



**ILLINOIS
INTEROPERABILITY
PROJECT
(CFDA 93.075)**

**G
G
G**

FRAMEWORK GOVERNANCE MODEL

JANUARY 31, 2014

G

Table of Contents

1	Introduction	3
2	The Need for Governance.....	4
3	Framework Governance Model.....	5
3.1	Goals	5
3.2	Developing a Model.....	5
3.3	Framework Governance Model	7
3.4	Committee Descriptions	7
3.4.1	Executive Steering Committee (ESC)	7
3.4.2	Operational Committee (OC).....	8
3.4.3	Project Management Office (PMO)	8
3.4.4	Advisory Council.....	8
3.4.5	Sub-Committees.....	9
4	Appendices	10
4.1	Intergovernmental Agreement	10
4.2	Best Practice Research Summary.....	10
4.3	ESC Briefing Documents.....	10
4.4	ESC Meeting Minutes.....	10
4.5	ESC Meeting Presentation	10

1 INTRODUCTION

The Illinois Framework for Healthcare and Human Services (Framework), a multi-agency collaborative, coordinates the use of shared technology and business processes across Illinois' federally-funded healthcare transformation initiatives. The Illinois Framework provides strategic insight, organizational support, and guidance on federal standards to advance Illinois' healthcare and human services enterprise. These efforts will improve service coordination and lower costs to advance the health and well-being of the people, families, and communities of Illinois.

The Framework's goals and objectives are to:

1. Provide customers with more options to access the range of needed services;
2. Develop a healthcare and human services enterprise for Illinois that will provide seamless services to customers at the lowest possible cost;
3. Improve outcomes through data-driven decision tools utilizing multiple data sources with accurate and timely information;
4. Redesign business processes around the sharing of critical information and delivering services to the right person at the right time; and
5. Leverage and reuse technology to maximize investment and increase operational efficiency and reduce administrative burden.

The Framework will help Illinois adopt an enterprise approach to healthcare and human services by:

- Establishing guiding principles for Illinois HHS agencies;
- Creating organizational structures that foster interoperability;
- Ensuring strategic and appropriate use of state and federal funds; and
- Adopting processes that adhere to federal standards and best practices.

Three federal-funded projects now underway in Illinois provide an unprecedented opportunity to leverage the Federal and State investment in these efforts to advance the interoperability and integration paradigm that is the foundation of the Framework. These projects – collectively referred to as the Medicaid/Healthcare initiatives – are as follows: a) the Illinois Medicaid Management Information System upgrade (MMIS); b) implementation of the Affordable Care Act (ACA) including the Health Insurance Exchange and Marketplace (HIM) and a new Integrated Eligibility System (IES); and c) the Illinois Health Information Exchange (ILHIE).

Maximizing the opportunities of these federal-funded projects – and navigating the complexities that they represent – involves significant decision-making and collaboration amongst Illinois' seven health and human service agencies. Therefore, the Framework requires a governance process that is robust, goal-oriented, equitable and sustainable. In 2013, the Framework Executive Steering Committee (ESC) agreed to the governance model outlined in this document.

2 THE NEED FOR GOVERNANCE

Governance is “the act of governing, or steering the policies, management, and activities of an organization at the highest level, with the authority, credibility, and responsibility to do so.”¹ Illinois recognizes that achieving the Framework vision will require an ongoing series of decisions, both practical and philosophical, about policies, systems, authority, and responsibilities. Governance affects how success is defined and how Illinois will measure gains in accessibility, efficiency, and effectiveness. The complexity of the Framework suggests that many decisions will be difficult, and building a new approach to health and human service delivery will require significant change management.

The capacity to make and execute decisions within the Framework will require a process that all parties will agree to and abide by. A consistent, effective, and lasting governance process is essential to the success of the Framework; securing the consent of the governed is critical to the success of that governance process. Without a solid governance process, the risk of delays, costly mistakes, conflicts, or project failure is increased. In multi-agency projects like the Framework, a governance process will also ensure that all voices – not only the loudest – are heard.

A robust governance structure can also accomplish the following:

- Provide a structure for decision-making;
- Clarify the roles and responsibilities of each party involved;
- Build organizational structure to support planning, development, oversight, and fiscal management;
- Set project priority and vision;
- Define strategy and outcomes;
- Maximize the use of resources and streamline processes;
- Resolve conflicts;
- Monitor performance; and
- Confer legitimacy on decisions.²

1 DeSantis, Cari. “Governance Guidance for Horizontal Integration of Health and Human Services.” American Public Human Services Association (APHSA), 2012: <<http://nwi.aphsa.org/DOCS/Governance-Guidance.pdf>>.

