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: Social Security Number Removal Initiative

 Project Start Date:
 9/1/2017

 Project End Date:
 10/1/2018

Project Manager: Sandi Ouellette

Total Funds Requested: \$368,143

Total Funds Allotted to Agency: \$368,143

Accumulative Total Capital Fund Expenditures to Date: \$275,635

Brief Project Description/Summary:

This project is for the design, development, testing, and implementation of technical enhancements needed to successfully implement a mandated federal initiative. The initiative required Medicare and states to remove Social Security Numbers (SSNs) from Medicare cards and replace them with a Medicare Beneficiary Identifier (MBI). The federal government will begin issuing new Medicare cards with MBIs beginning in April 2018 and is expected to have issued new Medicare cards to all beneficiaries by April 2019. A post-implementation monitoring period continues until December 2019, during which the MBI is an "optional" field. After January 1, 2020, SSNs will no longer be used for Medicare processing.

Within Department of Social Services, affected systems include the integrated eligibility and enrollment system, ImpaCT, the Data Warehouse, and the Medicaid Management and Information System, MMIS.

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.)

Major Project Accomplishments

- Performed Impact analysis on the MMIS and E&E Systems and Data Warehouse to identify the files, services, reports, and screens that need to be changed to add the MBI or replace the HICN with the new MBI.
- Performed system change analyses and detail requirements definitions and documented them in Technical Requirement Definition Documents.

 Designed and developed data elements which will be stored in the ImpaCT source system (e.g. Client ID, HICN, MBI effective/end dates, reason codes, status) and a
- mechanism to push that information to MMIS systems and to all other interfacing State systems, Systems maintained by Administrative Organizations(ASO) and Systems owned by other agencies
- Designed and developed the foundation to receive the new MBI mapping from CMS, using the standard interchange process known as the Territory Batch Query (TBQ) and loading it into the receiving source system, the ImpaCT system.
- Designed and developed the process for receiving the initial CMS crosswalk files and converting the existing SSN identifier to the new MBI.
- Identified all affected program units that have exchanges with CMS that use the HICN that will need to add the MBI or switch to the MBI.
- Designed and developed changes to existing user interfaces and reports and developed additional reports as required to include the MBI
- 8 Performed several levels of testing including integration interface, user acceptance testing with other systems, and testing with CMS.
- 9 Successfully implemented the changes to DSS's production systems and went live on April 02, 2018
- Implement the remaining interfaces related to Hospitals and Disproportionate Share and PDP extracts and a few other reports out of the MMIS and any changes during the rest of the Transition period.

Project Replication Opportunities:

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

This project was required by the federal Centers for Medicare and Medicaid Services and was a unique effort. We do not see any immediately transferrable project features that will assist the Department or the state outside of these required actions.

Key Lessons Learned:

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

Early formation of effective project governance, fostering project efforts across both the MMIS claims system and the Department's eligiblity management system was key to the success of this effort.