

The HIT assessment identified business relationships among various business and trading partners that extend throughout the HIT ecosystem of PR. Agreements between ASES and MCOs exist through contracts and Memorandums of Understanding (MOUs) that are dedicated to the exchange of data including, but not limited to, claims and encounters. A relationship To-Be between PRMP and the creation of the PR Health Information Network (PRHIN) could leverage interoperability with the completion of the HIE that uses the Trusted Exchange Framework & Common Agreement (TEFCA) to further facilitate this data exchange¹⁰.

Upon HIE implementation and establishment of the PRHIN, this relationship is an opportunity to expand maturity of the PRMMIS by utilizing HIE technology to build upon its As-Is environment. This expansion and maturation could broaden the To-Be Medicaid Enterprise with the advancement of analytics and reporting that utilizes the HIE, which in turn, could incentivize additional HIE participation and promote interoperability.

Vision

The To-Be environment is envisioned at Level 1 for this business area. Although the MITA maturity of individual capabilities improved, there are no ongoing projects planned to increase automation or standardization in the BR process area.

Gap Analysis

All BR processes are currently at Level 1. In the future, it is expected that all BR processes will not mature, with the process remaining at Level 1.

Description of Gaps

There are no gaps for the BR Business Area or any of the processes in this business area.

Solution

The overall BR processes are not expected to mature because there are no initiatives planned to further automate existing processes.

Table 6.1.1: BR Business Area – Maturity Level Profile (BA)

BR Business Area – Maturity Level Profile (BA)							
Business Process		Level 1	Level 2		Level 3	Level 4	Level 5
BR01 – Establish Business Relationship	Non-Maturing		As-Is	To-Be			

¹⁰ Health Gorilla: Implementation Phase Proposal of the Puerto Rico Department of Health HIE

BR Business Area – Maturity Level Profile (BA)						
Business Process		Level 1		Level 2		Level 3
BR02 – Manage Business Relationship Communication	Non-Maturing			As-Is	To-Be	
BR03 – Manage Business Relationship Information	Non-Maturing			As-Is	To-Be	
BR04 – Terminate Business Relationship	Non-Maturing	As-Is	To-Be			

IA Maturity Assessment

The current BR IA consists of contracts, agreements, MOUs, Service-Level Agreements (SLAs), policies (i.e., PRDoH, PRMP, ASES, or federal), state and federal laws, and referral sheets.

Given the current environment and plans for the future, the overall IA maturity level for BR is an As-Is Level 1 and a To-Be Level 2.

Table 6.1.2: BR Business Area – Maturity Level Profile (IA)

BR Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
BR 01 – Establish BR	Maturing	As-Is	To-Be			
BR 02 – Manage BR Communication	Maturing	As-Is	To-Be			
BR 03 – Manage BR Information	Maturing	As-Is	To-Be			
BR 04 – Terminate BR	Maturing	As-Is	To-Be			

TA Maturity Assessment

The TA for this business area has made improvements with the implementation of the MCO extensible markup language (XML) reporting process and automation through ShareFile; however, all areas were assessed at a Level 1 maturity and the overall TA maturity will remain at Level 1 in the To-Be environment. The TA for this business area includes:

- Email
- Microsoft (MS) Excel
- Phone
- Fax
- ShareFile application
- MMIS data and defect-tracking software
- PEP

Table 6.1.3: BR Business Area – Maturity Level Profile (TA)

BR Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
BR 01 – Establish BR	Non-Maturing	As-Is	To-Be				
BR 02 – Manage BR Communication	Non-Maturing	As-Is	To-Be				
BR 03 – Manage BR Information	Non-Maturing	As-Is	To-Be				
BR 04 – Terminate BR	Non-Maturing	As-Is	To-Be				

Seven Standards and Conditions

The BR Business Area was assessed at Level 1 maturity for the As-Is environment for all four business processes in all Seven Standards and Conditions, and is envisioned to remain at Level 1 maturity for all Seven Standards and Conditions in the To-Be environment.

Table 6.1.4: BR Business Area – Maturity Level Profile (Seven Standards and Conditions)

BR Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
BR 01 – Establish BR	Non- Maturing	As-Is	To-Be				
BR 02 – Manage BR Communication	Non- Maturing	As-Is	To-Be				
BR 03 – Manage BR Information	Non- Maturing	As-Is	To-Be				
BR 04 – Terminate BR	Non- Maturing	As-Is	To-Be				

6.2 Care Management

The CM Business Area encompasses nine business processes supporting the care of individuals and specific populations. The CM business area also includes the promotion of targeted health education and awareness outreach, registries, and authorization of Medicaid services and payment.

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the 2019 MITA 3.0 SS-A Annual Update, some of the processes in the CM Business Area have achieved As-Is Level 1 and Level 2 in maturity; however, the overall MITA maturity Level for the CM Business Area remains at Level 1 for As-is and is expected to remain at Level 1 for To-Be.

BA Maturity Assessment

The overall BA maturity level for the CM Business Area has matured from As-Is Level 1 in 2015 to As-Is Level 2 for the majority of CM processes in 2019. The process maturity achieved is due to the improvements in automation with the use of increased automation in reporting, electronic documentation management, and improved communications through business rules and electronic forms. All processes in this business area have been automated to the extent possible within the enterprise, resulting in a less labor-intensive workflow in all processes and improved efficiency and accuracy.

HIT Assessment Findings

The HIT assessment cross walked all CM processes, in case management and authorization determination, as being impacted by pending HIT capability implementation in the To-Be environment. The process areas are listed below:

- CM01 Establish Case
- CM02 Manage Case Information
- CM03 Manage Population Health Outreach
- CM04 Manage Registry
- CM05 Perform Screening and Assessment
- CM06 Manage Treatment Plan and Outcomes
- CM07 Authorize Referral
- CM08 Authorize Service
- CM09 Authorize Treatment Plan

All nine of the HIT capabilities are related to CM among patient engagement, clinical, public health, and master patient index categories. The implementation outcome provides opportunity for maturity of the business processes by the data exchange, analytics and reporting, and

promotion of interoperability to yield alignment with PRMP’s vision to “leverage technology advancements to improve healthcare outcomes for its citizens.”¹¹ Discreet CM business process areas are denoted back to the capabilities in the assessment.

The As-Is HIT environment of the PRMP includes the PRMMIS and the PREE. The PRMMIS is currently operational, with the PRMMIS Phase I having been implemented in March 2018 and the CMS certification of Phase I occurring in January 2020. The As-Is environment noted that Phase I capabilities include claims, encounters, and risk-based capitations payments processed by MCOs. The To-Be environment of the PRMMIS Phase II is anticipated to be implemented in December 2020, which includes all capabilities of case tracking, provider enrollment and provider screening via the PEP.¹² Similarly, PREE was assessed to have two releases, Release 1 and Release 2, expected to occur in the To-Be environment that leverages increased automation, data verification, reporting, and additional enhancements that might lead to opportunities for maturity in CM.

The HIE is currently connecting multiple EHR customers, laboratory systems, public health registries, and many other stakeholders to promote a network that is anticipated to support the care of populations in the To-Be environment. As a method of promoting patient education and outreach, provider, and patient portals could broaden the CM business area in the To-Be environment via increased health information access across various electronic mediums, including a mobile application. Many current and planned public health registries and disease surveillance programs, hospitals, and individual providers are also planned in the To-Be environment of expanding participation with the HIE and promoting interoperability.

Vision

The To-Be environment for the CM BA, IA, and TA is envisioned at Level 2. It is through the use of web-based communications, enhanced reporting capabilities, and improved vendor communications—which could allow for standardization, electronic forms, access to HIE and EHR data, automation via alerts, and increases in efficiency and accuracy on a broader scale across the enterprise through improved use of business rules.

The following processes are expected to increase in MITA maturity following implementation of a HIE: Establish Case, Manage Case Information, Manage Treatment Plan and Outcomes, Perform Screening, and Assessment. For the remainder of CM processes, some MITA capabilities might improve incrementally as a result of data exchange improvements planned as part of HIE projects to allow for automation of patient identification and tracking of patient treatment plans, health outcomes, immunization registry, and disease management.

Gap Analysis

Three processes—Establish Case (CM01), Manage Population Health Outreach (CM03), and Perform Screening and Assessment (CM05)—are at an As-Is MITA maturity Level 2. Six CM

¹¹ Source: PRMP MMIS and E&E Medicaid Update (MS PowerPoint Presentation), January 2020

¹² Puerto Rico Department of Health. Health Information Technology Assessment Report. July 2020

processes are at MITA maturity Level 1. It is expected that seven of the nine processes will mature over the next five years through advancements in data exchange and standardization from improvements to reporting and implementation of PRDoH HIE/EDW.

Description of Gaps

The To-Be MITA maturity level of the Establish Case process is expected to mature to Level 3 following implementation of data exchange improvements planned as part of upcoming HIE projects to allow for tracking of patient treatment plans, health outcomes, and disease management. ASES is implementing changes to automate and standardize reporting of patient health information from MCOs using XML format.

The To-Be MITA maturity level of the Manage Case Information process is expected to mature to Level 3 after implementation of the HIE, which might enable tracking of patient treatment plans, health outcomes, and disease management. ASES is implementing changes to automate and standardize reporting of patient health information from MCOs into XML format.

The To-Be MITA maturity level of the Manage Registry process is expected to increase to Level 2. Planned opportunities for advancement in maturity are anticipated with the implementation of a new immunization registry system, STC One, in November 2020.

The To-Be MITA maturity level of the Manage Treatment Plan and Outcomes process is expected to increase to Level 2. Maturity level might increase with adoption of further automation through data exchange improvements planned as part of HIE projects.

The To-Be MITA maturity level of the Perform Screening and Assessment process is expected to mature to Level 3 as a result of data exchange improvements planned as part of HIE projects to allow for tracking of patient treatment plans, health outcomes, and disease management.

The To-Be MITA maturity level of the Authorize Service process is expected to mature to Level 2. Data exchange improvements planned as part of HIE projects might allow increased collaboration, data sharing, and use of business rules in decision-making.

The To-Be MITA maturity level of the Authorize Treatment Plan process is expected to mature to Level 2 as a result of data exchange improvements planned as part of HIE projects to enable more agile business rule changes and data exchange.

Solution

Integral to increasing the maturity of the CM Business Area is the implementation of the PRDoH HIE/EDW. These solutions will enhance the capabilities of processes in the CM business activities, along with implementing enhanced use of electronic data exchange through electronic forms and use of the ShareFile for storage, management, and reporting of vendor and data partner agreements and business rules.

Table 6.2.1: CM Business Area – Maturity Level Profile (BA)

CM Business Area – Maturity Level Profile (BA)											
Business Process		Level 1		Level 2		Level 3		Level 4		Level 5	
CM01 – Establish Case	Maturing			As-Is		To-Be					
CM02 – Manage Case Information	Maturing	As-Is				To-Be					
CM03 – Manage Population Health Outreach	Non-Maturing			As-Is	To-Be						
CM04 – Manage Registry	Maturing	As-Is		To-Be							
CM05 – Perform Screening and Assessment	Maturing			As-Is		To-Be					
CM06 – Manage Treatment Plan and Outcomes	Maturing	As-Is		To-Be							
CM07 – Authorize Referral	Non-Maturing	As-Is	To-Be								
CM08 – Authorize Service	Maturing	As-Is		To-Be							
CM09 – Authorize Treatment Plan	Maturing	As-Is		To-Be							

IA Maturity Assessment

The CM Business Area IA remains at Level 1 in the As-Is environment and will further mature to Level 2 in the To-Be environment through the use of the enhanced data collection, analytics, reporting, and data exchange now available to the enterprise through XML automation of MCO reporting. Standard web-based communications, electronic forms, and communications automation through the use of business rules-driven alerts and document management workflows increase automation. These functions result in greater efficiency, accuracy, and utility to stakeholders, along with improvements related to accessing information. Provider enrollment systems include data models for the electronic data exchange between the enrollment system and state and federal agency licensing systems. The new eligibility system will help with population health models to enhance the current environment and plans for the future will help

ensure further maturity in the To-Be environment. The planned HIT implementation supports the IA with data governance and standardization plans to achieve greater knowledge of the data used in this business area and improve access, accuracy, and CM processes.

Table 6.2.2: CM Business Area – Maturity Level Profile (IA)

CM Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
CM 01 – Establish Case	Maturing	As-Is	To-Be			
CM 02 – Manage Case Information	Maturing	As-Is	To-Be			
CM 03 – Manage Population Health Outreach	Maturing	As-Is	To-Be			
CM 04 – Manage Registry	Maturing	As-Is	To-Be			
CM 05 – Perform Screening and Assessment	Maturing	As-Is	To-Be			
CM 06 – Manage Treatment Plan and Outcomes	Maturing	As-Is	To-Be			
CM 07 – Authorize Referral	Maturing	As-Is	To-Be			
CM 08 – Authorize Service	Maturing	As-Is	To-Be			
CM 09 – Authorize Treatment Plan	Maturing	As-Is	To-Be			

TA Maturity Assessment

The TA As-Is and To-Be maturity levels assessed in this update for the CM processes are identified in Table 5.8. The following systems comprise the CM TA in the PRME:

- Micro Information Processing (MIP) – ASES Accounting System
- ASES Electronic Data Warehouse (EDW)
- PRMMIS
- MCO Electronic Content Management (ECM)
- Email
- MS Excel
- Phone
- Fax
- PEP
- Pharmacy/Clinical Web Portal
- MCO Case Management Systems

Within this architecture, all processes have achieved As-Is maturity Level 1 and are expected to remain at Level 1 in the To-Be environment.