2 Herman, Daniel et al. “IT Governance Best Practices.” Aspen Advisors, LLC, 2011: <<http://www.aspenadvisors.net/results/whitepaper/it-governance-best-practices>>.

3 FRAMEWORK GOVERNANCE MODEL

3.1 Goals

The Framework governance model is a new, multi-agency approach to health and human service collaboration and decision-making in Illinois. Until very recently, the Federal approach to funding system development supported program-centered initiatives, and the governance models for those initiatives were single-domain focused and directed. As a consequence, there are relatively few viable governance models designed to support interoperability policy and decision-making in a cross-agency, cross-program environment. The Framework governance model overcomes these challenges by supporting multiple programs and agencies across three primary goals:

- Improve service delivery for clients;
- Reduce errors and improve program integrity; and
- Improve administrative efficiency.

3.2 Developing a Model

Key Framework stakeholders contributed to the design of the proposed governance model. Collaboration amongst the Framework agencies began in 2012, when the seven Framework partners signed an Intergovernmental Agreement (IGA) to “develop a horizontally-integrated, customer-focused and user-friendly system that will support multiple programs by streamlining processes and employing advanced technology to facilitate collaboration and data sharing across programs and systems” [[See Appendix 4.1 for Intergovernmental Agreement](#)]. These seven agencies were: the Illinois Department of Human Services (DHS), the Department on Aging (Aging), the Department of Children and Family Services (DCFS), the Department of Commerce and Economic Opportunity (DCEO), the Department of Employment Security (DES), the Department of Public Health (DPH), the Department of Healthcare and Family Services (HFS) and, the Office of the Governor. In addition to uniting the Framework partner agencies, the IGA also established a Framework project-management office (PMO) to coordinate the project and oversee all related committees and initiatives.

Although the IGA formalized the agencies’ involvement in the Framework, the agencies did not have a system for convening meetings, making decisions, and assigning roles and responsibilities to Framework stakeholders. As a result, in 2012, the Framework PMO applied for and received a federal State Systems Interoperability and Integration Grant from the Department of Human Services Administration for Children and Families (ACF) to establish and implement a governance model across the seven agencies. As part of the Grant, the Framework PMO conducted extensive research to explore existing governance models in similar interoperability projects [[See Appendix 4.2 for the Best Practice Research Summary](#)]. As a result of the research, the PMO concluded that the Framework should take the following steps to implement a governance model in Illinois:

1. Create a Shared Vision;
2. Identify and Assemble Strong Executive Leadership;
3. Formalize the Governance Structure;
4. Establish Clear Decision-Making;
5. Evaluate the Governance System and Adapt; and

6. Maintain Transparent Communications and Processes.

In the spring of 2013, Framework partner agency directors met as members of the Framework Executive Steering Committee (ESC), the governing body responsible for Framework policy and finance decisions. During the first meeting on May 3, 2013, agency directors of the seven Framework agencies and representatives of the Governor's Office of Management and Budget (GOMB), the Department of Central Management Services (CMS), and the major Medicaid/Healthcare initiatives (Medicaid Managed Information System (MMIS), Health Information Exchange (HIE), and Affordable Care Act (ACA), debated and discussed the characteristics of a potential Framework governance model. Topics discussed at the meeting included: Framework committee membership, decision-making procedures, roles and responsibilities, time commitments, the definition of consensus, and developing a Framework charter and vision statement [[See Appendix 4.3, 4.4 and 4.5 for the May 3rd ESC meeting briefing packet, meeting minutes, and presentation](#)].

