Department: Social Services HB Section(s): 11.130

Program Name: Missouri Eligibility and Enrollment System (MEDES)

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

1a. What strategic priority does this program address?

Improve delivery of support services for Missouri families

1b. What does this program do?

The Department of Social Services (DSS), Family Support Division (FSD) is responsible for designing, developing, and implementing a federally certified system, the Missouri Eligibility Determination and Enrollment System (MEDES) for the MO HealthNet, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), and Child Care Assistance programs. The MEDES project will bring a modern case management system to the state, and will replace the state's outdated green screen system (developed over twenty years ago). MEDES utilizes a modern user-interface to allow for more efficient processing of applications and a modular design to allow for customized functionality and program rules.

FSD MEDES Core is line-itemed into individual appropriations as follows:

MAGI E&E:

Project I of MEDES focused on MO HealthNet programs for families and was completed October 31, 2018. Project I allows the FSD team to make determinations for Family MO HealthNet based on the Modified Adjusted Gross Income (MAGI) standards. Family MO HealthNet applicants can create web-based user accounts and apply for benefits online through myDSS.mo.gov. The system automatically processes inbound and outbound account transfers for the federally facilitated marketplace.

SNAP E&E:

MEDES Project II will include the implementation of functionality for SNAP, TANF, and Child Care Programs. The state did not award the Request for Proposal (RFP) for SNAP that was released October 2017. The state re-released the RFP in May 2020. The SNAP contract was awarded in May 2021. The required USDA Food and Nutrition Service (FNS) approval of the selected vendor was received September 2021. The development of SNAP into MEDES began November 2021. The selected vendor provides system integration services and is implementing a state hosted Cúram solution for SNAP eligibility determination and management that fully integrates and interfaces with the existing Cúram Social Program Management Platform Analytics (SPMP) used for MAGI Medicaid in MEDES.

MEDES TANF:

The state has not yet begun work on developing an RFP for this part of Project II.

MEDES Child Care:

The state has not yet begun work on developing an RFP for this part of Project II.

IV&V E&E:

Missouri has contracted for Independent Validation and Verification (IV&V) services with BerryDunn. The IV&V Contractor evaluates and makes recommendations and provides comments about the state artifacts that are required for milestone reviews. The project artifacts are evaluated for completeness, accuracy, timeliness, alignment with project needs, conformance with generally-accepted project management and quality standards, and consistency with artifact templates provided by Center for Medicare and Medicaid Services (CMS).

Department: Social Services HB Section(s): 11.130

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ECM E&E:

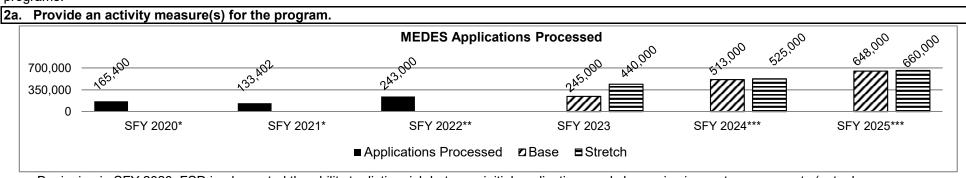
FSD has also implemented an Enterprise Content Management (ECM) system for all programs administered by Income Maintenance (IM). The MEDES ECM allows for a standardized and statewide process for document intake. FSD will continue to utilize the ECM to streamline workflows and business processes while improving program performance and efficiencies. Beginning in February 2022, FSD implemented the second phase of its ECM system that enhances the document recognition process reducing manual indexing, getting work to our processing teams faster, while also providing more convenient ways for our customers to submit documentation. In SFY 2023, implementation of an artificial intelligence system for our ECM will further enhance the Optical Character Recognition (OCR) for documents including handwritten recognition as well as extract information from the documents and enter data into our systems of record. This will greatly reduce the number of touches it takes to process documents received from the customer, reduce data entry thereby reducing processing times, and improve accuracy. In addition, funding has been utilized to purchase a task management system called CurrentTM. This system is used to task field work in all programs.

PMO E&E:

Missouri has contracted for Project Management Office (PMO) services with CSG Government Solutions. The PMO contractor provides necessary independent oversight and management of the overall program to ensure program goals and objectives are achieved.