Table 6.2.3: CM Business Area – Maturity Level Profile (TA)

CM Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
CM 01 – Establish Case	Non- Maturing	As-Is	To-Be				
CM 02 – Manage Case Information	Non- Maturing	As-Is	To-Be				
CM 03 – Manage Population Health Outreach	Non- Maturing	As-Is	To-Be				
CM 04 – Manage Registry	Non- Maturing	As-Is	To-Be				

CM Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
CM 05 – Perform Screening and Assessment	Non- Maturing	As-Is	To-Be				
CM 06 – Manage Treatment Plan and Outcomes	Non- Maturing	As-Is	To-Be				
CM 07 – Authorize Referral	Non- Maturing	As-Is	To-Be				
CM 08 – Authorize Service	Non- Maturing	As-Is	To-Be				
CM 09 – Authorize Treatment Plan	Non- Maturing	As-Is	To-Be				

Seven Standards and Conditions

The CM Business Area was assessed at Level 1 maturity for the As-Is environment for all nine business processes and all Seven Standards and Conditions, and is envisioned to remain at Level 1 in the To-Be environment.

Table 6.2.4: CM Business Area – Maturity Level Profile (Seven Standards and Conditions)

CM Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
CM 01 – Establish Case	Non- Maturing	As-Is	To-Be				
CM 02 – Manage Case Information	Non- Maturing	As-Is	To-Be				
CM 03 – Manage	Non- Maturing	As-Is	To-Be				

CM Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
Population Health Outreach							
CM 04 – Manage Registry	Non-Maturing	As-Is	To-Be				
CM 05 – Perform Screening and Assessment	Non-Maturing	As-Is	To-Be				
CM 06 – Manage Treatment Plan and Outcomes	Non-Maturing	As-Is	To-Be				
CM 06 – Manage Treatment Plan and Outcomes	Non-Maturing	As-Is	To-Be				
CM 07 – Authorize Referral	Non-Maturing	As-Is	To-Be				
CM 08 – Authorize Service	Non-Maturing	As-Is	To-Be				
CM 09 – Authorize Treatment Plan	Non-Maturing	As-Is	To-Be				

6.3 Contractor Management

The CO Business Area includes nine business processes. These business processes include the solicitation, management, and closeout of administrative and health services contracts with state contractors. Contractors are defined as either vendors (e.g., entities that assist the state by performing prescribed work) or provider contractors (e.g., physicians or MCOs) that perform work on behalf of members.

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the 2019 MITA 3.0 SS-A, the CO Business Area was assessed at Level 1 with all business processes still requiring manual activities or intervention. PRMP interacts primarily with DXC to complete the business processes contained in the CO area. ASES contracts with several vendors, including the MCOs. The solicitation, information management, contract award, and closing out of contracts with state vendors are often completed using phone calls and paper based documentation mailed or faxed. There are no projects planned in the immediate future to increase maturity of the CO Business Area.

BA Maturity Assessment

This business area has remained stable in maturity in the prior MITA 3.0 SS-A in 2015. This business area remains at Level 1 in the As-Is environment due to the manual nature of the solicitation and contract award process. PRMP and ASES maintain separate internal contract management processes, and data is not shared between these entities. However, there are no current plans to integrate the process across PRMP and ASES, or to consolidate contractual information in a searchable format.

HIT Assessment Findings

The HIT assessment corroborates that ASES retains its own contract management processes, as well as the selection of MCOs for the managed care program. The MCOs, in turn, create a preferred provider network due to their contract with primary medical groups. This can potentially lead to improved interoperability between the PRMP and ASES that could yield increased facilitation of CO processes.

Vision

The To-Be environment for the CO Business Area is envisioned at Level 1. There are no current plans to implement improvements to the automation or data exchange capabilities of the CO business area.

Gap Analysis

There are no gaps in the CO Business Area or for any processes in this business area. None of the nine business processes will mature, and the To-Be environment will maintain the status quo. There is currently no change to the processes, nor are there currently any plans to improve the CO processes in the next five years.

Description of Gaps

There are no gaps in the CO Business Area or for any processes in this business area.

Solution

There are no current plans to raise the maturity of this business area within the next five years

Table 6.3.1: CO Business Area – Maturity Level Profile (BA)

CO Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
CO 01 – Manage Contractor Information	Non-Maturing	As-Is	To-Be				
CO 02 – Manage Contractor Communication	Non-Maturing	As-Is	To-Be				
CO 03 – Perform Contractor Outreach	Non-Maturing	As-Is	To-Be				
CO 04 – Inquire Contractor Information	Non-Maturing	As-Is	To-Be				
CO 05 – Produce Solicitation	Non-Maturing	As-Is	To-Be				
CO 06 – Award Contract	Non-Maturing	As-Is	To-Be				
CO 07 – Manage Contract	Non-Maturing	As-Is	To-Be				
CO 08 – Close Out Contract	Non-Maturing	As-Is	To-Be				
CO 09 – Manage Contractor Grievance and Appeal	Non-Maturing	As-Is	To-Be				

IA Maturity Assessment

The IA for CO has been assessed at Level 1 and will mature to Level 2, but many CO processes remain relatively manual with time-consuming activities. There are also issues in accuracy and efficiency within the following areas of data management:

- Administrative data
- APDs
- ShareFile
- Contracts and amendments
- Vendor lists
- Vendor information
- Solicitation packages
- Solicitation response information
- Logs and records
- Evaluation criteria and packages
- Purchase orders, addendums, and change orders
- Provider agreements
- Turnover plans
- Contract closeout notices and information
- Freedom of Information Act (FOIA) requests

Table 6.3.2: CO Business Area – Maturity Level Profile (IA)

CO Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
CO 01 – Manage Contractor Information	Maturing	As-Is	To-Be			
CO 02 – Manage Contractor Communication	Maturing	As-Is	To-Be			
CO 03 – Perform Contractor Outreach	Maturing	As-Is	To-Be			
CO 04 – Inquire	Maturing	As-Is	To-Be			

CO Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
Contractor Information						
CO 05 – Produce Solicitation	Maturing	As-Is	To-Be			
CO 06 – Award Contract	Maturing	As-Is	To-Be			
CO 07 – Manage Contract	Maturing	As-Is	To-Be			
CO 08 – Close Out Contract	Maturing	As-Is	To-Be			
CO 09 – Manage Contractor Grievance and Appeal	Maturing	As-Is	To-Be			

TA Maturity Assessment

The TA As-Is and To-Be maturity levels assessed in this update for the processes in the CO Business Area are identified in the table below. The CO TA was assessed as Level 1 because data is not shared between disparate systems, and PRMP and ASES access this information primarily through manual methods. The CO TA includes the following:

- ShareFile
- ASES EDW
- Internet
- Email
- Phone
- Fax
- MS Excel

Table 6.3.3: CO Business Area – Maturity Level Profile (TA)

CO Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
CO 01 – Manage Contractor Information	Non- Maturing	As-Is	To-Be				
CO 02 – Manage Contractor Communication	Non- Maturing	As-Is	To-Be				
CO 03 – Perform Contractor Outreach	Non- Maturing	As-Is	To-Be				
CO 04 – Inquire Contractor Information	Non- Maturing	As-Is	To-Be				
CO 05 – Produce Solicitation	Non- Maturing	As-Is	To-Be				
CO 06 – Award Contract	Non- Maturing	As-Is	To-Be				
CO 07 – Manage Contract	Non- Maturing	As-Is	To-Be				
CO 08 – Close Out Contract	Non- Maturing	As-Is	To-Be				
CO 09 – Manage Contractor Grievance and Appeal	Non- Maturing	As-Is	To-Be				

Seven Standards and Conditions

The applicable Seven Standards and Conditions for the CO Business Area are the Business Results, Industry Standards, Interoperability, Leverage, Modularity, and Reporting Conditions.

This business area’s Seven Standards and Conditions maturity was assessed as a Level 1 in both the As-Is and To-Be environments.

Table 6.3.4: CO Business Area – Maturity Level Profile (Seven Standards and Conditions)

CO Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
CO 01 – Manage Contractor Information	Non- Maturing	As-Is	To-Be				
CO 02 – Manage Contractor Communication	Non- Maturing	As-Is	To-Be				
CO 03 – Perform Contractor Outreach	Non- Maturing	As-Is	To-Be				
CO 04 – Inquire Contractor Information	Non- Maturing	As-Is	To-Be				
CO 05 – Produce Solicitation	Non- Maturing	As-Is	To-Be				
CO 06 – Award Contract	Non- Maturing	As-Is	To-Be				
CO 07 – Manage Contract	Non- Maturing	As-Is	To-Be				
CO 08 – Close Out Contract	Non- Maturing	As-Is	To-Be				
CO 09 – Manage Contractor Grievance and Appeal	Non- Maturing	As-Is	To-Be				

6.4 Eligibility and Enrollment

The EE Business Area includes eight business processes and are divided into two categories: Member Enrollment and Provider Enrollment. The business processes in the Member Enrollment category pertain to the determination of EE for new prospective members, redetermination for existing members, and enrolling and disenrolling members. Enrolling and disenrolling members is performed by each MCO. The MCOs are responsible for enrolling providers into health plans, and each MCO has its own process and system for provider enrollment. PRMP is in the process of implementing PREE and the PEP, which will enable providers to enroll as Medicaid providers in different MCOs through one online portal.

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the 2019 MITA 3.0 SS-A, the overall As-Is business maturity level for EE was determined to be Level 1 due to the number of processes requiring manual data entry or site visits. These business processes reflected compliance with changes in policy to determine Modified Adjusted Gross Income (MAGI) eligibility determination through automated means.

BA Maturity Assessment

The maturity of five of the EE processes is anticipated to increase to Level 2 following automation improvements that might be realized through implementation of the PRDoH HIE/EDW, PREE, and PEP systems. The overall MITA maturity for this process is expected to remain at Level 1 due to residual manual tasks required for the Determine Member Eligibility, Disenroll Member, and Inquire Member Eligibility business processes.

HIT Assessment Findings

In EE, the Determine Provider Eligibility (EE05) process was determined to be impacted by the HIT capability of prescription monitoring. Many HIE capabilities can support the To-Be environment. These capabilities were identified throughout the HIT assessment. Establishing interfaces for data verification is a particular goal that could improve EE.

The HIE implementation could lead to utilization of enterprise service bus (ESB) technology that leverages data from systems such as the PRMP's PDMP, PRMMIS, and EE systems. The data housed in an EDW supports promotion of reporting and patient portal initiatives. The vision alignment with PRMP goals includes the establishment of interfaces for data verification with both the PRMMIS and EE.¹³

The As-Is implementation of the PREE is in process and its outcome is seen as a potential connection to the exchange of data with the HIE via interoperability through bi-directional connections. The To-Be environment could leverage this exchange to share eligibility and benefit information to assist provider understanding of treatment options covered by payers,

¹³ Puerto Rico Department of Health. Health Information Technology Assessment Report. July 2020

thus providing opportunity for increased maturity.¹⁴ Further assessment has indicated that the completion of planned Releases 1 and 2 will extend the To-Be environment to provide a fully CMS-compliant system based on PRMP rules of citizen portal and appeals.¹⁵

Vision

The To-Be environment for all architectures within the EE Business Area are envisioned at Level 2 with the implementation automation improvements that might be realized through completion of the PRDoH HIE/EDW, PREE and PEP projects.

Gap Analysis

The EE processes in this business area currently assessed at Level 2 and will remain at Level 2 for the TA and IA. The processes in the EE Business Area for the BA and Seven Standards and Conditions assessed at an As-Is Level 1 and will remain at Level 1 in the To-Be environment.

Description of Gaps

The gaps that PRMP should consider addressing in the BA to achieve Level 2 include enhancing automation, efficiency, accuracy, access, and utility to stakeholders across the enterprise with eligibility determination decisions. The gaps that must be addressed in the IA are in the Member EE category and include improvements in data management; expansion of data-sharing capabilities and partners across the enterprise; communication; use of electronic forms for data capture; use of the capabilities for reporting, analytics, and data retrieval; enhanced use of business rules; and electronic information exchange between all state and federal agencies in the enterprise, vendors, members, providers, and other stakeholders.

