Department: Social Services
Program Name: Information Systems
Program is found in the following core budget(s): Information Systems

1a. What strategic priority does this program address?

Timely automated processing and reporting

1b. What does this program do?

The Information Systems program area manages the Medicaid Management Information System (MMIS) and the contracts with the vendors that develop, operate, and maintain the system.

The primary functions of the MMIS include claims and encounter processing, calculating provider payments, healthcare service provider management, drug rebate invoicing and collection, processing third party liability, federal financial reporting, administrative workflow management, and reporting and analytics.

The primary goal of the MMIS is to support the operation of the MO HealthNet Program by accomplishing the following:

- Automation of key business processes to support the program policies and processes to ensure compliance with federal and state law
- Access for providers and users to program and participant eligibility information required to support provision of services to program participants
- Timely and accurate claims processing and payment to providers
- Timely and accurate processing of capitation payments to Managed Care health plans
- Accurate reporting of program costs and outcomes to Centers for Medicare & Medicaid Services (CMS) and maximization of federal financial participation
- Comprehensive and accurate reporting and analytics services and sharing of claims data to support administrative and program decision support, monitoring of program metrics, and improvements in program quality and care management
- Ongoing system modifications to support new program initiatives, meet changing federal and state program requirements, and further business automation
- Procurement and implementation of replacement MMIS subsystems and services in compliance with federal MMIS enhanced funding requirements

The state receives enhanced federal funding for the development and operation of the MMIS. The Information Systems program area manages the enhanced funding including review of CMS regulations and guidance, the submission of planning documents to CMS to request enhanced funding, and the review and approval of system-related costs.

CMS updated the rule related to the enhanced funding in December 2016, and continues to issue sub-regulatory guidance that is changing the conditions for receiving enhanced funding for investments in Information Technology. The guidance encourages the replacement of legacy MMIS systems such as Missouri's system with more modular and reusable solutions. MO HealthNet is working on several system procurement projects intended to replace MMIS subsystems with solutions utilizing modern technologies and complying with the CMS conditions. The procurement and replacement of MMIS systems requires a multi-year effort, and a significant capital investment, but offers future cost savings through technology that is less expensive to operate and maintain, and is more flexible allowing for quicker implementation of program changes. As part of the MMIS procurement effort, MO HealthNet has awarded a contract for a Business Intelligence Solution and Enterprise Data Warehouse (BIS/EDW) and Missouri Medicaid Audit and Compliance (MMAC) has awarded a contract for a Program Integrity Solution.
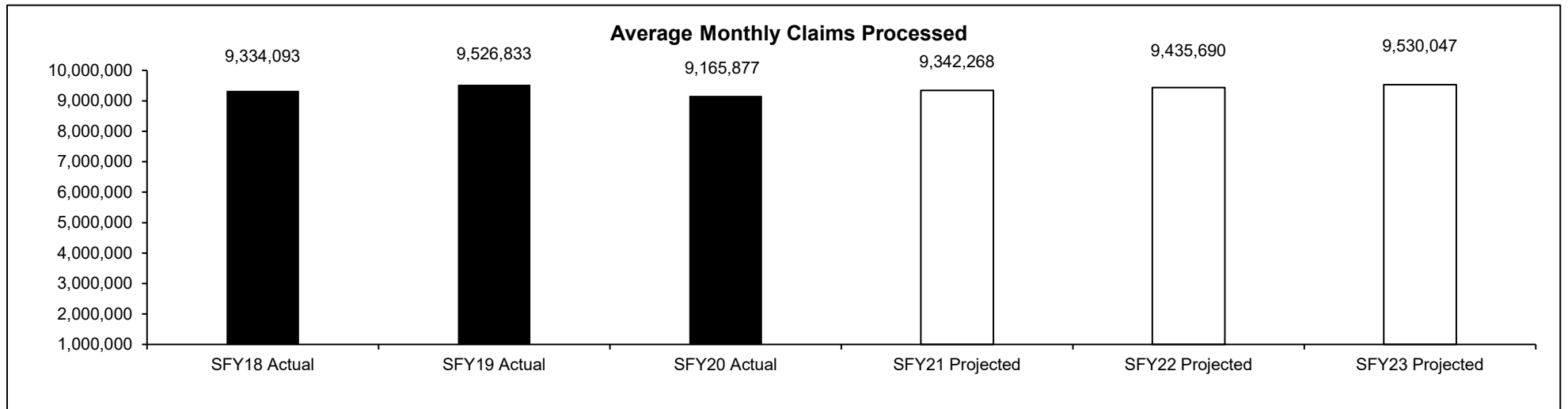
PROGRAM DESCRIPTION