3.3 framework governance Model G

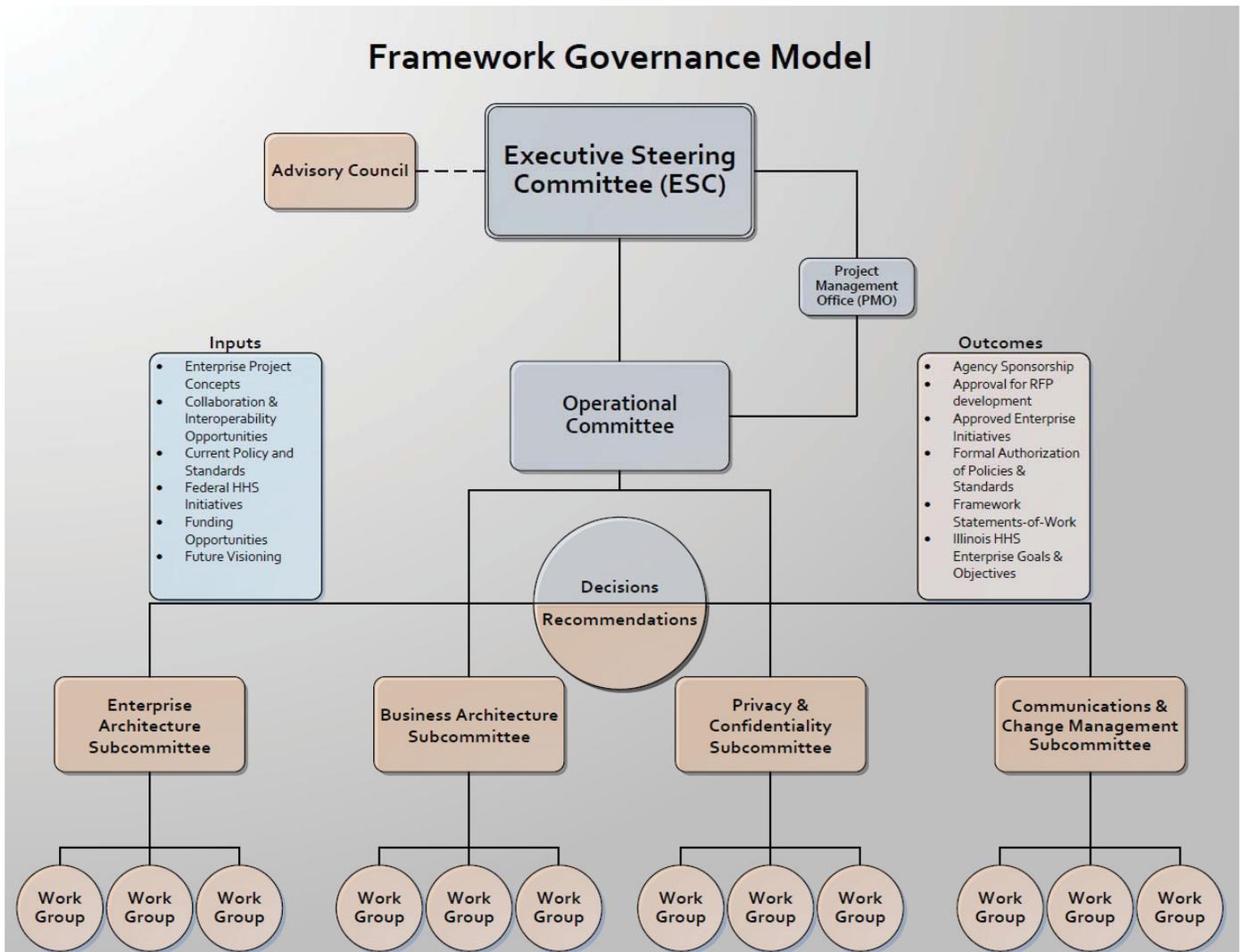


Figure 1: Framework Governance Model

3.4 Committee Descriptions

The following descriptions provide a general overview of Framework governance roles and responsibilities.

3.4.1 Executive Steering Committee (ESC)

The Framework Executive Steering Committee, or ESC, is the committee, chaired by the State Chief Information Officer (State CIO), consisting of the Directors (or their designees) of the Framework Partners, representatives of the Governor’s Office of Management and Budget (GOMB), the Department of Central Management Services (CMS), and the major Medicaid/Healthcare initiatives (Medicaid Managed Information System (MMIS), Health Information Exchange (HIE), and Affordable Care Act (ACA), and other staff designated by the State CIO, which shall provide executive leadership and oversight of all matters of finance and policy in connection with the Framework Project.

The ESC will leverage state investments in system development and will avoid duplication of effort. The ESC will be the entity that makes governance decisions affecting the seven Partner agencies plus the Integrated Eligibility System (IES), the Health Information Exchange (HIE) and the Medicaid Managed Information Services (MMIS) projects. The proposed governance model suggests that the ESC meet as needed, however a monthly meeting may be typical based on workload. Decisions will be made by consensus. If consensus cannot be reached, the decision will be postponed until more information is gathered. The ESC will interact with the PMO, the Operational Committee (OC) and others if invited to the ESC meetings. It is estimated that the ESC members will need to spend approximately two hours per meeting. The preferred form of communication is meeting in person, with briefing documents and other meeting materials sent out prior to the meeting.