The To-Be MITA maturity level of the Enroll Member (EE02) process might increase to Level 2. The maturity level might increase with the adoption of further automation through the implementation of the PREE system, the collaboration with other agencies to adopt HIPAA standards and EDI transactions, and the use of MAGI rules to determine eligibility.

PRMP is implementing a PEP to streamline and centralize the provider enrollment process. The PEP was fully implemented in May 2020. The MITA maturity level for the Determine Provider Eligibility process is expected to increase to Level 2 following the implementation of the PEP. The PEP will automatically verify the credentials submitted by providers during the application process through interfaces to federal and state databases. PRDoH is planning to use the PEP to monitor MCO contractual compliance with credentialing clauses and requirements. The PEP will also allow automation of the provider application fee collection through a web application.

The Enroll Provider (EE06) process is expected to increase to Level 2 after the implementation of the PEP. The PEP will include a centralized PEP that interfaces with the PRMMIS, simplifying

¹⁴ Puerto Rico Department of Health. Health Information Technology Assessment Report. July 2020

¹⁵ Puerto Rico Eligibility and Enrollment (PREE) Project. Schedule Update. May 2020.

the provider enrollment process by enabling a single point of contact for providers to enroll with multiple MCOs. Providers will enroll in Medicaid directly through PEP.

The PEP will provide a link to a web portal for provider applicants, state staff, and contractor staff to follow the provider enrollment process as set by the rules of the PRMP Provider Enrollment Administration. The portal will include information such as downloadable enrollment forms, claims and special billing forms, upcoming training announcements, field representatives' names and phone numbers, banner messages, a link to the agency website, and other state-approved material that might be useful to providers.

The To-Be MITA maturity Level of the Disenroll Provider (EE03) process is expected to increase to Level 2 following automation improvements planned with implementation of the PEP. Data accessibility might be improved following implementation of other HIT initiatives.

The To-Be MITA maturity level of the Inquire Provider Information (EE08) process is expected to increase to Level 2. After implementation of the full functionality of the PEP, provider directories are planned to be centralized.

Solution

The MITA maturity of the EE Business Area might increase with further automation through the implementation of the PREE system, the collaboration with other agencies to adopt HIPAA standards and EDI transactions, and the use of MAGI rules to determine eligibility.

After implementation of the full functionality of PEP, PRMP plans to centralize provider directories. The PEP will include a centralized provider enrollment portal interfacing with the PRMMIS, simplifying the provider enrollment process by enabling a single point of contact for providers to enroll with multiple MCOs. Providers will enroll in Medicaid directly through PEP. The PEP will provide a link to a web portal for provider applicants, state staff, and contractor staff to follow the provider enrollment process as set by the rules of the PRMP Provider Enrollment Administration.

Table 6.4.1.: EE Business Area – Maturity Level Profile (BA)

EE Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
EE 01 – Determine Member Eligibility	Non-Maturing	As-Is	To-Be				
EE 02 – Enroll Member	Maturing	As-Is		To-Be			

EE Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
EE 03 – Disenroll Member	Non-Maturing	As-Is	To-Be				
EE 04 – Inquire Member Eligibility	Non-Maturing	As-Is	To-Be				
EE 05 – Determine Provider Eligibility	Maturing	As-Is		To-Be			
EE 06 – Enroll Provider	Maturing	As-Is		To-Be			
EE 07 – Disenroll Provider	Maturing	As-Is		To-Be			
EE 08 – Inquire Provider Information	Maturing	As-Is		To-Be			

IA Maturity Assessment

The table below outlines the IA maturity level for EE is assessed as a Level 1 in both the As-Is and To-Be environments.

Table 6.4.2: EE Business Area – Maturity Level Profile (IA)

EE Business Area – Maturity Level Profile (IA)							
Business Process		Level 1	Level 2		Level 3	Level 4	Level 5
EE 01 – Determine Member Eligibility	Non-Maturing		As-Is	To-Be			
EE 02 – Enroll Member	Non-Maturing		As-Is	To-Be			
EE 03 – Disenroll Member	Non-Maturing		As-Is	To-Be			

EE Business Area – Maturity Level Profile (IA)							
Business Process		Level 1	Level 2		Level 3	Level 4	Level 5
EE 04 – Inquire Member Eligibility	Non- Maturing		As-Is	To-Be			
EE 05 – Determine Provider Eligibility	Non- Maturing		As-Is	To-Be			
EE 06 – Enroll Provider	Non- Maturing		As-Is	To-Be			
EE 07 – Disenroll Provider	Non- Maturing		As-Is	To-Be			
EE 08 – Inquire Provider Information	Non- Maturing		As-Is	To-Be			

TA Maturity Assessment

The TA for this business area is assessed at Level 2 maturity in the As-Is and To-Be environments, as outlined in the table below. The EE TA includes the following:

- PRMMIS
- PREE
- PEP
- MCO
- ASES EDW
- ECM
- Provider Enrollment, Chain, and Ownership System (PECOS)
- National Plan and Provider Enumeration System (NPPES)
- Mail
- EDI
- Email

- Fax

Table 6.4.3: EE Business Area – Maturity Level Profile (TA)

EE Business Area – Maturity Level Profile (TA)							
Business Process		Level 1	Level 2		Level 3	Level 4	Level 5
EE 01 – Determine Member Eligibility	Non-Maturing		As-Is	To-Be			
EE 02 – Enroll Member	Non-Maturing		As-Is	To-Be			
EE 03 – Disenroll Member	Non-Maturing		As-Is	To-Be			
EE 04 – Inquire Member Eligibility	Non-Maturing		As-Is	To-Be			
EE 05 – Determine Provider Eligibility	Non-Maturing		As-Is	To-Be			
EE 06 – Enroll Provider	Non-Maturing		As-Is	To-Be			
EE 07 – Disenroll Provider	Non-Maturing		As-Is	To-Be			
EE 08 – Inquire Provider Information	Non-Maturing		As-Is	To-Be			

Seven Standards and Conditions

The Seven Standards and Conditions maturity levels for EE are displayed in the table below. The Seven Standards and Conditions are assessed at Level 1 maturity in the As-Is and To-Be environments.

Table 6.4.4: EE Business Area – Maturity Level Profile (Seven Standards and Conditions)

EE Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
EE 01 – Determine Member Eligibility	Non-Maturing	As-Is	To-Be				
EE 02 – Enroll Member	Non-Maturing	As-Is	To-Be				
EE 03 – Disenroll Member	Non-Maturing	As-Is	To-Be				
EE 04 – Inquire Member Eligibility	Non-Maturing	As-Is	To-Be				
EE 05 – Determine Provider Eligibility	Non-Maturing	As-Is	To-Be				
EE 06 – Enroll Provider	Non-Maturing	As-Is	To-Be				
EE 07 – Disenroll Provider	Non-Maturing	As-Is	To-Be				
EE 08 – Inquire Provider Information	Non-Maturing	As-Is	To-Be				

6.5 Financial Management

The FM Business Area is a collection of 19 business processes. All business processes focus on the financial activities of ASES and PRMP, including the management and reporting of payments to and from providers, MCOs, insurers, drug manufacturers, vendors, and other agencies.

The following FM business processes are not applicable to Puerto Rico:

- FM03 Manage Estate Recovery
- FM05 Manage Cost Settlement
- FM08 Prepare Member Premium Invoice
- FM10 Manage Member Financial Participation

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the 2019 MITA 3.0 SS-A Annual Update, the overall BA maturity for the FM Business Area was assessed at Level 1. Two of the business processes had matured to Level 2 due to their mix of manual and automated processes. The business processes that were expected to remain at Level 2 or mature to Level 2 would do so because of a mix of manual and automated processes and the lack of a direct interface with the current accounting system.

BA Maturity Assessment

The PR's FM As-Is maturity is at Level 1 in the As-Is environment and Level 2 in the To-Be environment. The MITA maturity for the FM Business Area has improved overall since PR's 2015 MITA SS-A. In the 2015 MITA SS-A, the overall As-Is maturity level of FM was a 1, and the overall To-Be level was a 1. Since the MITA SS-A in 2015, PRDoH has automated data transfer and validation processes, which resulted in increased data quality and reliability.

Vision

PRMP and ASES expressed a desire to modernize financial processes, specifically around the Manage Capitation Payment (FM10) process, during the development of the FM To-Be state. A Financial Management Assessment (FMA) was conducted in 2020, and PRMP will use the FMA report to guide future financial system projects.

Gap Analysis

The current As-Is maturity of the FM BA, IA, and TA are assessed at Level 1, and this business area is envisioned to improve to Level 2 in the To-Be environment. The Seven Standards and Conditions are expected to remain at Level 1.

Description of Gaps

The To-Be maturity level of Manage Provider Recoupment (FM01) remains at Level 1. Although automation has increased through using HIPAA standard X12 transactions, since the 2015

MITA SS-A, PRDoH has not planned to implement direct payer-to-payer payments, which would be required to increase the maturity level to Level 2.

The To-Be maturity level of Manage TPL Recovery (FM02) is Level 2. Recommendations to achieve Level 2 include implementation of payer-to-payer coordination of benefits (COB) functionality. PRDoH should aim to improve timeliness through continued use of automation, with the goal of improving the TPL Recovery process. Implementation of KPIs to measure accuracy with a goal of improving accuracy to a standard of 90% could increase the relevance of information used in decision-making processes.

PRDoH has a plan for migration of the Manage Drug Rebate (FM04) process to the federal standards in 2022. PRDoH might wish to consider implementing processes to allow the execution of the Manage Estate Recovery as allowed contractually.

MITA SS-A analysis suggests that improving the accessibility of data and automated reporting processes and tools might help support gaining efficiencies within the FM process. Because information resides in multiple systems such as the ASES EDW, data must be pulled from several sources and manually integrated to allow insight into status and trends. Currently, real-time data is not consistently available from the data sources in the disparate financial systems to support timely decision-making. Implementation of enterprise data governance strategies might help streamline data validation and data integrity processes.

Centralized processing of financial data, including consolidation of the information into a central data store to create a direct interface from the data warehouse to the PRMMIS, could help increase the availability and quality of data. PR could improve timeliness through greater integration with the PRMMIS by reducing the number of transfer iterations and the need for validation after each file transfer.

The To-Be maturity level of Manage Accounts Receivable Information (FM06) is Level 2. Although some automated processes are used, communication between the accounting systems and the PRMMIS could be increased. Recommended actions to achieve Level 2 include:

- Increased use of HIPAA standard transactions.
- Increased communication and integration between PR's accounting system and the PRMMIS.
- Increased use of the MITA 3.0 Framework, as well as industry and national standards for information exchange.
- Increased process automation and standardization.

The To-Be maturity level of Manage Accounts Receivable (FM07) is Level 2. Recommended actions needed to achieve Level 2 include:

- Increased process automation and standardization.
- Increased use of the MITA 3.0 Framework, as well as industry and national standards for information exchange.
- Increased collaboration with other intrastate agencies to adopt national standards, and to develop and share reusable business services.
- Increased automation of information collection and implementation of decision support using standardized business rules, with a target accuracy of 99%.
- Increased intrastate information exchange, with a target of 95% efficiency.

The To-Be maturity level of Manage Contractor Payment (FM09) is Level 2. Recommended actions needed to achieve Level 2 include:

- Increased overall process automation and standardization.
- Increased use of the MITA 3.0 Framework, as well as industry and national standards for information exchange.
- Increased collaboration with other intrastate agencies to adopt national standards, and to develop and share reusable business services.
- Increased automation of information collection and implementation of decision support using standardized business rules.
- Increased intrastate information exchange, with a target of 95% efficiency.

The To-Be maturity level for Manage Capitation Payment (FM10) process is Level 2. To improve overall utility and value, automation and standardization are needed to facilitate distribution of clear and useful information.

To advance maturity, PRDoH should consider further adoption of recognized standards such as use of the HIPAA premium payment schema for identification of managed care enrollees and preparation of capitation premium payments. Additionally, PRDoH should further facilitate collaboration and data exchange between intrastate agencies and entities. Timeliness could be improved through closer integration with source data, and reduction of file transfers and data validation processes. Data access and accuracy could be increased from Level 1 maturity to Level 2 through the elimination of manual validation tasks via automation and the incorporation of standardized business rules.

To increase the Manage Incentive Payment (FM12) To-Be maturity to MITA Level 2, PRDoH should consider further automation of incentive calculation and processing. Additionally, increasing standardization might help reduce requirements for labor-intensive manual intervention in decision-making processes and provide greater availability of up-to-date information for decision support.

To increase the Manage Accounts Payable Information (FM13) To-Be maturity to MITA Level 2, PRDoH should consider a focus on continued automation of information collection using industry and national standards. To reduce end-to-end process time, it might be beneficial to direct attention toward increasing integration and regular communication between PR's accounting system and the PRMMIS.

To increase the Manage Accounts Payable Disbursement (FM14) To-Be maturity to MITA Level 2, PRDoH should consider prioritizing automation initiatives to implement standardized business rules, which might reduce error and improve accuracy. Implementation of KPIs to improve timeliness with a goal of no more than a week to complete a cycle could enhance process results.

