

The ACA and Child Support

What Does it Mean to you?

- Understanding the options with Eligibility and Enrollment (E&E) systems.
- Understanding CSE opportunities.
- Design considerations with E&E systems.
- Cost Allocation and the APD process.
- ACF's Interoperability Initiative.

Your Presenter

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Understanding Options With E&E Systems

- April 2011, CMS announced changes to provided enhanced 90/10 funding for most development work related to Medicaid eligibility.
- In August 2011, the U.S. Department of Health and Human Services and the Department of Agriculture announced a time-limited exception to cost allocation requirements defined in OMB Circular A-87. The exception only applies to funding for projects related to eligibility and enrollment systems under Medicaid.
 - Allows State human services programs to utilize systems designed specifically for determining a person's eligibility for certain health coverage programs (Medicaid, CHIP, and/or premium tax credits) without having to share the common system development costs, so long as those costs would have been incurred anyway.
 - Costs attributable to including, or that are only of benefit to other programs, which includes child support enforcement (CSE), must still be allocated to those benefiting programs.
 - The A-87 exception terminates December 15, 2015.

Rules of the Road

Highlights

- States are strongly encouraged to consider including other human services programs such as Child Support Enforcement in their systems investments as long as it does not delay achievement of the ACA deadlines.
- Phased system development is allowable, not required, and in some cases, encouraged.
- Costs must be incurred and funds expended by December 31, 2015.
- Any cost incurred not for health systems must be allocated to benefitting program.
- All programs must be engaged in planning and design throughout the systems development life cycle (SDLC).
- In addition to CMS, the expedited APD process is accepted by ACF (and OCSE) and FNS.
- An expedited APD checklist template has been developed and approved by OMB.
<http://www.medicaid.gov/AffordableCareAct/Provisions/Information-Technology-Systems-and-Data.html>

Shared vs. Non Shared Functionality



Shared Functionality or Work



Non-Shared Functionality or Work

Purchase a business rules management system (BRMS) that will be used by Medicaid, but is also needed for other HHS and DoA programs.

Configuration of the CSE rules in the BRMS.

Development of a web page that collects necessary client address information for clients participating in Medicaid/CHIP, but also needed for other HHS programs.

Adding a specific section to a web page to capture EFT/Direct Deposit representative information that is just for CSE.

Purchase and initial configuration of a document generation software package necessary for Medicaid, and/or CHIP, but also needed for other HHS programs.

Development of document templates specifically for use by the Child Support program in the new software.

Development of a common worker inbox necessary to handle Medicaid, CHIP for applications coming from a self service portal, but also needed for other HHS programs.

Development of the a CSE-only workflow to process the CSE application from the worker inbox.

Design Considerations With E&E Systems*

<ul style="list-style-type: none"> • Clients Portals 	<ul style="list-style-type: none"> • Interfaces to Federal and State verification sources
<ul style="list-style-type: none"> • User Interfaces 	<ul style="list-style-type: none"> • Data Warehousing and Business Intelligence
<ul style="list-style-type: none"> • Master Client Index 	<ul style="list-style-type: none"> • Workflow Management Tools
<ul style="list-style-type: none"> • Business Rules Engine and Operating Systems 	<ul style="list-style-type: none"> • Notices
<ul style="list-style-type: none"> • Enterprise Service Bus 	<ul style="list-style-type: none"> • Eligibility Determination and Enrollment
<ul style="list-style-type: none"> • Customer Service Technical Support 	<ul style="list-style-type: none"> • Analytic Tools including Decision Support and Program Integrity
<ul style="list-style-type: none"> • Automated Account Creation and Case Notes 	<ul style="list-style-type: none"> • Telecommunications
<ul style="list-style-type: none"> • Authentication and Identity Management 	<ul style="list-style-type: none"> • Information Security and Privacy Controls
<ul style="list-style-type: none"> • Document Imaging and Digitization of Case Records 	<ul style="list-style-type: none"> • Infrastructure and Data Center Hosting

*January 23, 2012 Tri-Agency Letter

Cost Allocation and the APD Process

- **Cost Allocation**

- Still applies to those systems costs not required of the E&E systems.
- Developmental cost allocation cannot use operational models, e.g., caseload, # of users, etc.
- Developmental cost allocation requires:
 - Break system down to lowest level of component/module.
 - Apply metrics, such as: Weighting, Complexity, LOC, FPA.
 - Cost Allocation Plan must be approved in an APD.

The APD Process

- **Advance Planning Documents**
 - Medicaid requires an approved APD for 90/10 FFP.
 - Medicaid has an “Expedited APD Process”.
 - Doesn’t waive APD requirements, allows more time to flesh out the details later as they become clearer.
 - Medicaid has primary approval authority of Expedited APD’s – ACF and FNS will also review.
 - Must address the seven conditions and standards.
 - Must include all programs up-front in planning phase.

ACF's Interoperability Initiative

- **OCSE Agreed to Manage the Interoperability Project on Behalf of ACF in February 2012.**
- **The Project Management Office (PMO) for the Initiative is Located in OCSE's Division of State and Tribal Systems.**
- **Work Products and Deliverables from the Initiative are Available on ACF's Interoperability webpage at:**
<http://www.acf.hhs.gov/initiatives-priorities/interoperability>

ACF's Interoperability Initiative

- **Currently Six Major Initiatives Are Underway**
 - 12 Steering Committee (*in progress*).
 - National Information Exchange Model (NIEM) Human Services Domain (*operational*).
 - National Human Services Interoperability Architecture (NHSIA) (*operational*).
 - Interoperability Toolkit (*version 4 in development*).
 - Confidentiality Toolkit (*version 1 in development*).
 - ACF Interoperability and Integration Grants (*7 grantees are operational*).

OCSE's Encouragement to the States

- **Interoperability**
 - The ability to be interoperable with human services systems is number seven of Medicaid's seven conditions and standards for approval of 90/10 FFP.
 - Look at MITA 3.0 and NHSIA.
 - CMS, FNS and ACF are unified in support of systems interoperability and horizontal integration.
 - NIEM Human Services and Health Domains.
 - ACF Interoperability Innovation Grants.

Questions

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