MEDES Project III will include MO HealthNet for Adult Medicaid Programs for the elderly and disabled. The state has not yet begun work on developing an RFP for Project III.

Conditional on federal approval to receive enhanced federal match, the FSD will continue development of MEDES functionality, including the addition of new programs.



Beginning in SFY 2020, FSD implemented the ability to distinguish between initial applications and change in circumstance requests (actual cases with address or household changes).

*In SFY 2020 and 2021, COVID-19 Public Health Emergency (PHE) guidelines resulted in fewer closings of MO HealthNet cases. The decrease in reapplications impacted the total number of MO HealthNet applications received.

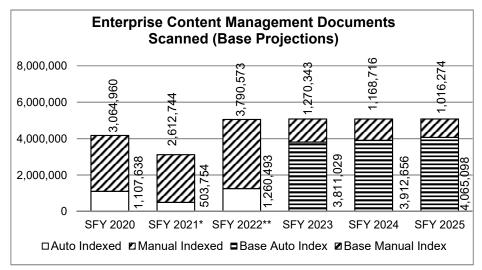
^{**}In SFY 2022, the increase is due to an increase in applications for Adult Expansion Group (AEG).

^{***}Projections in SFY 2024 and 2025 reflect an increase in MEDES applications to include the implementation of SNAP into MEDES. Projection figures are based upon a return to pre-COVID-19 processing standards.

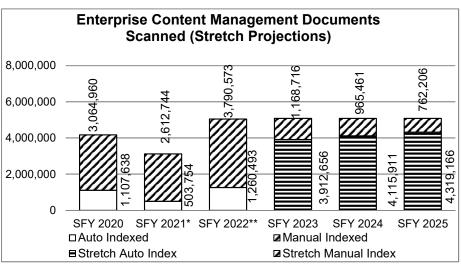
Department: Social Services HB Section(s): 11.130

Program Name: Missouri Eligibility and Enrollment System (MEDES)

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^{*}Decrease in SFY 2021 can be attributed to the suspension of annual renewals during the PHE and a decrease in hard copy eligibility verifications as a result of implementing electronic verification.



*Decrease in SFY 2021 can be attributed to the suspension of annual renewals during the PHE and a decrease in hard copy eligibility verifications as a result of implementing electronic verification.

available to staff until February 7, 2022.

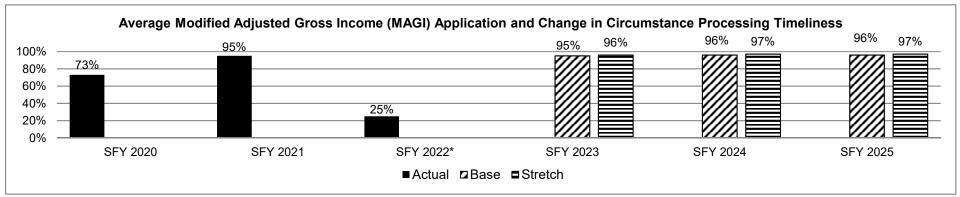
^{**}SFY 2022, the software that allowed for the majority of auto-indexing was not **SFY 2022, the software that allowed for the majority of auto-indexing was not available to staff until February 7, 2022.

Department: Social Services HB Section(s): 11.130

Program Name: Missouri Eligibility and Enrollment System (MEDES)

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

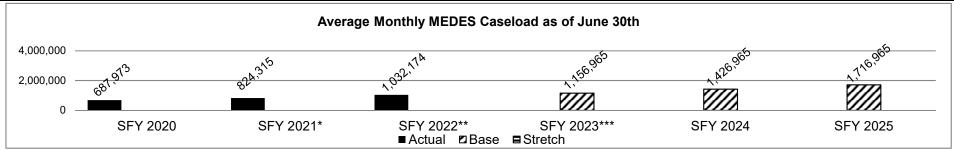


Beginning in SFY 2020, FSD implemented the ability to distinguish between initial applications and change in circumstance requests (active cases with address or household changes).

COVID-19 flexibilities allowed FSD to accept participant's attestation on most eligibility factors during the PHE. This resulted in a large increase in timeliness that may not be able to be maintained in SFY 2022.