The To-Be MITA maturity level of Formulate Budget (FM16) is Level 2. To reach Level 2, PRDoH should consider actions to reduce dependence on proprietary systems and data, implementing a Commercial Off-the-Shelf (COTS) or Software-as-a-Service (SaaS) Decision Support System solution to facilitate predictive modeling and expenditure forecasting. Closer collaboration with other intrastate agencies to exchange data using HIPAA-compliant transactions and EDI might reduce validation time and increase data reliability.

To increase the Manage Budget Information (FM17) To-Be maturity to MITA Level 2, PRDoH might consider prioritization of initiatives involving automation of transactions and increasing standardization through business rules, which might reduce the need for manual intervention in decision-making processes. Automation and standardization might contribute to increased accessibility and reliability of information.

The To-Be MITA maturity level of Manage Fund (FM18) is Level 2. Through introduction of COTS and SaaS solutions to support automation of financial functions, PRDoH could increase its ability to access information required for reporting and decision-making. Further integration with the PRMMIS, including integration of financial reporting structures, could increase data reliability.

The To-Be MITA maturity level of Generate Financial Report (FM19) is Level 2. Through increased use of standards and automation, PRDoH could reduce the end-to-end process time and increase readily available data for decision support. Confidence in data integrity might be improved through the development of KPIs to measure accuracy of the financial reporting process, with a target of 90% accuracy.

Solution

To advance MITA maturity, PR should consider incorporating more specific requirements for interfaces and data exchanges, reporting capabilities and frequency, and level of desired vendor support. These factors might not be known until after PRDoH decides on the scope of the procurement. Increased alignment with national standards could result in long-term cost savings by avoiding expensive customizations resulting from proprietary systems modifications to implement PR-specific policies.

An assumption with the To-Be vision is that PRMP is considering procuring a solution to implement more automation and standardization to financial processes. Increased data standardization might facilitate more seamless distribution of clear and useful information for financial reporting.

Table 6.5.1: FM Business Area – Maturity Level Matrix (BA)

FM Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
FM 01 – Manage Provider Recoupment	Non-Maturing	As-Is	To-Be				
FM 02 – Manage TPL Recovery	Maturing	As-Is		To-Be			
FM 03 – Manage Estate Recovery	N/A						
FM 04 – Manage Drug Rebate	Non-Maturing			As-Is	To-Be		
FM 05 – Manage Cost Settlement	N/A						
FM 06 – Manage Accounts Receivable Information	Maturing	As-Is		To-Be			
FM 07 – Manage Accounts Receivable Funds	Maturing	As-Is		To-Be			

FM Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
FM 08 – Prepare Member Premium Invoice	N/A						
FM 09 – Manage Contractor Payment	Maturing	As-Is		To-Be			
FM 10 – Manage Member Financial Participation	N/A						
FM 11 – Manage Capitation Payment	Maturing	As-Is		To-Be			
FM 12 – Manage Incentive Payment	Maturing	As-Is		To-Be			
FM 13 – Manage Accounts Payable Information	Maturing	As-Is		To-Be			
FM 14 – Manage Accounts Payable Disbursement	Maturing	As-Is		To-Be			
FM 15 – Manage 1099	Non-Maturing	As-Is	To-Be				
FM 16 – Formulate Budget	Maturing	As-Is		To-Be			
FM 17 – Manage Budget Information	Maturing	As-Is		To-Be			
FM 18 – Manage Fund	Maturing	As-Is		To-Be			

FM Business Area – Maturity Level Profile (BA)							
Business Process		Level 1	Level 2		Level 3	Level 4	Level 5
FM 19 – Generate Financial Report	Maturing	As-Is	To-Be				

IA Maturity Assessment

The IA maturity levels for FM are identified in the table below. The majority of financial processes are expected to increase to MITA maturity Level 2 through modernization of FM processes and systems.

Table 6.5.2: FM Business Area – Maturity Level Profile (IA)

FM Business Area – Maturity Level Profile (IA)							
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5	
FM 01 – Manage Provider Recoupment	Maturing	As-Is	To-Be				
FM 02 – Manage TPL Recovery	Maturing	As-Is	To-Be				
FM 03 – Manage Estate Recovery	N/A						
FM 04 – Manage Drug Rebate	Maturing	As-Is	To-Be				
FM 05 – Manage Cost Settlement	N/A						
FM 06 – Manage Accounts Receivable Information	Maturing	As-Is	To-Be				

FM Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
FM 07 – Manage Accounts Receivable Funds	Maturing	As-Is	To-Be			
FM 08 – Prepare Member Premium Invoice	N/A					
FM 09 – Manage Contractor Payment	Maturing	As-Is	To-Be			
FM 10 – Manage Member Financial Participation	N/A					
FM 11 – Manage Capitation Payment	Maturing	As-Is	To-Be			
FM 12 – Manage Incentive Payment	Maturing	As-Is	To-Be			
FM 13 – Manage Accounts Payable Information	Maturing	As-Is	To-Be			
FM 14 – Manage Accounts Payable Disbursement	Maturing	As-Is	To-Be			

FM Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
FM 15 – Manage 1099	Maturing	As-Is	To-Be			
FM 16 – Formulate Budget	Maturing	As-Is	To-Be			
FM 17 – Manage Budget Information	Maturing	As-Is	To-Be			
FM 18 – Manage Fund	Maturing	As-Is	To-Be			
FM 19 – Generate Financial Report	Maturing	As-Is	To-Be			

TA Maturity Assessment

The TA for FM has been assessed at Level 1 and will mature to Level 2 with improvements in technologies supporting most of the processes due to the implementations of financial process modernizations:

- Core
- Medinsight
- ASES EDW
- MIP
- SFTP
- PRMMIS
- Email
- Fax
- Phone
- MS Excel

Table 6.5.3: FM Business Area – Maturity Level Profile (TA)

FM Business Area – Maturity Level Profile (TA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
FM 01 – Manage Provider Recoupment	Maturing	As-Is	To-Be			
FM 02 – Manage TPL Recovery	Maturing	As-Is	To-Be			
FM 03 – Manage Estate Recovery	N/A					
FM 04 – Manage Drug Rebate	Maturing	As-Is	To-Be			
FM 05 – Manage Cost Settlement	N/A					
FM 06 – Manage Accounts Receivable Information	Maturing	As-Is	To-Be			
FM 07 – Manage Accounts Receivable Funds	Maturing	As-Is	To-Be			
FM 08 – Prepare Member Premium Invoice	N/A					
FM 09 – Manage Contractor Payment	Maturing	As-Is	To-Be			

FM Business Area – Maturity Level Profile (TA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
FM 10 – Manage Member Financial Participation		N/A				
FM 11 – Manage Capitation Payment	Maturing	As-Is	To-Be			
FM 12 – Manage Incentive Payment	Maturing	As-Is	To-Be			
FM 13 – Manage Accounts Payable Information	Maturing	As-Is	To-Be			
FM 14 – Manage Accounts Payable Disbursement	Maturing	As-Is	To-Be			
FM 15 – Manage 1099	Maturing	As-Is	To-Be			
FM 16 – Formulate Budget	Maturing	As-Is	To-Be			
FM 17 – Manage Budget Information	Maturing	As-Is	To-Be			
FM 18 – Manage Fund	Maturing	As-Is	To-Be			

FM Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
FM 19 – Generate Financial Report	Maturing	As-Is	To-Be				

Seven Standards and Conditions Maturity Assessment

The Seven Standards and Conditions maturity levels for FM processes are identified in the table below. The FM Business Area has achieved Level 1 maturity in the As-Is and is expected to remain at Level 1.

Table 6.5.4: FM Business Area – Maturity Level Profile (Seven Standards and Conditions)

FM Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
FM 01 – Manage Provider Recoupment	Non- Maturing	As-Is	To-Be				
FM 02 – Manage TPL Recovery	Non- Maturing	As-Is	To-Be				
FM 03 – Manage Estate Recovery	N/A						
FM 04 – Manage Drug Rebate	Non- Maturing	As-Is	To-Be				
FM 05 – Manage Cost Settlement	N/A						
FM 06 – Manage Accounts Receivable Information	Non- Maturing	As-Is	To-Be				

FM Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
FM 07 – Manage Accounts Receivable Funds	Non- Maturing	As-Is	To-Be				
FM 08 – Prepare Member Premium Invoice	N/A						
FM 09 – Manage Contractor Payment	Non- Maturing	As-Is	To-Be				
FM 10 – Manage Member Financial Participation	N/A						
FM 11 – Manage Capitation Payment	Non- Maturing	As-Is	To-Be				
FM 12 – Manage Incentive Payment	Non- Maturing	As-Is	To-Be				
FM 13 – Manage Accounts Payable Information	Non- Maturing	As-Is	To-Be				
FM 14 – Manage Accounts Payable Disbursement	Non- Maturing	As-Is	To-Be				

FM Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
FM 15 – Manage 1099	Non- Maturing	As-Is	To-Be				
FM 16 – Formulate Budget	Non- Maturing	As-Is	To-Be				
FM 17 – Manage Budget Information	Non- Maturing	As-Is	To-Be				
FM 18 – Manage Fund	Non- Maturing	As-Is	To-Be				
FM 19 – Generate Financial Report	Non- Maturing	As-Is	To-Be				

6.6 Member Management – *Future Release*

The ME Business Area was not assessed in the 2015 MITA 3.0 SS-A or in this MITA SS-A Annual Update. This business area is pending CMS release of the MITA artifacts for the states' use.

HIT Assessment Findings

The ME Business Area was briefly examined in the HIT assessment, showing that relevant ME HIT capabilities could be enabled through the implementation of the HIE. Capabilities of patient-generated health data, patient portal information, prescription monitoring, and patient identifiers will impact business processes within this area. The HIT assessment indicated improvement is being made in the direction of patient access and real-time record retrieval, which is a Medicaid requirement under the 21st Century Cures Act. The implementation of the HIE will establish both patient and provider portals that could allow for the ease of viewing and dissemination of important health information and promote participation of the HIE, which might lead to improved interoperability efforts in PR.

6.7 Operations Management

The OM Business Area encompasses nine business processes. This business area is critical to the administration of the Medicaid program and includes activities necessary for processing claims and encounters, applying mass adjustments for larger-scale claims reprocessing,

responding to payment inquiries, generating remittance advice, preparing provider payments, and managing the collection and transmittal of data.

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the period assessed for the 2019 MITA 3.0 SS-A Annual Update, the overall BA maturity level for OM was an As-Is Level 1 and a To-Be Level 1. The process assessments in the current environment were completed through fact-finding sessions with stakeholders, CMS MITA Business Process Forms, MCO Contracts, Excel spreadsheets, rTrace documentation, and email. The assessment of these business processes shows no improvement to this business area since the completion of the MITA 3.0 assessment in 2015.

BA Maturity Assessment

The overall BA maturity level for the OM Business Area has remained the same at As-Is Level 1 since the 2015 assessment. Most processes still require manual intervention for the completion of tasks. In the Submit Electronic Attachment (OM04) process, providers may submit clinical attachments in either paper or electronic format. There is also MCO manual intervention and data entry required to associate paper attachments to transactions and interpret data.

Although various transactions are electronic and automated in the Inquire Payment Status (OM18) process, the MCOs use a manual process for the payment of paper-based claims and use a mix of paper checks and EFT to send payments to providers. For the Apply Mass Adjustment (OM05) process, the MCOs use a combination of automated and manual processes and queries to define the scope of mass adjustments. Some of the OM processes are automated but require manual intervention and consolidation, such as Process Encounter (OM29). All of these processes mentioned previously are As-Is Level 1 and To-Be Level 2.

Regarding the Process Claim (OM07) process, the PRMMIS supports testing of new provider claims submission systems by allowing providers to submit electronic claims test files that are processed through the adjudication cycle without impact on system data. Claims processing is automated, and the majority of claims are processed electronically. The MCOs use a mix of proprietary format and HIPAA X12 827 files to report claims information. Clean claims are typically processed within 24 hours.

The Generate Remittance Advice (OM14) process is also automated for electronic transactions. The MCOs use a mix of proprietary format and HIPAA X12 827 files to exchange data with ASES and the PRMMIS.

Although the Manage Data (OM28) process primarily consists of manual data manipulation and consolidation, PRMP submits data on a monthly basis to CMS through the T-MSIS.

The Process Claim (OM07), Generate Remittance Advice (OM14), and Manage Data (OM28) are As-Is Level 2 and To-Be Level 2. Regarding the Calculate Spend-Down Amount (OM20), PR is not currently performing this process. As of July 2020, the implementation date for spend-down was still being determined.

HIT Assessment

The OM Business Area was found not to be impacted by the HIT capabilities planned for PR; however, the To-Be environment could yield opportunity for maturity by leveraging the HIE infrastructure, supporting capabilities, and potential future enhancements.