Department: Social Services

HB Section(s): 11.620

Program Name: Information Systems

Program is found in the following core budget(s): Information Systems

---

2a. Provide an activity measure(s) for the program.

The MMIS supports the program through the automation of business processes, allowing the program to complete millions of transactions with providers and health plans utilizing a minimal number of staff.

Average Monthly Claims Processed

- SFY18 Actual: 9,334,093
- SFY19 Actual: 9,526,833
- SFY20 Actual: 9,165,877
- SFY21 Projected: 9,342,268
- SFY22 Projected: 9,435,690
- SFY23 Projected: 9,530,047

*SFY20 actuals may have been impacted by COVID-19

Future projections are based on eligibility requirements as of 7/1/20.

PROGRAM DESCRIPTION

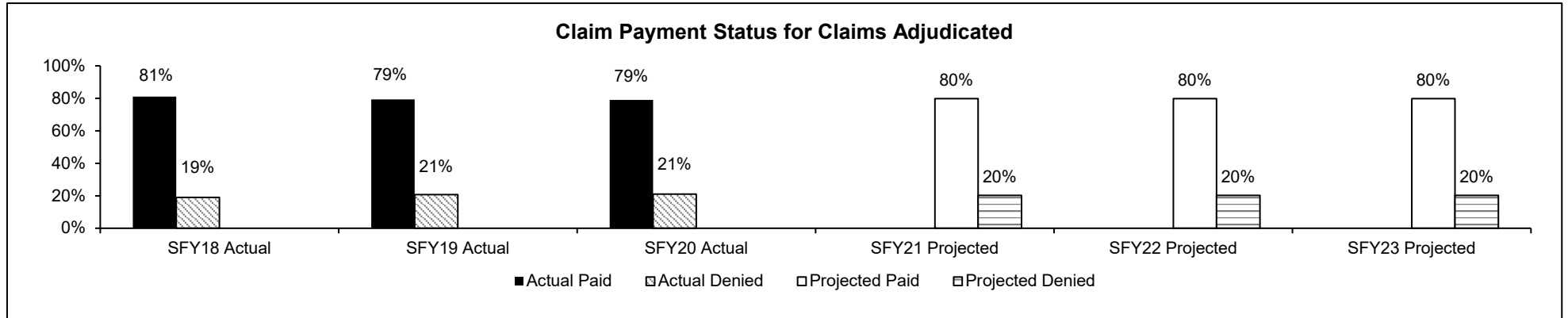**Department: Social Services**　　　　　　　　　　　　　　　　　　**HB Section(s): 11.620**
Program Name: Information Systems
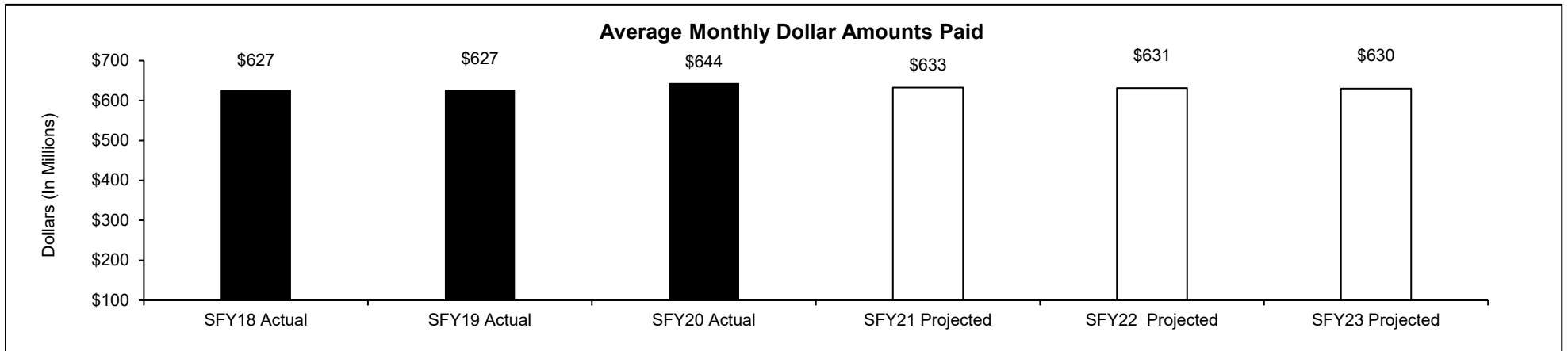**Program is found in the following core budget(s): Information Systems**

