Chairman Mock, members of the Information Technology Committee, I am Jenny Witham, Director of Information Technology Services for the Department of Human Services (DHS). I appear before you to provide a status report on the Eligibility Systems Modernization Project and an update on the Medicaid Management Information System (MMIS).

Eligibility Systems Modernization Project Status
Currently, DHS utilizes separate eligibility systems for Medicaid/Children’s Health Insurance Program (CHIP) and the various economic assistance (EA) programs. The EA programs include Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Basic Care Assistance Program (BCAP), Child Care Assistance Program (CCAP) the and Low Income Home Energy Assistance Program (LIHEAP). The objective of this project is to replace the current eligibility systems with a single system that will meet the requirements of the Affordable Care Act (ACA), as well as streamline the application process for constituents and county social service eligibility workers.

The first phase of the project, the implementation of Medicaid/CHIP eligibility determination for individuals under the ACA, went live on Feb. 8, 2016. With this implementation, DHS provided a self-service portal for the public to apply for health benefits and a county eligibility worker portal for county workers to determine eligibility, provide notice to applicants, interface with the Federally-Facilitated Marketplace, and
transfer authorized clients to the Medicaid Management Information System for enrollment.

DHS is implementing the second and final phase of the project, which includes the integration of the remaining economic assistance programs. The estimated project completion date is April 23, 2018.

**Medicaid Management Information System**

The ND Health Enterprise MMIS was implemented on Oct. 5, 2015. On Oct. 3, 2016, DHS transferred the provider call center support from Xerox’s Mississippi call center to DHS operations in Bismarck.

In 2017, the claim processing volume has averaged 44,576 claims per week with 70 percent of the claims paying, 21 percent of the claims denying and 9 percent suspending. For August 2017, DHS has processed 98.79 percent of all clean claims within 30 days of the date of receipt, and 99.55 percent within 90 days of receipt.

DHS is primarily focused on activities to achieve certification of the MMIS, as well as finalization of several MMIS “sub” projects.

As you received in earlier testimony, DHS started, and has subsequently completed, the MMIS Health Insurance Portability and Accountability Act (HIPAA) Operating Rules project. DHS was notified on July 28, 2017, that it had achieved Committee on Operating Rules for Information Exchange (CAQH CORE) Certification on Phase I, Phase II, and Phase III of the Operating Rules required by the ACA. Project close out is anticipated in the next quarter.
DHS has also received final production approval from the Centers for Medicare and Medicaid Services (CMS) on the Transformed Medicaid Statistical Information System (T-MSIS) project. T-MSIS is an ACA-mandated expansion to the previous CMS MSIS quarterly reports. Project closeout is anticipated in the next quarter.

In addition, we have also recently launched a new MMIS subproject to comply with the Social Security Number Removal Initiative. Pursuant to the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), CMS is mandating that the Social Security account number no longer be displayed, coded or embedded on Medicare beneficiary cards and is issuing a new identifier called the Medicare Beneficiary Identifier. The MMIS must be remediated to receive and process this new identifier.

Overall, the MMIS is stable. We are working with Conduent (Xerox) to finalize the remaining items from design, development and implementation per RFP requirements that must be completed and deployed:

- encounter processing,
- certification change requests, and
- reporting requirements

If you have any questions, I would be happy to address them at this time.