The promotion and expansion of interoperability by the advancement of the PRHIE could increase data sharing, validation, and reporting, which could be used to support the Medicaid program's administrative efforts. Reductions of duplicative efforts, improved timeliness of service delivery, and less reliance on paper-based mechanisms to electronic means are prospects of the To-Be environment, although not currently planned. These opportunities might improve the *OM04 Submit Electronic Attachment*, *OM28 Manage Data*, and *OM29 Process Encounter* business processes.

Vision

For the Submit Electronic Attachment (OM04) process, the PRMMIS is planned to accept Medicare crossover claims or Medicare Explanation of Benefits (EOB) claims attachments in future releases. For the Process Claim (OM07) process, ASES plans for the MCOs to submit claims information using XML format in place of the proprietary file format.

The PRMMIS is planned to accept Medicare crossover claims or Medicare EOB claims attachments in future releases.

Gap Analysis

There are no gaps in the OM Business Area or for any business processes in this business area. None of the nine business processes will mature, and the To-Be environment will maintain the status quo.

The maturity level might increase in the long term with the complete automation of the processes, including queries for reporting purposes and payments to providers; and the incrementing accuracy, accessibility, and standardization of data.

Description of Gaps

There are no gaps in the OM Business Area or for any business processes in this business area.

Solution

There are no current plans to raise the maturity of this business area within the next five years.

Table 6.7.1: OM Business Area – Maturity Level Profile (BA)

OM Business Area – Maturity Level Profile (BA)						
Business Process		Level 1		Level 2		Level 3
		Level 4	Level 5			
OM 04 – Submit Electronic Attachment	Non-Maturing	As-Is	To-Be			
OM 05 – Apply Mass Adjustment	Non-Maturing	As-Is	To-Be			
OM 07 – Process Claims	Non-Maturing			As-Is	To-Be	
OM 14 – Generate Remittance Advice	Non-Maturing			As-Is	To-Be	
OM 18 – Inquire Payment Status	Non-Maturing	As-Is	To-Be			
OM 20 – Calculate Spend-Down Amount	Non-Maturing	As-Is	To-Be			
OM 27 – Prepare Provider Payment	Non-Maturing	As-Is	To-Be			
OM 28 – Manage Data	Non-Maturing			As-Is	To-Be	
OM 29 – Process Encounter	Non-Maturing	As-Is	To-Be			

IA Maturity Assessment

The OM Business Area IA remains at Level 1 in the As-Is and will further mature to Level 2 in the To-Be environment through the use of the enhanced data collection, analytics, reporting, and data exchange now available to the enterprise through XML automation of MCO reporting. Standard web-based communications, electronic forms, and communications automation through the use of business rules-driven alerts and document management workflows increase automation. These functions result in greater efficiency, accuracy, and utility to stakeholders,

along with improvements related to accessing information. The PEP will include data models for electronic data exchange between the enrollment system and state and federal agency licensing systems. The new eligibility system and population health models will enhance the current environment, and plans for the future will help ensure further maturity in the To-Be environment. The planned HIT implementation supports the IA with data governance and standardization plans to achieve greater knowledge of the data used in this business area and improve access, accuracy, and OM processes.

Table 6.7.2: OM Business Area – Maturity Level Profile (IA)

OM Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
OM 04 – Submit Electronic Attachment	Maturing	As-Is	To-Be			
OM 05 – Apply Mass Adjustment	Maturing	As-Is	To-Be			
OM 07 – Process Claims	Maturing	As-Is	To-Be			
OM 14 – Generate Remittance Advice	Maturing	As-Is	To-Be			
OM 18 – Inquire Payment Status	Maturing	As-Is	To-Be			
OM 20 – Calculate Spend-Down Amount	Maturing	As-Is	To-Be			
OM 27 – Prepare Provider Payment	Maturing	As-Is	To-Be			
OM 28 – Manage Data	Maturing	As-Is	To-Be			

OM Business Area – Maturity Level Profile (IA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
OM 29 – Process Encounter	Maturing	As-Is	To-Be				

TA Maturity Assessment

The TA As-Is and To-Be maturity levels assessed in this update for the OM business processes are identified in Table 5.8. The following systems comprise the OM TA in the PRME:

- T-MSIS
- MIP
- PRMMIS
- MCO ECM
- Email
- MS Excel
- Phone
- Fax
- PEP
- Pharmacy/Clinical Web Portal
- MCO Case Management Systems

Within this architecture, all processes have achieved As-Is maturity Level 1 and are expected to remain at Level 1 in the To-Be environment.

Table 6.7.3: OM Business Area – Maturity Level Profile (TA)

OM Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
OM 04 – Submit Electronic Attachment	Non- Maturing	As-Is	To-Be				

OM Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
OM 05 – Apply Mass Adjustment	Non- Maturing	As-Is	To-Be				
OM 07 – Process Claims	Non- Maturing	As-Is	To-Be				
OM 14 – Generate Remittance Advice	Non- Maturing	As-Is	To-Be				
OM 18 – Inquire Payment Status	Non- Maturing	As-Is	To-Be				
OM 20 – Calculate Spend-Down Amount	Non- Maturing	As-Is	To-Be				
OM 27 – Prepare Provider Payment	Non- Maturing	As-Is	To-Be				
OM 28 – Manage Data	Non- Maturing	As-Is	To-Be				
OM 29 – Process Encounter	Non- Maturing	As-Is	To-Be				

Seven Standards and Conditions Maturity Assessment

The OM Business Area was assessed at Level 1 maturity for the As-Is environment for all nine business processes in all Seven Standards and Conditions and is envisioned to remain at Level 1 in the To-Be environment.

Table 6.7.4: OM Business Area – Maturity Level Profile (Seven Standards and Conditions)

OM Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
OM 04 – Submit Electronic Attachment	Non- Maturing	As-Is	To-Be				
OM 05 – Apply Mass Adjustment	Non- Maturing	As-Is	To-Be				
OM 07 – Process Claims	Non- Maturing	As-Is	To-Be				
OM 14 – Generate Remittance Advice	Non- Maturing	As-Is	To-Be				
OM 18 – Inquire Payment Status	Non- Maturing	As-Is	To-Be				
OM 20 – Calculate Spend-Down Amount	Non- Maturing	As-Is	To-Be				
OM 27 – Prepare Provider Payment	Non- Maturing	As-Is	To-Be				
OM 28 – Manage Data	Non- Maturing	As-Is	To-Be				
OM 29 – Process Encounter	Non- Maturing	As-Is	To-Be				

6.8 Performance Management

The PE Business Area involves five business processes. This business area includes the assessment of program compliance targeting specific groups, such as providers, members, or contractors. PE business processes focus on identifying, monitoring, and investigating unusual activity or utilization.

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the period assessed for the 2019 MITA 3.0 SS-A Annual Update, the overall BA maturity level for PE was an As-Is Level 1 and a To-Be Level 1. The process assessments in the current environment were completed through fact-finding sessions with stakeholders, CMS MITA Business Process Forms, Excel spreadsheets, MCO contracts, rTrace documentation, and email. The assessment of these business processes shows no improvement in this business area since the completion of the MITA 3.0 assessment in 2015.

BA Maturity Assessment

The overall BA maturity level for the PE Business Area has remained the same at As-Is Level 1 since the 2015 assessment. Although PRMP has implemented different tools and systems such as Insight Analytics and BusinessObjects, the Identify Utilization Anomalies (PE01) process involves the manual verification of utilization data.

All the PE processes require manual intervention to accomplish tasks. The collaboration with other agencies to standardize information exchange or business tasks is minimal in this process. The information is stored in different systems and susceptible to inconsistent or incorrect information.

PRMP is further developing its capacity to implement a program of KPIs across the PRME within the MITA Business Areas, which includes a set of digital tools to capture data for use in measurement and planning. This program has begun with the ASES MCO contracts but will expand to other contractors and business functional area over the next year. The KPI project will support management of performance indicators in this business area as well as others.

HIT Assessment

A goal of the PRHIN is to support and advance Medicaid interoperability. The To-Be environment is anticipated to connect Medicaid technologies to the HIE for progressing program improvement, value, and reporting in order to meet key objectives and KPI's. The PRHIN will adhere to federal goals and mandates that include ONC and CMS/Medicaid interoperability principles and goals such as the Medicaid Program Promoting Interoperability Program Eligible Professionals Objectives and Measures for 2020.¹⁶ As-Is and To-Be Medicaid technology, directories, systems, and infrastructure have opportunities to utilize the HIE technology so that

¹⁶ Puerto Rico Medicaid Program Health IT Roadmap. August 2020.

the information exchange efforts can be expanded and, in turn, continue supporting Medicaid priorities and initiatives.

The following business processes might become enabled beyond the HIE implementation efforts:

- PE01 Identify Utilization Anomalies
- PE02 Establish Compliance Incident
- PE03 Manage Compliance Incident Information

There is potential to leverage HIE implementation technology to allow for increased automation, reduced erroneous data through validation and normalization, and improved access to data that can be leveraged to improve analytics and reporting.

Vision

The To-Be environment is envisioned at Level 1 for this business area.

Gap Analysis

There are no gaps in the PE Business Area or for any processes in this business area. None of the nine business processes will mature, and the To-Be environment will maintain the status quo. There will be no change to the processes, nor are there plans to improve any of the processes in the next five years.

Description of Gaps

There are no gaps in the PE Business Area or for any processes in this business area.

Solution

There are no current plans to raise the maturity of this business area within the next five years.

Table 6.8.1: PE Business Area – Maturity Level Profile (BA)

PE Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PE 01 – Identify Utilization Anomalies	Non-Maturing	As-Is	To-Be				
PE 02 – Establish Compliance Incident	Non-Maturing	As-Is	To-Be				

PE Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PE 03 – Manage Compliance Incident Information	Non-Maturing	As-Is	To-Be				
PE 04 – Determine Adverse Action Incident	Non-Maturing	As-Is	To-Be				
PE 05 – Prepare REOMB	Non-Maturing	As-Is	To-Be				

IA Maturity Assessment

The IA for PE has been assessed at Level 1 and will mature to Level 2 in the To-Be environment through the use of enhanced data collection, analytics, reporting, and data exchange now available to the enterprise through XML automation of MCO reporting. Standard web-based communications, electronic forms, and communications automation through the use of business rules-driven alerts and document management workflows increase automation. These functions result in greater efficiency, accuracy, and utility to stakeholders, along with improvements related to accessing information. Provider enrollment systems include data models for the electronic exchange of data between the enrollment system and state and federal agency licensing systems. The new eligibility system and population health models will enhance the current environment, and plans for the future will help ensure further maturity in the To-Be environment. The planned HIT implementation supports the IA with data governance and standardization plans to achieve greater knowledge of the data used in this business area and improve access, accuracy, and PE processes.

Table 6.8.2: PE Business Area – Maturity Level Profile (IA)

PE Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
PE 01 – Identify Utilization Anomalies	Maturing	As-Is	To-Be			
PE 02 – Establish	Maturing	As-Is	To-Be			

PE Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
Compliance Incident						
PE 03 – Manage Compliance Incident Information	Maturing	As-Is	To-Be			
PE 04 – Determine Adverse Action Incident	Maturing	As-Is	To-Be			
PE 05 – Prepare REOMB	Maturing	As-Is	To-Be			

TA Maturity Assessment

The TA As-Is and To-Be maturity levels assessed in this update for the PE business processes are at Level 1 in the As-Is and will remain at Level 1. The following systems comprise the PE TA in the PRME:

- Insight Analytics
- BusinessObjects
- Case Tracking Tool
- PRMMIS
- Email
- MS Excel
- Phone
- Fax

Within this architecture, all processes have achieved As-Is maturity Level 1 and are expected to remain at Level 1 in the To-Be environment.

Table 6.8.3: PE Business Area – Maturity Level Profile (TA)

PE Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PE 01 – Identify Utilization Anomalies	Non-Maturing	As-Is	To-Be				
PE 02 – Establish Compliance Incident	Non-Maturing	As-Is	To-Be				
PE 03 – Manage Compliance Incident Information	Non-Maturing	As-Is	To-Be				
PE 04 – Determine Adverse Action Incident	Non-Maturing	As-Is	To-Be				
PE 05 – Prepare REOMB	Non-Maturing	As-Is	To-Be				

Seven Standards and Conditions

The PE Business Area was assessed at Level 1 maturity for the As-Is environment for all five business processes in all Seven Standards and Conditions and is envisioned to remain at Level 1 in the To-Be environment.

Table 6.8.4: PE Business Area – Maturity Level Profile (Seven Standards and Conditions)

PE Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PE 01 – Identify Utilization Anomalies	Non-Maturing	As-Is	To-Be				

PE Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PE 02 – Establish Compliance Incident	Non- Maturing	As-Is	To-Be				
PE 03 – Manage Compliance Incident Information	Non- Maturing	As-Is	To-Be				
PE 04 – Determine Adverse Action Incident	Non- Maturing	As-Is	To-Be				
PE 05 – Prepare REOMB	Non- Maturing	As-Is	To-Be				

6.9 Plan Management

The PL Business Area encompasses eight business processes. These processes focus on strategic planning, program oversight and monitoring, policy maintenance, and rate setting.