2b. Provide a measure(s) of the program's quality.

Percentage of claims paid or denied each month by Medicaid Management Information System (MMIS)

Claim Payment Status for Claims Adjudicated

	SFY18 Actual	SFY19 Actual	SFY20 Actual	SFY21 Projected	SFY22 Projected	SFY23 Projected
Paid	81%	79%	79%	80%	80%	80%
Denied	19%	21%	21%	20%	20%	20%

Legend: ■ Actual Paid ▨ Actual Denied □ Projected Paid ▤ Projected Denied

---

2c. Provide a measure(s) of the program's impact.

Amount paid to providers by MMIS on claims adjudicated monthly during the fiscal year.

Average Monthly Dollar Amounts Paid

Dollars (In Millions)

	SFY18 Actual	SFY19 Actual	SFY20 Actual	SFY21 Projected	SFY22 Projected	SFY23 Projected
Amount	$627	$627	$644	$633	$631	$630

*SFY20 actuals may have been impacted by COVID-19

Department: Social Services   **HB Section(s): 11.620**
Program Name: Information Systems
Program is found in the following core budget(s): Information Systems

---

2d.   Provide a measure(s) of the program's efficiency.

Promptly pay claims to providers per Federal regulation 42 CFR 447.45(d), state must pay 90% of clean claims received within 30 days of receipt.

Claims Paid Within 30 Days of Receipt

	SFY18 Actual	SFY19 Actual	SFY20 Actual	SFY21 Projected	SFY22 Projected	SFY23 Projected
Percentage	99.93%	99.72%	99.80%	99.82%	99.82%	99.82%

(Horizontal reference line at 90%)

