Information Technology Capital Investment Program

Project Close Out Report

To: Information Technology Strategy and Investment Committee John Vittner, Office of Policy and Management

From: Michael Gilbert

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Agency: Department of Social Services
Project: Husky Family Coverage

Project Manager: Kristin Dowty, Medical Administration Manager

Total Funds Requested: \$469,770

Total Funds Allotted to Agency: \$469,770

Accumulative Total Capital Fund Expenditures to Date: \$415,430

Brief Project Description/Summary:

Under the SFY 16 budget as approved by the General Assembly, the Department of Social Services and Access Heath Connecticut (AHCT) have been requested to modify the existing, shared Integrated Medicaid Eligibility system to allow for proposed revisions to Medicaid/Qualified Health Plan (QHP) coverage for certain HUSKY A adults. For those HUSKY A adults with incomes over 150% of the federal poverty level (effectively 155% after consideration of the 5% income disregard), Medicaid will no longer provide coverage, and these individuals will transition to federally subsidized coverage under QHP's offered by AHCT. Those with earned income, however, are subject to a 12 month transitional coverage extension. Pregnant women above 155% FPL are exempt from this change.

This project will support the systems modifications necessary for this change.

6/30/17 Update: The final payment for this effort has been issued and the project is closed.

List Project Goals and Deliverables Completed:

(Please provide a brief summary of the goals and deliverables that were implemented. Please reference the IT Capital Investment Brief for the initial goals of the projects.)

Project was completed on 10/16/15. The system deployment was completed on 7/14/15 including the following primary requirements:

- FPL Threshold limit change for MA Parent/Caretaker (PT-5568)
- Update Medicaid Determination Service to use HIX system information for MA Renewals Projection (PT-4464)
- Update Medicaid Determination Service to use HIX system information for MA Renewals Final (Auto-renewal and Discontinuance) (PT-4464)

In addition, post-operations support was provided through 8/14/15 and warranty through 10/16/15.

Project Replication Opportunities:

(Are there opportunities to repeat or leverage the project solution by other state agencies? Please provide a brief explanation.)

This project is specific to Medicaid eligibility but cross-agency utilization between DSS and AHCT was achieved. This change will have potential future application to the extent this income criteria changes again. Such a change is currently before the General Assembly for consideration in the SFY 2018-19 budget.

Key Lessons Learned:

(Provide any lessons learned or experienced during this project that may be helpful to other agencies starting a similar project.)

Strong interagency collaboration is critical to successful rollout of these changes once operational.