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the period assessed for the 2019 MITA 3.0 SS-A Annual Update, the overall BA maturity level for PL was an As-Is Level 1 and a To-Be Level 1. The process assessments in the current environment were completed through fact-finding sessions with stakeholders, CMS MITA Business Process Forms, and Excel spreadsheets. The assessment of these business processes shows no improvement to this business area since the completion of the MITA 3.0 assessment in 2015.

BA Maturity Assessment

The overall BA maturity level for the PL Business Area has remained the same at As-Is Level 1 since the 2015 assessment. The processes require manual paper-based activity to accomplish tasks, such as face-to-face informal interviewing, to collect data. Information is stored in disparate systems and analyzing performance measures data is a manual process. The data is not centrally stored or accessible across the enterprise. Measurement of performance against agency goals and objectives is challenging due to the level of manual effort required to compile, prepare, validate, and analyze data, allowing enforcement of only certain KPIs.

HIT Assessment Findings

The PL Business Area was found to be impacted by three clinical HIT capabilities: Events/Encounter Alerting, Care Plans, and Health Record. The *PL05 Manage Performance Measures* business process was assessed to be related to each of the aforementioned HIT capabilities, which could expand in maturity in the To-Be environment.

The HIE implementation is anticipated to create various alerts among many areas of the HIT ecosystem including immunization, integrated PDMP, and laboratory stakeholders via interoperability of admissions, discharges, and transfers (ADT) events and encounter alerting. The PDMP Integration Plan provides direction on opioid prescription and use, which allows for improved strategic planning and program oversight to improve the opioid epidemic.¹⁷ Similarly, laboratory alerts could yield improved clinical decision-making and health outcomes among multiple stakeholders regarding patient care plans and notification of health record updates.

Data analytics to be implemented via an analytics engine and interface by the analytics suite of the Clinical and Business Analytics product provided by the HIE vendor services is anticipated to promote performance measurement through, but not limited to, population management and quality metric reporting. Increased access to data and reporting capabilities via collaboration

¹⁷ Health Gorilla: Implementation Phase Proposal of the Puerto Rico Department of Health HIE. June 2020

with the PRHIN could be leveraged so that promotion of tactical planning initiatives and improved program administration to the SMA might be enabled.

Vision

The PRMP To-Be environment is envisioned at Level 1 for this business area. The MITA maturity level might improve with further automation of the data-gathering process and the use of tools to gather, record, analyze, and distribute information on goals and objectives.

Gap Analysis

All PL processes are currently at Level 1. Within the next five (5) years, PRMP expects that all three of eight processes will mature; however, the overall business area maturity will remain at Level 1.

Description of Gaps

The To-Be MITA maturity level of the Maintain Program Policy process is expected to remain at Level 1. The maturity level might improve with further automation of the process. PR policy is different because, as a territory, PR does not use the same benefits calculation formulas as the states. In December 2019, the PR Congress approved the federal budget for additional funds. PR had limited funding from the federal government, which required ASES and PRMP to ensure that PR has sufficient funds before making changes to the State Plan Amendment (SPA). The gaps that must be addressed to achieve business process improvement include further automation of the process. The To-Be MITA maturity Level of the Manage Performance Measures (PL05) process is expected to increase to Level 2. ASES is implementing changes to automate and standardize reporting from MCOs using XML format. Increases to process capability, data accuracy, and timeliness might occur after ASES begins requiring the MCOs to submit reports in XML format. Migration to XML might reduce the need for direct data entry and enable increased standardization of reporting.

PRMP may recognize additional MITA maturity level improvements after implementing KPIs to measure performance in critical areas. To continue increasing MITA maturity year-over-year, PRMP and ASES might consider revising and refining their final KPI set on a regular basis to help ensure the needs of the Medicaid Enterprise are met via vendor contracts and system functionality.

The To-Be MITA maturity level of the Manage Reference Information (PL07) process is expected to increase to Level 2 through expanded automation and standardization enabled by PRMMIS processing and reporting. PRMP may realize incremental MITA maturity improvements through expansion of existing capabilities of the PRMMIS to share data within intrastate agencies.

ASES performs oversight of the Manage Rate Setting (PL08) process. To define the rate cells and to calculate the capitation rate for each rate cell, ASES contracts with an actuarial vendor, Milliman. After Milliman defines the rate cells, ASES sends the rate cell information to the MCOs. The MCOs assign enrolled beneficiaries to rate cells based on demographics or chronic health condition.

As of May 2020, there were 37 rate cells. The high-cost, high-need (HCHN) rate cell classification is for the most expensive beneficiaries, including those with chronic illness, and is the highest reimbursed capitation rate cell.

The To-Be MITA maturity of Manage Rate Setting (PL08) process is also expected to increase to Level 2 with automation improvements to the FM systems. PRMP should continue data standardization and adoption of HIPAA standards. Increasing collaboration and data exchange capabilities between intrastate agencies may also increase MITA maturity.

Solution

The solutions mentioned on the Description of Gaps section will enhance the capabilities of processes in the PL business activities.

Table 6.9.1: PL Business Area – Maturity Level Profile (BA)

PL Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PL 01 – Develop Agency Goals and Objectives	Non-Maturing	As-Is	To-Be				
PL 02 – Maintain Program Policy	Non-Maturing	As-Is	To-Be				
PL 03 – Maintain State Plan	Non-Maturing	As-Is	To-Be				
PL 04 – Manage Health Plan Information	Non-Maturing	As-Is	To-Be				
PL 05 – Manage Performance Measures	Maturing	As-Is		To-Be			
PL 06 – Manage Health Benefit Information	Non-Maturing	As-Is	To-Be				
PL 07 – Manage Reference Information	Maturing	As-Is		To-Be			
PL 08 – Manage Rate Setting	Maturing	As-Is		To-Be			

IA Maturity Assessment

The PL Business Area IA remained at Level 1 in the As-Is and will increase to Level 2 in the To-Be through the use of the enhanced data collection, analytics, reporting, and data exchange now available to the enterprise through XML automation of MCO reporting. Standard web-based communications, electronic forms, and communications automation through the use of business rules-driven alerts and document management workflows increase automation. These functions result in greater efficiency, accuracy, and utility to stakeholders, along with improvements related to accessing information. Provider enrollment systems include data models for the electronic exchange of data between the enrollment system and state and federal agency licensing systems. The new eligibility system and population health models will enhance the current environment and plans for the future will help ensure further maturity in the To-Be environment. The planned HIT implementation supports the IA with data governance and standardization plans to achieve greater knowledge of the data used in this business area and improve access, accuracy, and PL processes.

Table 6.9.2: PL Business Area – Maturity Level Profile (IA)

PL Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
PL 01 – Develop Agency Goals and Objectives	Maturing	As-Is	To-Be			
PL 02 – Maintain Program Policy	Maturing	As-Is	To-Be			
PL 03 – Maintain State Plan	Maturing	As-Is	To-Be			
PL 04 – Manage Health Plan Information	Maturing	As-Is	To-Be			

PL Business Area – Maturity Level Profile (IA)						
Business Process		Level 1	Level 2	Level 3	Level 4	Level 5
PL 05 – Manage Performance Measures	Maturing	As-Is	To-Be			
PL 06 – Manage Health Benefit Information	Maturing	As-Is	To-Be			
PL 07 – Manage Reference Information	Maturing	As-Is	To-Be			
PL 08 – Manage Rate Setting	Maturing	As-Is	To-Be			

TA Maturity Assessment

The TA As-Is and To-Be maturity levels assessed in this update for the PL business processes are at Level 2 in the As-Is and will remain at Level 2. The following systems comprise the PL TA in the PRME:

- PRMMIS
- Email
- MS Excel
- Phone
- Fax

Within this architecture, all processes will remain at As-Is maturity Level 1 and are expected to remain at Level 1 in the To-Be environment.

Table 6.9.3: PL Business Area – Maturity Level Profile (TA)

PL Business Area – Maturity Level Profile (TA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PL 01 – Develop Agency Goals and Objectives	Non- Maturing	To-Be	As-Is				
PL 02 – Maintain Program Policy	Non- Maturing	To-Be	As-Is				
PL 03 – Maintain State Plan	Non- Maturing	To-Be	As-Is				
PL 04 – Manage Health Plan Information	Non- Maturing	To-Be	As-Is				
PL 05 – Manage Performance Measures	Non- Maturing	To-Be	As-Is				
PL 06 – Manage Health Benefit Information	Non- Maturing	To-Be	As-Is				
PL 07 – Manage Reference Information	Non- Maturing	To-Be	As-Is				
PL 08 – Manage Rate Setting	Non- Maturing	To-Be	As-Is				

Seven Standards and Conditions Maturity Assessment

The PL Business Area was assessed at Level 1 maturity for the AS-IS environment for all eight business processes in all Seven Standards and Conditions and is envisioned to remain at Level 1 in the To-Be environment.

Table 6.9.4: PL Business Area – Maturity Level Profile (Seven Standards and Conditions)

PL Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PL 01 – Develop Agency Goals and Objectives	Non- Maturing	As-Is	To-Be				
PL 02 – Maintain Program Policy	Non- Maturing	As-Is	To-Be				
PL 03 – Maintain State Plan	Non- Maturing	As-Is	To-Be				
PL 04 – Manage Health Plan Information	Non- Maturing	As-Is	To-Be				
PL 05 – Manage Performance Measures	Non- Maturing	As-Is	To-Be				
PL 06 – Manage Health Benefit Information	Non- Maturing	As-Is	To-Be				
PL 07 – Manage Reference Information	Non- Maturing	As-Is	To-Be				

PL Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PL 08 – Manage Rate Setting	Non- Maturing	As-Is	To-Be				

6.10 Provider Management

The PM Business Area encompasses five business processes. The focus of this business area is on managing provider information, outreach, and communication, in addition to terminations, grievances, and appeals when necessary.

Medicaid Enterprise MITA 3.0 Business Area Assessment

During the period assessed for the 2019 MITA 3.0 SS-A Annual Update, the overall BA maturity level for PM was an As-Is Level 1 and a To-Be Level 1. The process assessments in the current environment were completed through fact-finding sessions with stakeholders, CMS MITA Business Process Forms, Excel spreadsheets, MCO contracts, and email. The assessment of these business processes shows no improvement to this business area since the completion of the MITA 3.0 assessment in 2015.

BA Maturity Assessment

The overall BA maturity level for the PM Business Area has remained the same at As-Is Level 1 since the 2015 assessment. Although there is some automation in the processes, automation is limited, direct data entry is required, and outreach communications are manually generated by ASES. The outreach communications are generally in paper-based formats (email, fax, mail), and sent to the MCOs for dissemination to providers. The timeliness required to complete the communication to providers commonly varies depending on the urgency of the message.

The provider communications are not centralized. The MCOs give providers access to information using a web portal, and because each MCO maintains its own web portal, a provider may have to maintain logins to multiple portals. Communications are functionally, linguistically, culturally, and competency appropriate but are only distributed in English and Spanish as of June 2020. The timeliness and efficiency might vary by the MCO.

HIT Assessment Findings

Several PM business processes were identified as impacted by the HIT capabilities in the HIT Assessment. *PM01 Manage Provider Information* is facilitated through the PEP; *PM03 Perform Provider Outreach* is impacted by the prescription drug monitoring platform (PDMP), potentially an opportunity for maturity in the To-Be environment. These technologies could be leveraged to enhance certain capabilities for the PM Business Area upon completion of the HIE implementation.

An assessment of the To-Be HIE implementation includes the system integrator communication plan, which is dedicated to external and internal project communications among stakeholders; it will include activities for project promotion and communication among various mediums for outreach and marketing.¹⁸ Additionally, data aggregation and normalization are expected to be critical to the success of data quality and data integrity. This could lead to increased utilization of reporting capabilities and a reduction of barriers to data access to improve decision-making related to PM. Prospective HIT infrastructure, to be completed via HIE implementation, could provide opportunity for maturity of the PM business area in the To-Be environment.

Vision

PRMP envisions the To-Be environment at Level 1 for this business area. To improve to MITA maturity, PRMP needs to increase automation with HIPAA standard transactions, resulting in improved timeliness and accuracy of the process.

Gap Analysis

All PM processes are currently at Level 1. Within five years, PRMP expects that three of five processes will mature; however the overall business area maturity will remain at Level 1.

Description of Gaps

The To-Be MITA maturity level of Manage Provider Information is Level 2. The To-Be MITA maturity level is expected to increase due to improved automation from implementation of an HIE and the PEP. Implementation of an HIE might increase data accessibility and standardization. When fully implemented, the PEP will provide a secure enrollment site for providers and authorized users to review provider enrollment applications, upload attachments, and view audit trails. Providers will be able to check on the status or progress of provider enrollments through the PEP.