Average Time to Process a Claim

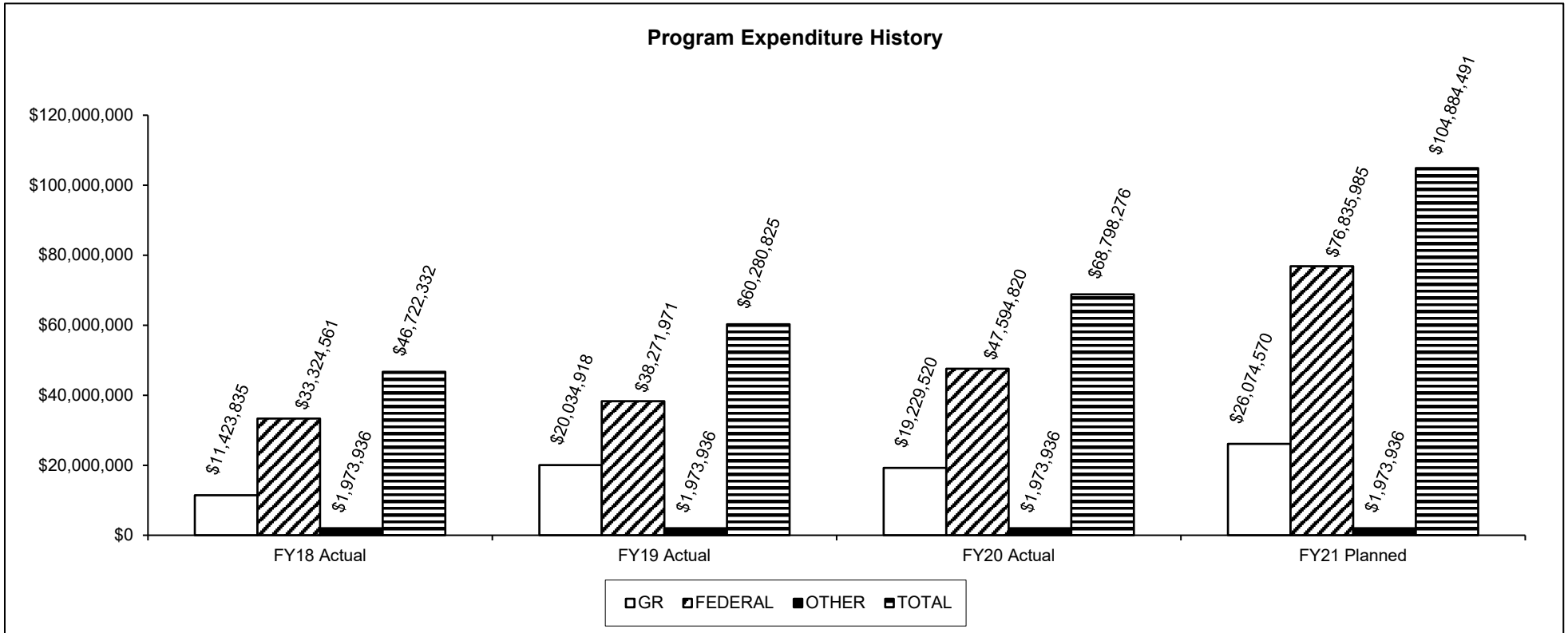|	SFY18 Actual	SFY19 Actual	SFY20 Actual	SFY21 Projected	SFY22 Projected	SFY23 Projected
Time (In Seconds)	0.30	0.29	0.37	0.32	0.32	0.32
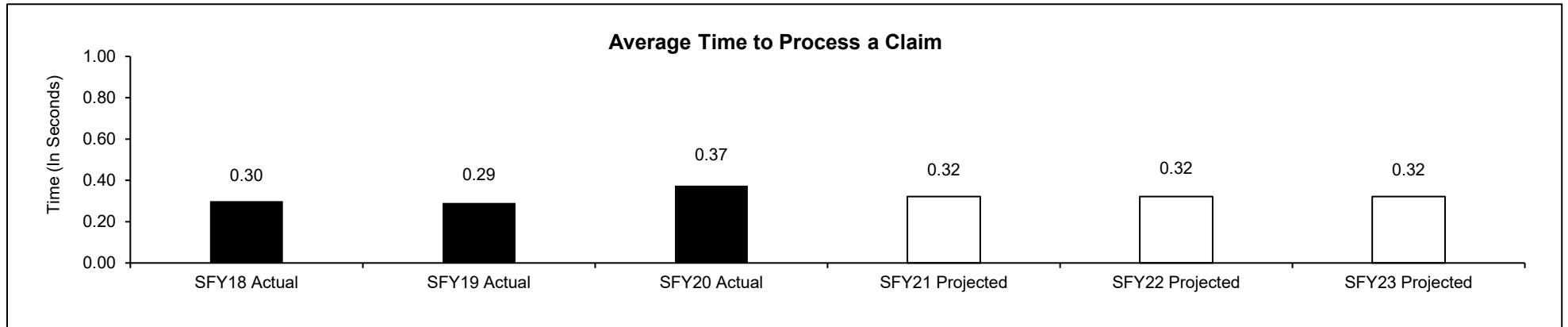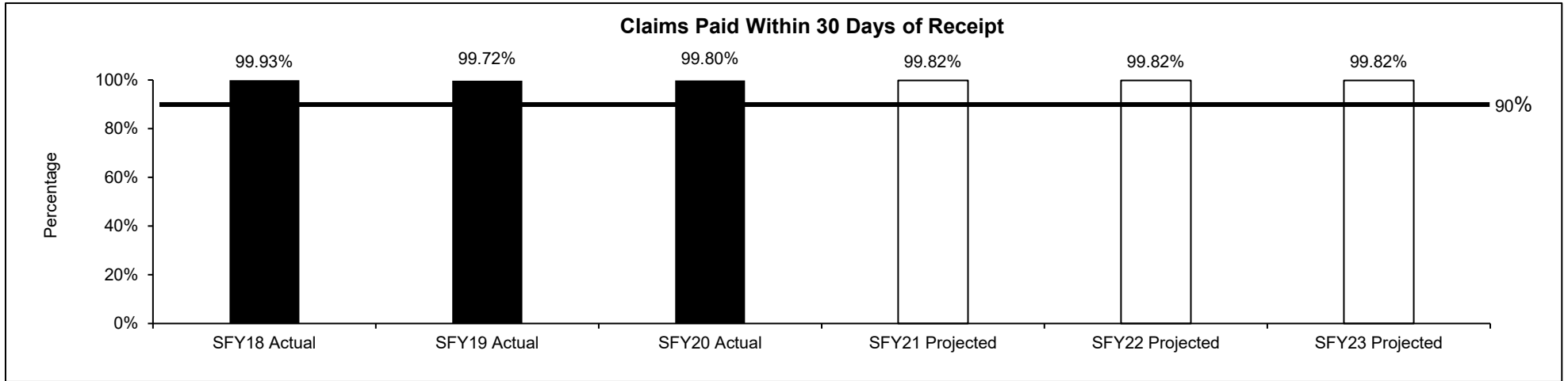
Efficiency Measure: Promptly process "clean" claims in less than one day.