*Decrease in SFY 2022 is due to an increase in applications for AEG, high staff turnover, and difficulty in hiring staff. Projections do not reflect a decrease as this is not expected to continue.

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



^{*}SFY 2021 COVID-19 PHE guidelines resulted in fewer closings of MO HealthNet cases.

Future active participants are expected to increase with the implementation of more programs in MEDES.

^{**}SFY 2022 COVID-19 PHE guidelines resulted in fewer closings of MO HealthNet cases. Caseloads also increased as a result of the implementation of the AEG in October 2021.

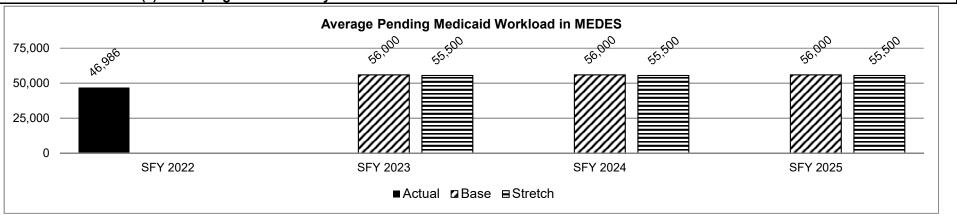
^{***}SFY 2023, is reflective of the current caseload.

Department: Social Services HB Section(s): 11.130

Program Name: Missouri Eligibility and Enrollment System (MEDES)

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

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



In prior budget requests the "Average Pending MAGI Workload" was reported; however, a combined Medicaid application processed initially in MEDES for all Medicaid programs was implemented with AEG in October 2021.

Efficiency during the design and implementation stages of MEDES is measured by CMS certification and readiness reviews. Milestones are measured by meeting functional milestones identified by CMS and agency priorities. These include:

Date	Milestone	Citizen Service Outcomes
October 1, 2013	Citizen web portal, ability to accept applications	Portal for citizens to inquire and/or make application for MAGI.
January 1, 2014	Interfaces, MAGI calculation, forms, Caseworker Portal	MAGI automated function enhanced Agency's eligibility determination processes. Avenue to house Tax Filer Rules.
September 2014	Implemented inbound/outbound Account Transfer for the FFM	Provided guidance and directional services to citizens when not eligible for MAGI benefits.
September 2014	Began implementing integrated electronic document management (FileNet) into MEDES case management	Means to electronically store documents for ease of access.

Department: Social Services HB Section(s): 11.130

Program Name: Missouri Eligibility and Enrollment System (MEDES)

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January 1, 2016	Launched Organizational Change Management as a project component	Project expected to be complete in June 2021.
August 2016	Release 1.10 Change in Circumstance functionality	Functionality provides the means to evaluate and re- evaluate applicant's eligibility for an IM program after a change in circumstance is made to a case. Functionality includes tracking of requests for SSN, setting sensitivity/security levels per case specifics, allows for adding a person, removing a person, and/or a change/addition in income to be considered a renewal on a case, and provides an eligibility timeline that displays an at-a-glance screen of eligibility segments.
September 2016	Rollout of ECM to all offices begins	N/A
December 2016	MEDES Application upgrade to Curam 6.2	Enhancement to the Management Wizard provides a process to apply an update to everyone in the household instead of entering it multiple times.
January 2017	Single Sign On	Single sign on allows for increased efficiency.
June 2017	Premium Changes for Children's Health Insurance Program (CHIP)	Ensures participants receive accurate and timely invoices for health coverage.
July 2017	Updated security roles implemented in MEDES	N/A-MEDES system updates.
February 2018	Implementation of final Project 1 functionality, which included Release 2.2 and the functionality for Transitional Medicaid, Sho Me Healthy Babies, automated case reviews, and completion of Project One, MO HealthNet for Families	