The To-Be MITA maturity level of Manage Provider Communication is expected to increase to Level 2. To increase MITA maturity, the PRMP might consider establishment of a formal communications plan for communications with providers. Increasing automation through the use of HIPAA standard transactions might increase the timeliness and accuracy of the process results.

The To-Be MITA maturity of Perform Provider Outreach is Level 2. Enhanced PRMMIS reporting capabilities from data provided by PEP might allow for greater visibility into the target population. PRMP's continued focus on automation through HIPAA standard transactions might help increase MITA maturity of this business process.

Solution

The solutions mentioned on the Description of Gaps section will enhance the capabilities of processes in the PM business activities.

¹⁸ Health Gorilla: Implementation Phase Proposal of the Puerto Rico Department of Health HIE

Table 6.10.1: PM Business Area – Maturity Level Profile (BA)

PM Business Area – Maturity Level Profile (BA)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PM 01 – Manage Provider Information	Maturing	As-Is		To-Be			
PM 02 – Manage Provider Communication	Maturing	As-Is		To-Be			
PM 03 – Perform Provider Outreach	Maturing	As-Is		To-Be			
PM 07 – Manage Provider Grievance and Appeal	Non-Maturing	As-Is	To-Be				
PM 08 – Terminate Provider	Non-Maturing	As-Is	To-Be				

IA Maturity Assessment

The PM Business Area IA increased to Level 2 in the As-Is and will remain at Level 2 in the To-Be through the use of the enhanced data collection, analytics, reporting, and data exchange now available to the enterprise through XML automation of MCO reporting. Standard web-based communications, electronic forms, and communications automation through the use of business rules-driven alerts and document management workflows increase automation. These functions result in greater efficiency, accuracy, and utility to stakeholders, along with improvements related to accessing information. Provider enrollment systems include data models for the electronic exchange of data between the enrollment system and state and federal agency licensing systems. The new eligibility system and population health models will enhance the current environment and plans for the future will help ensure further maturity in the To-Be environment. The planned HIT implementation supports the IA with data governance and standardization plans to achieve greater knowledge of the data used in this business area and improve access, accuracy, and PM processes.

Table 6.10.2: PM Business Area – Maturity Level Profile (IA)

PM Business Area – Maturity Level Profile (IA)							
Business Process		Level 1	Level 2		Level 3	Level 4	Level 5
PM 01 – Manage Provider Information	Non- Maturing		As-Is	To-Be			
PM 02 – Manage Provider Communication	Non- Maturing		As-Is	To-Be			
PM 03 – Perform Provider Outreach	Non- Maturing		As-Is	To-Be			
PM 07 – Manage Provider Grievance and Appeal	Non- Maturing		As-Is	To-Be			
PM 08 – Terminate Provider	Non- Maturing		As-Is	To-Be			

TA Maturity Assessment

The TA As-Is and To-Be maturity levels assessed in this update for the PM business processes are at Level 2 in the As-Is and will remain at Level 2. The following systems comprise the PM TA in the PRME:

- T-MSIS
- MIP

PRMMIS

- MCO ECM
- Email
- MS Excel
- Phone
- Fax

- PEP
- Pharmacy/Clinical Web Portal
- MCO Case Management Systems

Within this architecture, all processes have achieved As-Is maturity Level 2 and are expected to remain at Level 2 in the To-Be environment.

Table 6.10.3: PM Business Area – Maturity Level Profile (TA)

PM Business Area – Maturity Level Profile (TA)							
Business Process		Level 1	Level 2		Level 3	Level 4	Level 5
PM 01 – Manage Provider Information	Non- Maturing		As-Is	To-Be			
PM 02 – Manage Provider Communication	Non- Maturing		As-Is	To-Be			
PM 03 – Perform Provider Outreach	Non- Maturing		As-Is	To-Be			
PM 07 – Manage Provider Grievance and Appeal	Non- Maturing		As-Is	To-Be			
PM 08 – Terminate Provider	Non- Maturing		As-Is	To-Be			

Seven Standards and Conditions Maturity Assessment

The PM Business Area was assessed at Level 1 maturity for the As-Is environment for all five business processes in all Seven Standards and Conditions. PRMP envisions this business area will remain at Level 1 in the To-Be environment.

Table 6.10.4: PM Business Area – Maturity Level Profile (Seven Standards and Conditions)

PM Business Area – Maturity Level Profile (Seven Standards and Conditions)							
Business Process		Level 1		Level 2	Level 3	Level 4	Level 5
PM 01 – Manage Provider Information	Non- Maturing	As-Is	To-Be				
PM 02 – Manage Provider Communication	Non- Maturing	As-Is	To-Be				
PM 03 – Perform Provider Outreach	Non- Maturing	As-Is	To-Be				
PM 07 – Manage Provider Grievance and Appeal	Non- Maturing	As-Is	To-Be				
PM 08 – Terminate Provider	Non- Maturing	As-Is	To-Be				

7.0 IA Update

IA is a subset of documentation and information gathered and validated for each business process that describes a logical architecture for the PRME. The information strategy, architecture, and data for the enterprise business needs are captured in the models and documentation that form this component of the Enterprise Architecture (EA). PR uses IA to define common data needs that will enable future business processes.

The MITA 3.0 IA maps enterprise data to the PR business processes. The documentation for these required components is in development, to support the five components of IA:

- DMS
- CDM
- LDM
- Data Standards (DS)
- ICM

BerryDunn has created an IA Scorecard Workbook to support the components of the PRME IA, and the data supporting the IA Scorecard Workbook is maintained on the PR SharePoint site. The following subsections describe the artifacts created in the IA Scorecard Workbook to support each component. The IA Scorecard Workbook is compiled from the IA MITA assessment performed by BerryDunn. PRMP maintains each IA MITA assessment in the IA folder on the SharePoint site.

7.1 Data Management Strategy

The PR DMS approach to maturation of the Medicaid Enterprise IA is in process and is expected to be finalized as part of the next annual update. Currently, the DMS is comprised of disparate documentation of data definition and data-sharing workflows that are being analyzed and consolidated into a strategic approach that will support accurate and effective data management for the enterprise.

7.2 Conceptual Data Model

The PRME CDM is under development in conjunction and alignment with the design, development, and implementation of Phase II of the PRMMIS and is expected to be finalized prior to completion of the next annual update.

7.3 Logical Data Model

The PRME LDM is under development in conjunction and alignment with the design, development, and implementation of Phase II of the PRMMIS and is expected to be finalized prior to completion of the next annual update.

7.4 Data Standards

The use of DS for the PRME is being documented and validated in conjunction and alignment with the design, development, and implementation of Phase II of the PRMMIS and other system development projects. This documentation is expected to be completed prior to the next annual update.

7.5 Information Capability Matrix

This MITA SS-A Annual Update has revealed that some advancements in the As-Is environments for components of the IA in most business areas have occurred since the 2015 MITA 3.0 SS-A was conducted. However, with no new system implementation in the interim between the 2015 and 2019 assessments, no significant maturity has occurred in any business areas since the last MITA 3.0 SS-A was conducted. Any subsequent implementations and enhancements will result in a more mature IA for the PRME with improved data management, governance, analytics, and reporting; enhanced data collection and exchange; conceptual and logical data modeling; and the standardization of the electronic exchange of data between systems. Additionally, IA maturity will be achieved with the development and implementation of a PRME DMS, establishment of data governance infrastructure, as well as the implementation of standard web-based communications, electronic forms, and communications automation using business-rules-driven alerts and document management workflows.

Additionally, BerryDunn is updating the IA To-Be target goals in this assessment for each business process. Business process and technology investment initiatives will mature the IA of many processes (and most business areas) in the next five years. The PRDoH HIE/EDW implementation will create new opportunities to mature the IA new data sources and capabilities. PR will continue to assess the MITA IA capabilities in support of MITA business processes and the results will be included in the next MITA Annual Update. Closer examination of how HIT will impact the IA of the ME within the MITA 3.0 Framework and capabilities model will likely reveal the potential for greater levels of maturity through these improvements. More information about how this project and others identified in the visioning for this project will support Information Capability maturity can be found in the MITA 3.0 SS-A Roadmap Transition and Sequencing Plan attached to this report.

8.0 TA Update

The PRME TA, as defined by the set of business and technical services identified in Section 6.0 are included in this section. The TA Framework describes the technical and application design aspects of the Medicaid Enterprise with additional supporting evidence of system documentation and specifications. The PRME has documentation of the required TA components listed below that are in development:

- TMS
- Business Services
- Technical Services
- Application Architecture
- Technical Standards
- TCM

BerryDunn has created a TA Scorecard Workbook to support the components of the PRME TA and the data supporting the TA Scorecard Workbook is maintained on the PR SharePoint site. The following subsections describe the artifacts created in the TA Scorecard Workbook to support each component. The TA Scorecard Workbook is compiled from the TA MITA assessment performed by BerryDunn assessors. Each TA MITA assessment update is maintained in the TA folder on the SharePoint site.

8.1 TMS

The PR TMS approach to maturation of the Medicaid Enterprise TA is in process and is expected to be finalized prior to the next annual update. Currently, the TMS is comprised of disparate documentation of data definition and data-sharing workflows that are being analyzed and consolidated into a strategic approach that will support accurate and effective data management for the enterprise.

8.2 Business Services

The Medicaid Enterprise Business Services descriptions have been documented in the BCMS for this SS-A. Workflows for the business services that allow interoperable Medicaid business processes for business process were developed and are included as an attachment to the MITA SS-A Report in the 2019 MITA SS-A Annual Update TA Scorecard Workbook.

8.3 Technical Services

The PRMP Technical Services are documented in artifacts of this SS-A, which are the TA Scorecard Workbook, the TCM, and the system supporting documentation by BerryDunn. The TA Scorecard Workbook defines the common factors of the Medicaid Enterprise design with the Medicaid Enterprise MITA 3.0 Framework. These documents provide the detailed set of the

MITA capabilities that collectively define the PRME MITA technology infrastructure in terms of modularity and interoperability.

8.4 Application Architecture

The PRME uses the following systems and applications to perform Medicaid business processes:

- MIP
- PRMMIS
- OnBase
- ASES Seamless and Integrated System Technology (ASSIST) (ASES' core system)
- SFTP
- ShareFile
- MedInsight (Milliman proprietary system)
- PREE
- PEP
- MCO ECM
- ASES EDW
- rTrace
- ASES and DXC web portals

8.5 Technology Standards

The Technology Standards for the PRME are being documented and validated in conjunction and alignment with the design, development, and implementation of the Phase II of the PRMMIS and other system development projects and are expected to be finalized prior to the next annual update.

8.6 TCM

The PRME TCMs are documented for each business process at each level of maturity describing one or more technical services for this SS-A. The TCMs are included as an attachment to the MITA SS-A Report. The PRDoH HIE/EDW implementation will create significant new opportunities to mature the TA new data sources and capabilities. CMS provides the framework for states to conduct a MITA HIT assessment and roadmap as a companion to or in conjunction with the MITA SS-A Annual Update. The MITA HIT assessment aligns the HIT solutions with MITA Technical Capabilities to support MITA business processes that can be achieved HIT solutions to be fully integrated with the PRME. Conducting a MITA HIT

assessment will be part of the next MITA SS-A Annual Update. Closer examination of how HIT will impact the TA of the PRME within the MITA 3.0 Framework and capabilities model might reveal the potential for greater levels of maturity through these improvements. More information about how the HIT project and all others identified in the leadership visioning session for this project will support Technical Capability maturity can be found in the MITA 3.0 SS-A Roadmap Transition and Sequencing Plan attached to this report.

9.0 Seven Standards and Conditions Update

PR has analyzed how the BA, IA, and TA of the Medicaid Enterprise support the Seven Standards and Conditions that CMS regulations requires states to adhere to in order for Medicaid technology investments to be eligible for enhanced federal matching funds.

This SS-A includes the Seven Standards and Conditions maturity profile and gap analysis. The Seven Standards and Conditions Scorecard Workbook can be found as an attachment to the MITA SS-A Report. A closer examination of how the PRDoH HIE/EDW implementation will improve the maturity of the Seven Standards and Conditions for MITA and the ability of PRMP to support future PRME improvements and maturity can be found in the MITA 3.0 SS-A Roadmap Transition and Sequencing Plan.

10.0 Conclusion

The 2019 MITA SS-A Annual Update determined that 14 processes have increased in MITA maturity since the 2015 MITA SS-A, and 32 processes are expected to increase in MITA maturity within the next five years. No significant improvement in MITA business process maturity was identified at the business area level in any business area assessed.

