

# Project Startup Report

**Project Name:** CHIPRA NDVerify

**Agency:** Department of Human Service (DHS)

**Business Unit/Program Area:** CHIP/Medicaid/EAP

**Project Sponsor:** Cindy Sheldon, Jenny Witham

**Project Manager:** Kris Vollmer

Project Description
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The North Dakota Department of Human Services (DHS) will use technology as the primary focus to provide statewide outreach, enrollment and retention of clients receiving/participating in Medicaid, Children's Health Insurance Program (CHIP), Supplemental Nutrition Assistance Program (SNAP) and/or Temporary Assistance for Needy Families (TANF) benefits.

Business Needs and Problems
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- Improve retention of recipients in programs.
- Improve verification processes for eligibility workers and recipients.
- Reduce administrative burden on state and county offices.
- Reusability with the federal health benefits exchange and the eligibility replacement system

Key Metrics		
Project Start Date	Project End Date	Original Baseline Budget
07/25/2012	08/30/13	\$650,910

Objectives	
Project Objectives	Measurement Description
<u>Objective 1.1:</u> Decrease the number of individuals that lose medical coverage at renewal time due to procedural errors (lack of supporting documentation).	<u>Measurement 1.1.1:</u> Four months post implementation we will measure the volume of cases that were closed for procedural reasons (e.g. missing supporting documentation), DHS will decrease the volume of cases denied for procedural reasons from 162 cases on average, per month, to 75 cases on average per month.
<u>Objective 1.2:</u> Decrease eligibility worker application processing turn-around time.	<u>Measurement 1.2.1:</u> Reduce eligibility worker processing time from 14 days to 10 days within four months post implementation.
<u>Objective 2.1:</u> Eligibility worker is able to process verifications in near real-time.	<u>Measurement 2.1.1:</u> Reduce eligibility worker processing time from 14 days to 10 days within four months post implementation
<u>Objective 2.2:</u> Eliminate multiple manual processes.	<u>Measurement 2.2.1:</u> Four months post implementation; we will measure the volume of cases that were closed for procedural reasons (e.g. missing supporting documentation). DHS will decrease the volume of cases denied for procedural reasons from 162 cases on average, per month, to 75 cases on average per month.
<u>Objective 2.3:</u> Decrease the number of individuals that lose medical coverage at renewal time for lack of supporting	<u>Measurement 2.3.1:</u> Four months post implementation we will measure the volume of cases that were closed for procedural reasons (e.g. missing supporting documentation). DHS will decrease the volume of cases denied for procedural reasons

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documentation.	from 162 cases on average, per month, to 75 cases on average per month
<u>Objective 3.1:</u> Burden of extracting data from multiple, non-standard systems is reduced or eliminated	<u>Measurement 3.1.1:</u> Four month post implementation, volumes of inquiries made through eFind will be measured as a baseline; eight months post implementation, we expect to see a 25% increase in the usage of eFind.
<u>Objective 3.2:</u> Caseload processing time is reduced	<u>Measurement 3.2.1:</u> Reduce eligibility worker processing time from 14 days to 10 days within four months post implementation.
<u>Objective 3.2:</u> Caseload processing time is reduced	<u>Measurement 3.3.1:</u> Four months post implementation; we will measure the volume of cases that were closed for procedural reasons (missing supporting documentation). DHS will decrease the volume of cases denied for procedural reasons from 162 cases on average, per month, to 75 cases on average per month.
<u>Objective 4.1:</u> Capability for eFind tool is able to integrate with the federal health benefit exchange and with the eligibility replacement system.	<u>Measurement 4.1.1:</u> Capability to pass ND state verifiable information to the federal health benefit exchange; and/or successfully receiving e-verified information back from federal resources by go-live date of the modernized eligibility system.

## Cost/Benefit Analysis

Approximately \$1.3 million is available for this project. This includes:

- ITD Software Development & Project Management.
- Agency expenses for personnel and other are estimated at approximately \$200,000.
- The initial risk contingency percentage to be used for project planning will be 10%. The actual risk contingency percentage may change during the project planning phase per the identified risks and with the approval of the final budget by the project sponsor.
- There is no management reserve set aside at this time for this project

ITD will prepare an after-analysis cost estimate.

## Key Constraints or Risks

The project has the following constraints and risks:

- Implementation of the first phase of eFind must be completed by December 2012
  - The initial phase includes a portal or access point with 15 interfaces and the security features
- Subsequent phases must be completed prior September 2013
- Cost, schedule, scope, and quality are often in conflict during projects. The sponsor elected to prioritize as follows:
  1. Schedule
  2. Quality
  3. Cost
  4. Scope

Risk 1: The core members of the project team from both ITD and the agency will be involved in multiple projects during the same time frame (e.g. eligibility replacement system project)

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Impact 1.1: Eligibility replacement system project priorities may impact resource availability and scheduling

Response 1.1: Mitigate by allowing enough time in the project cycle to accommodate for the limited resources (could be ITD, DHS or state/county resources)

Response 1.2: Adjust the scope of the project to address the most critical areas with the available resources

Risk 2: Eligibility worker engagement in utilization of the tool

Impact 2.1: Lack of eligibility worker engagement in the new tool may result in the tool being underutilized or not used at all

Response 2.1: Gain eligibility worker input and engagement in the early stages of planning to ensure it meets their needs, as well as those of the DHS