3.4.2 Operational Committee (OC)

The Framework Operational Committee is the body, formerly known as the Framework Governance Board, assembled by the Framework Project Director and State CIO, comprised of policy, operations and information technology staff from each of the Framework Partners.

The OC is a subcommittee of the ESC that will meet at the Framework Director's request, or bi-weekly, at a minimum, to guide the collaborative development of the Framework Project. The State CIO and the Framework Director shall, in consultation with the Directors of the Framework Agencies, identify members of the Operational Committee and assign them duties and responsibilities. The Operational Committee will coordinate the planning activity between the three Medicaid/Healthcare projects (*i.e.*, MMIS, HIE and ACA) and the other Framework Programs to leverage functionality built by the Medicaid/Healthcare projects by including common user requirements from the smaller programs. It will provide week-to-week coordination and operational guidance for the Project; in particular, it will review and report on how the current business processes work, how the current system is constructed, what are the required components of the new systems, how proposed elements of the new design will work and how implemented changes, if any, are working.

The OC will make decisions by consensus. When consensus is not reached, decisions will be postponed for further information gathering. In some cases, decisions may be escalated to the ESC. The OC will interact with the PMO, the ESC, and others as needed, but will report directly to the ESC. The expected time commitment for the OC is four hours per month. Communication will be in person, by email, or by phone.

3.4.3 Project Management Office (PMO)

The full-time Project Management Office will provide planning for and day-to-day management of the Framework project including supervising the work of the vendor(s), staffing the ESC, OC, and Advisory Council, and convening cross-agency or cross-function meetings. Staff will include a Project Director, program, business and technical leads, communication and change management leads, and clerical staff. The participating state agencies will identify liaisons to the PMO.

3.4.4 Advisory Council

The Illinois Human Services Commission (HSC) Framework Subcommittee serves as the Advisory Council to the Framework, and makes recommendations to the Governor and General Assembly regarding providing high-quality services to Illinois residents. The Advisory Council will make recommendations to the Operational Committee and the Executive Steering Committee, and represent the service needs of multiple constituencies. The expected time commitment of the Advisory Council is two hours per quarter. Meetings will be in person.

3.4.5 Sub-Committees

Framework sub-committees are those committees, comprised of employees of the Framework Partners, created to further the mission and objectives of the Framework Project. Sub-committees will report to the PMO and OC to accomplish Framework activities on a week-to-week basis. The type and number of subcommittees, and their roles and responsibilities, may change depending on the needs of the Framework. Sub-committees will meet in person and over the phone. The following subcommittees are proposed for the initial phases of the Framework:

3.4.5.1 Enterprise Architecture

The Enterprise Architecture sub-committee will be comprised of technical experts focused on systems development. The membership and frequency of group meetings will be determined as needed.

3.4.5.2 Business Architecture

The Business Architecture sub-committee will be comprised of program experts with a strong knowledge of business processes. The membership and frequency of group meetings will be determined as needed.

3.4.5.3 Legal, Privacy & Confidentiality

The legal, privacy and confidentiality sub-committee will be comprised of legal experts and agency counsels with a focus on information sharing and data governance. The membership and frequency of group meetings will be determined as needed.

3.4.5.4 Communications & Change Management

The communications and change management sub-committee will be comprised of individuals with a broad knowledge of the strategies needed to communicate and implement change on an organizational scale. The membership and frequency of group meetings will be determined as needed.

3.4.5.5 Work Groups

Work Groups are ad hoc groups that report to the sub-committees. Work groups will convene as needed across various subject-matter areas. The type and number of workgroups, and their roles and responsibilities, may change depending on the needs of the Framework.

3.4.5.6 Subject Matter Experts (SMEs)

Subject Matter Experts (SMEs) are individuals who are knowledgeable about the operations and processes of a particular program. SMEs will liaise with the Framework PMO and other committees when needed. SMEs are not formally involved in the Framework governance process unless they are asked to join or advise a committee.

4 APPENDICES

4.1 Intergovernmental Agreement



Framework
multi-agency Global I

4.2 Best Practice Research Summary



Best Practices
Research Summary.p

4.3 ESC Briefing Documents



Framework ESC
Briefing Documents_N

4.4 ESC Meeting Minutes



IL Framework ESC
Meeting Minutes_May

4.5 ESC Meeting Presentation



Framework ESC
Meeting Presentation