PROGRAM DESCRIPTION

Department: Social Services   **HB Section(s): 11.620**
Program Name: Information Systems
Program is found in the following core budget(s): Information Systems

---

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (*Note: Amounts do not include fringe benefit costs.*)

Program Expenditure History

	FY18 Actual	FY19 Actual	FY20 Actual	FY21 Planned
GR	$11,423,835	$20,034,918	$19,229,520	$26,074,570
FEDERAL	$33,324,561	$38,271,971	$47,594,820	$76,835,985
OTHER	$1,973,936	$1,973,936	$1,973,936	$1,973,936
TOTAL	$46,722,332	$60,280,825	$68,798,276	$104,884,491

☐GR ☐FEDERAL ■OTHER ☐TOTAL

Planned FY2021 expenditures are net of restricted, reverted and reserves.

PROGRAM DESCRIPTION

Department: Social Services   **HB Section(s): 11.620**
Program Name: Information Systems
Program is found in the following core budget(s): Information Systems

4. What are the sources of the "Other " funds?

Health Initiatives Fund (0275)
Uncompensated Care Fund (0108)

5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)

State statute: Sections 208.166 and 208.201, RSMo. Federal law: Social Security Act Section 1902(a)(4), 1903(a)(3) and 1915(b). Federal Regulation: 42 CFR 433(C) and 438; Children's Health Insurance Program State Plan Amendment.

6. Are there federal matching requirements? If yes, please explain.

Expenditures for MMIS operations have three different federal financial participation (FFP) rates. The majority of MMIS expenditures earn 75% FFP and require 25% state share. Functions earning 75% include MMIS base operations and call center operations. Approved system enhancements earn 90% FFP and require 10% state share. Enrollment broker services, postage and general Medicaid administrative expenditures earn 50% FFP and requires 50% state share.

7. Is this a federally mandated program? If yes, please explain.

Yes. Section 1902(a)(4) of the Social Security Act requires such methods of administration as necessary for the proper and efficient administration of the Medicaid State Plan.