PR is committed to aligning its enterprise to the MITA 3.0 Framework for greater maturity through the implementation of the solutions and processes identified as part of the SS-A for the 2019 MITA SS-A Annual Update. The MITA 3.0 SS-A Roadmap Transition and Sequencing Plan that accompanies this report details the approach to process improvements that are desired by the state to reach higher levels of maturity in the coming years through planning, technology and organizational enhancements and improvements. Upon completion and approval of the MITA 3.0 SS-A 2019 Annual Update, PR will begin a 12-month period to prepare for and complete the 2020 MITA SS-A Annual Update, during which time it will continue to develop MITA tools and documentation and utilize the SS-A to improve business processes and guide technology investments across the PRME. The PRDoH HIE/EDW implementation has the potential to significantly contribute to the future maturity of the PRME through leverage and modularity. PRMP will continue to assess HIT components that fall within the PRME to provide greater insight into the potential for maturity within the MITA 3.0 Framework and capabilities model improvements. Additionally, full implementation of the PREE and expanded use of the recently implemented PEP are expected to contribute to greater process maturity for all architectures in the coming year. Organizational changes may result in BA improvements as well. These will be reassessed in the next MITA SS-A Annual Update.

Appendix A: PR 2015 MITA SS-A Summary of Assessment

The 2015 MITA SS-A BR Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the BR Business Area based on the MITA capability matrix. As illustrated, the As-Is maturity level for all business processes is a Level 1, and the To-Be maturity level will remain a Level 1. BR data was not in scope for Release 1, and therefore maturity level improvements were anticipated by PRMP in a future release.

2015 MITA SS-A BR Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
BR01 Establish Business Relationship	1	1
BR02 Manage Business Relationship Information	1	1
BR03 Terminate Business Relationship	1	1
BR04 Manage Business Relationship Communication	1	1
Overall Business Area Maturity Level	1	1

The 2015 MITA SS-A CM Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the CM Business Area based on the MITA capability matrix. As illustrated, the As-Is maturity level for all business processes is a Level 1, and the To-Be maturity level will remain a Level 1. CM data was not in scope for Release 1, and therefore PRMP anticipated maturity level improvements in a future release.

2015 MITA SS-A CM Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
CM01 Establish Case	1	1
CM02 Manage Case Information	1	1
CM03 Manage Population Health Outreach	1	1
CM04 Manage Registry	1	1

2015 MITA SS-A CM Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
CM05 Perform Screening and Assessment	1	1
CM06 Manage Treatment Plan and Outcomes	1	1
CM07 Authorize Referral	1	1
CM08 Authorize Service	1	1
CM09 Authorize Treatment Plan	1	1
Overall Business Area Maturity Level	1	1

The 2015 MITA SS-A CO Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the CO Business Area based on the MITA capability matrix. As illustrated, the As-Is maturity level for all business processes is a Level 1, and the To-Be maturity level is anticipated to be a Level 1. CO data is not in scope for Release 1, and therefore PRMP anticipates maturity level improvements in a future release.

2015 MITA SS-A CO Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
CO01 Manage Contractor Information	1	1
CO04 Inquire Contractor Information	1	1
CO02 Manage Contractor Outreach	1	1
CO03 Perform Contractor Outreach	1	1
CO09 Manage Contractor Grievance and Appeal	1	1
CO05 Produce Solicitation	1	1
CO06 Award Contract	1	1
CO07 Manage Contract	1	1
CO08 Close Out Contract	1	1

2015 MITA SS-A CO Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
Overall Business Area Maturity Level	1	1

The 2015 MITA SS-A EE Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the EE Business Area based on the MITA capability matrix. As illustrated, The As-Is and To-Be maturity levels for the business area are expected to remain at a Level 1 and 2, respectively. There were no expected changes to the EE processes as a result of Release 1. The overall business area level is expected to remain a Level 1.

2015 MITA SS-A EE Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
EE01 Determine Member Eligibility	1	1
EE02 Enroll Member	2	2
EE03 Disenroll Member	1	1
EE04 Inquire Member Eligibility	2	2
EE05 Determine Provider Eligibility	1	1
EE06 Enroll Provider	1	1
EE07 Disenroll Provider	1	1
EE08 Inquire Provider Information	1	1
Overall Business Area Maturity Level	1	1

The 2015 MITA SS-A FM Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the FM Business Area based on the MITA capability matrix. As illustrated, the As-Is maturity level for the majority of business processes is a Level 1. The To-Be maturity level is anticipated to increase to a Level 2 for five of the nineteen business areas as a result of Release 1, but the overall business area level is expected to remain a Level 1.

2015 MITA SS-A FM Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
FM01 Manage Provider Recoupment	1	2
FM02 Manage TPL Recovery	1	1
FM03 Manage Estate Recovery	N/A	N/A
FM04 Manage Drug Rebate	1	2
FM05 Manage Cost Settlement	N/A	N/A
FM06 Manage Accounts Receivable Information	1	1
FM07 Manage Accounts Receivable Funds	1	1
FM08 Prepare Member Premium Invoice	N/A	N/A
FM09 Manage Contractor Payment	1	1
FM10 Manage Member Financial Participation	N/A	N/A
FM11 Manage Capitation Payment	1	2
FM12 Manage Incentive Payment	1	2
FM13 Manage Accounts Payable Information	1	1
FM14 Manage Accounts Payable Disbursement	1	1
FM15 Manage 1099	1	1
FM16 Formulate Budget	1	1
FM17 Manage Budget Information	1	1
FM18 Manage Fund	1	1
FM19 Generate Financial Report	1	2

2015 MITA SS-A FM Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
Overall Business Area Maturity Level	1	1

The business process maturity matrix for ME has not been published by CMS for MITA 3.0, so no assessment of the business processes was performed.

The 2015 MITA SS-A OM Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the OM Business Area based on the MITA capability matrix. As illustrated, the As-Is maturity level for the majority of business processes is a Level 1, with some business processes reaching a maturity Level 2 as a result of Release 1. The As-Is and To-Be maturity levels for the business area are expected to remain at a Level 1 and 2, respectively, but the overall business area level is expected to remain a Level 1.

2015 MITA SS-A OM Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
OM14 Generate Remittance Advice	1	1
OM18 Inquire Payment Status	1	1
OM27.1 Prepare Provider Payment (HCBS Payment)	1	1
OM27.2 Prepare Provider Payment (Capitation Payment)	1	1
OM28 Manage Data	1	2
OM04 Submit Electronic Attachment	1	1
OM05 Apply Mass Adjustment	2	2
OM07 Process Claims	2	2
OM20 Calculate Spend-Down Amount	N/A	N/A
OM29 Process Encounters	2	2
Overall Business Area Maturity Level	1	1

The 2015 MITA SS-A PE Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the PE Business Area based on the MITA capability matrix. As illustrated, the overall As-Is maturity rating for the business area is a Level 1. The overall business area To-Be maturity rating will remain a Level 1, with some business processes exceeding Level 1 as a result of Release 1. The overall business area level is expected to remain a Level 1.

2015 MITA SS-A PE Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
PE04 Determine Adverse Action Incident	1	1
PE01 Identify Utilization Anomalies	1	2
PE02 Establish Compliance Incident	1	1
PE03 Manage Compliance Incident Information	1	1
PE05 Prepare REOMB	N/A	2
Overall Business Area Maturity Level	1	1

The 2015 MITA SS-A PL Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the PL Business Area based on the MITA capability matrix. As illustrated, the As-Is maturity level is a Level 1, and the To-Be maturity level is expected to remain at a Level 1 with two of the eight business processes advancing from a maturity Level 1 to a maturity Level 2 as a result of Release 1. The overall business area To-Be maturity rating will remain a Level 1.

2015 MITA SS-A PL Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
PL01 Develop Agency Goals and Objectives	1	1
PL02 Maintain Program Policy	1	1
PL03 Maintain State Plan	1	1
PL04 Manage Health Plan Information	1	2

2015 MITA SS-A PL Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
PL05 Manage Performance Measures	1	2
PL06 Manage Health Benefit Information	1	1
PL07 Manage Reference Information	1	1
PL08 Manage Rate Setting	1	1
Overall Business Area Maturity Level	1	1

The 2015 MITA SS-A PM Business Area Summary Table below illustrates the As-Is and To-Be maturity level results for each business process in the PM Business Area based on the MITA capability matrix. As illustrated, the As-Is maturity level for all business processes is a Level 1. The To-Be maturity level is expected to remain a Level 1. There were no expected changes to the PM processes because of Release 1. The overall business area To-Be maturity rating will remain a Level 1.

2015 MITA SS-A PM Business Area Summary Table		
Business Process	As-Is Maturity Level	To-Be Maturity Level
PM01 Manage Provider Information	1	1
PM08 Terminate Provider	1	1
PM02 Manage Provider Communication	1	1
PM03 Perform Provider Outreach	1	1
PM07 Manage Provider Grievance and Appeal	1	1
Overall Business Area Maturity Level	1	1

Appendix B: Business Process Forms and Capabilities

The Business Process Forms and capabilities completed during the 2019 MITA SS-A are maintained as artifacts supporting this report by PRMP.

Appendix C: SS-A Terms and Acronyms

Table C1 includes a list of terms and acronyms used this this report.

Table C1: SS-A Terms and Acronyms

Term/Acronym	Definition/Explanation
Act 72	Act Number 72 of 1993
ADT	Admissions, Discharges, and Transfers
APD	Advance Planning Document
ASES	Administración de Seguros de Salud de Puerto Rico
ASSIST	ASES Seamless and Integrated System Technology (ASES' core system)
BA	Business Architecture
BR	Business Relationship Management
BCM	Business Capability Matrix
CDM	Conceptual Data Model
CFR	Code of Federal Regulations
CHIP	Children's Health Insurance Program
CM	Care Management
CMS	Centers for Medicare & Medicaid Services
CO	Contractor Management
COB	Coordination of Benefits. All health insurance plans in PR, including the MCOs and private insurance plans, are required to send a monthly COB file to ASES. After ASES receives the COB file, it is validated against Medicaid eligibility data to confirm that private insurance is billed first. ASES pays the amount not covered under private insurance.
COO	Concept of Operations
COTS	Commercial Off-the-Shelf
DMS	Data Management Strategy
DS	Data Standards
DXC	DXC Technology, legal business entity name is Enterprise Caribe in PR
EDI	Enterprise Architecture
EDI	Electronic Data Interchange
EDW	Enterprise Data Warehouse developed by ASES financials and with PRMMIS support

Term/Acronym	Definition/Explanation
EE	Eligibility and Enrollment Management
EFT	Electronic Funds Transfer
EHR	Electronic Health Records
EOMC	Enterprise Objective Monitoring and Control
FM	Financial Management
FMA	Financial Management Assessment
GAAP	Generally Accepted Accounting Principles
HCHN	High Cost High Need
HIE	Health Information Exchange
HIPAA	Health Insurance Portability and Accountability Act
HIT	Health Information Technology
HITECH	Health Information Technology for Economic and Clinical Health
HL7	Health Level Seven
IA	Information Architecture
ICM	Information Capability Matrix
IRS	Internal Revenue Service
IT	Information Technology
KPI	Key Performance Indicator
LDM	Logical Data Model
MAC	Maximum Allowable Cost. List of MAC to be paid by ASES and contracted entities for off-patent brand name drugs and generic drugs to the participating pharmacies in the pharmacy network of each PPM. The MAC list and associated drug prices are developed and updated from time to time by Abarca. The MAC list to be implemented on the effective date will be consistent with the list provided by ASES, through Abarca as PPA, to the contracted PBMs during the implementation process. Abarca will provide the contracted PBMs with a revised MAC list when updates are made.
MAGI	Modified Adjusted Gross Income
MBRO	Mental and Behavioral Services Companies
MC-21	MC-21 Corporation
MCO	Managed Care Organization
ME	Member Management

Term/Acronym	Definition/Explanation
MedRx	MedRx360
MIP	Micro Information Processing, the ASES payment system
MITA SS-A	Medicaid Information Technology Architecture State Self-Assessment
MOU	Memorandum of Understanding
MS	Microsoft
NCPDP	National Council for Prescription Drug Programs
OM	Operations Management
OBC	Outcomes-Based Certification
ONC	Office of National Coordinator
PBM	Pharmacy Benefits Manager
PDL	Preferred Drug List
PDMP	Prescription Drug Monitoring Platform
PE	Performance Management
PEP	Provider Enrollment Portal
PL	Plan Management
PM	Provider Management
PPA	Pharmacy Program Administrator. PPA is a company that contracted with ASES to handle the invoices for products that ASES contracts with manufacturers. ASES has over 60 products contracted among different companies in PR.
PR	Puerto Rico
PRDoH	Puerto Rico Department of Health
PRHIE	Puerto Rico Health Information Exchange
PRHIN	Puerto Rico Health Information Network
PRME	Puerto Rico Medicaid Enterprise
PRMMIS	Puerto Rico Medicaid Management Information System
PRMP	Puerto Rico Medicaid Program
RAC	Recovery Audit Contractor
SaaS	Software-as-a-Service
SFTP	Secure File Transfer Protocol

Term/Acronym	Definition/Explanation
SLA	Service-Level Agreement
SMA	State Medicaid Agency
TA	Technical Architecture
TEFCA	Trusted Exchange Framework & Common Agreement
TCM	Technical Capability Matrix
TMS	Technical Management Strategy
TPL	Third-Party Liability
W3C	World Wide Web Consortium
XML	Extensible Markup Language