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March 2018	Verified Lawful Presence (VLP) part 2 & 3; connection with	Electronic source is used to provide verification of
	Homeland Security to verify citizenship or immigration status	citizenship and/or immigration status. Fully automated call which coordinates with MEDES to complete an eligibility determination.
March 2018	Remote Identity Proofing (RIDP) V2 Upgrade	MEDES provides a robust citizen portal to make online application for MAGI benefits.
November 1, 2018	Contract was awarded for ongoing Maintenance and Operations (M&O) for MEDES	N/A
January 2019	A contract for Eligibility Verification Services (EVS) was awarded	N/A
April 2019	Verify Lawful Presence (VLP) upgrade v37	Increases the number of cases the Department of Homeland Security (DHS) Save Program can resolve in real-time compared to DHS SAVE Program v33.
July 2019	Replaced EngagePoint (EP) Audit	This piece of software was out of date with no warranty.
August 2019	Qualified Vendor Listing (QVL) for ECM Phase II was released	N/A
September 2019	DataCap upgrade v9.1	Upgrade of DataCap to support document intake for ECM.
2020	Contract will be awarded for Project II which is the integration of SNAP into MEDES	N/A
February 2020	DataCap v9 upgrade	Upgrade of DataCap to support document intake for ECM.
March 2020	COVID-19 code to hold cases at the same level of care starting March 19, 2020; on-going	Hold cases at same level of care/stop cases from closing due to COVID-19.
July 2020	Curam upgrade to v7	Upgrade current system.
July 2020	MEDES Helpdesk stood up	Help to internal workers working cases.

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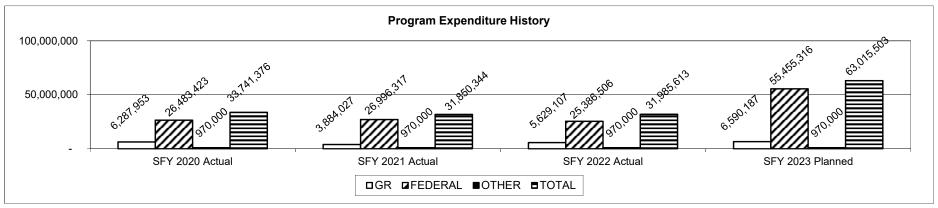
August 2020	Eliminated custom programming code that would require	Removed some customization.
	additional maintenance and extra effort in future upgrades to the MEDES system	
August 2020	Added additional elements necessary for centralized mailing to optimize processing	Centralized mailing elements.
December 2020	Installed Cúram v7.0.9.iFix5 to remediate security vulnerabilities identified by IBM	System upgrade.
March 2021	Addressed issues related to COVID-19 processing put in place to address the PHE	PHE- froze all cases at the level of care as of March 2021.
May 2021	SNAP contract was awarded to vendor	SNAP contract awarded.
August 2021	AEG	Phase I implementation.
November 2021	SMHB	Rate changes for Show Me Healthy Babies.
December 2021	AEG Changes	Changes to the system to incorporate more AEG changes needed.
January 2022	COVID-19 temp changes to system	To continue to hold cases open, release some coverages as approved.
April 2022	Remove quick denial from system	System no longer denies cases, worker must manually do it.
June 2022	ME code changes	To accommodate MHD ME code changes.
August 2022	System upgrade	Upgrade to V-8.
Future Planning: PHE End Date Declared	Remove COVID-19 code from the system and start taking action on all cases	Remove COVID-19.

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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.)



SFY 2023 planned expenditures are net of reverted.

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

Health Initiatives Fund (0275)

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

Federal law: Title IV-A of the Social Security Act, Federal regulation: 45 CFR Part 95, 7 CFR Part 272 and 277.

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

Yes. There are various match rates depending on the activity/scope of the project. For example, MAGI implementation is reimbursed at 90% FF and maintenance and operations is reimbursed at 75% FF. There is an Advanced Planning Document (APD) filed with the CMS and FNS detailing allocation of funding for MEDES development which is required in order to receive reimbursement and requires regular updates throughout the development stages of the project. Integration of SNAP into MEDES, Project II, will allow for costs to be allocated in accordance with the APD and costs allocable to MO HealthNet Administration will be reimbursed at 90% FF and 75% FF respectively and costs allocable to SNAP Admin will be reimbursed at 50% FF.

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

Resources used to support federally mandated programs such as Medicaid and SNAP are considered federally mandated.