

Happy Holidays!

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[Link to MMIS Web Site](#)

Letter from MMIS Replacement Project Manager Jim Joyce

I hope you're all **enjoying** the holiday season and taking time to relax with family and friends. As 2007 comes to a close, I wanted to take a moment to reflect on where we've come with the Replacement Project -- and of course, where we're going.

The past year was one of many challenges, many of which I'm pleased to say we have successfully met. In January, we announced a decision to postpone our go-live date. This allowed us to properly complete the design of the system and will give us additional time to perform the extensive testing needed to ensure its success.

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It will result in a system that I am certain will be better able to serve the department both now and in the future.

The most significant accomplishment of the year was the approval of the system's design, which supports the more than 1,700 requirements many of you worked so hard to put in place. The

design approval allowed EDS to begin actual construction of the system, which is now almost complete.

Work continues on the substantial job of converting data from the old system and also making sure that we accurately load configuration data

from the various health plans that work with our Medicaid program.

We are currently conducting extensive tests of the internal workings of the system and will soon be releasing it for User Acceptance Testing.

In a few days, managers will begin the first of two Operational Readiness Assessments that will take place prior to implementation. It will focus on the Wave 2 personnel changes and also on the department's preparation to enroll and train staff in operating the new system.

Finally, members of the business are working to produce or update desk manuals that will document the way work is done in the new system. Working on these manuals will help staff get ready for user training, which will begin this spring, with enrollment taking place through the department's online Learning Center.

I want to thank everyone who contributed to our progress to this point: our vendors -- EDS and FOX Systems, our dedicated project team and those of you from the department's businesses that have given so much of your time to make our new MMIS a success. I know we have asked a great deal of you. And I know that has affected not only your workloads, but also those of your colleagues -- many of whom have been filling in so that you can complete your tasks for the project. Their contribution has not gone unnoticed.

Looking forward to the exciting time ahead of us, I wish you all a safe and peaceful new year. **MMIS**



Jim Joyce



[Link to MMIS Progress Archive](#)

MMIS User Acceptance Testing rescheduled to begin end of January

User Acceptance Testing (UAT) for the new MMIS, originally scheduled to begin on January 2, has been delayed until the end of January. As a result, UAT training will also be delayed.

Jim Joyce, MMIS Replacement Project manager, explained that the schedule change is due to the need to correct defects found in tests of system functionality and in the data conversion and configuration activities, as well as the need to complete testing of the interfaces between existing DHS systems and the new MMIS. System testing, which is a prerequisite for UAT, can't be completed until the data and interface problems are fixed.

“The good news,” said Joyce, “is that by fixing these problems now we avoid having to do it later as part of UAT. The other good news is that in 10 of the 13 areas that are part of the UAT Project Readiness Assessment, we are ready to start UAT.”

Effect of the delay

Joyce went on to acknowledge the effect of the delay. “The project is acutely aware of the impact this has on all of you throughout DHS who have worked so hard on the project to this point,” he said. “We know you have changed your schedule to accommodate UAT training and UAT testing -- and that it was not easy to do. We are sorry about the delay, and if there was any way to avoid changing the UAT schedule we would do that. But we don't want to continue with the current UAT schedule only to find the problems that we know are already there.”

The project is extending the time frames for both data conversion and MMIS system testing. At this time, DHS has not changed the planned MMIS implementation date. [MMIS](#)



Provider Implementation

How DHS is preparing providers for the new MMIS

A great deal of effort is being put forth to ensure that the more than 31,000 providers of Medicaid services to Oregonians will be ready to use the new MMIS when it is launched this summer. The department's goal has been to communicate early and often about the new system with the provider community.

Provider Implementation Workgroup

The MMIS Provider Implementation Workgroup is made up of representatives of all areas of DHS involved in administering Medicaid services. Their job is to ensure that all providers receive information about the new MMIS in a timely and effective manner. DHS's Jennifer McKinley and EDS's Paul Combs, the project's lead for provider implementation, head the workgroup.

"The new MMIS will make it much faster and easier for providers to do business with the state's Medicaid program," said Combs, "but with anything new, there will be a period of transition. It's our job to make sure providers understand how the new system will operate and what

changes will take place in the way they'll interact with DHS."

Meetings with provider groups

As part of their outreach to the Oregon provider community, McKinley and Combs have worked with several DHS managers to meet with provider associations and groups in Oregon.

At this writing, they have met with the Oregon State Pharmacy Association, the Oregon Medical Association, the Oregon Health Care Association, the Oregon Alliance of Senior & Health Services, the Association of Oregon Community Mental Health Program Directors, the Planning and Management Advisory Council and the DMEPOS Provider Group. Meetings with other groups are being planned.

The meetings have typically included an overview of the MMIS project and schedule, as well as discussions of upcoming training opportunities and changes that will affect the particular provider group.

Every group met with has expressed appreciation for the updates and has

agreed to make their internal communication vehicles available to the project, especially in the area of provider training information. Several groups provided helpful input and suggestions on how the project can best meet their particular group's communication and training needs.

Electronic Data Interchange

Work has also been progressing to update the current Electronic Data Interchange (EDI) Companion Guides (CGs) to accommodate the minor changes that the new MMIS will bring. As the CGs are updated for the new MMIS, they will be posted to the [MMIS Provider Web site](#) (see below).

While providers must retest all of their EDI transactions before using the new system to exchange claims data and other information with DHS, no re-application is necessary. In March 2008, DHS will begin contacting all current EDI submitters to ensure they have all the tools needed and are prepared to begin retesting. Training sessions for providers on the new EDI functionality will begin this spring.



Benefits to providers

Combs outlined some of the enhancements and new features that providers would see in the new MMIS. Notable among them will be the introduction of a secure Web portal, which will offer providers easy, real-

time access to a level of information and functionality currently unavailable to them. Providers will be able to use the Web for claim submissions and adjustments, prior authorization requests, eligibility verification, and status inquiries on pending issues.

The system will also boast a new Automated Voice Response system (AVR), a phone-based eligibility verification system that will replace DHS's current phone system with new features including a fax-back option.

Providers will also notice that the 8 ½ x 11 paper DMAP Medical Care Identification form that recipients currently show them to establish eligibility will be replaced with a wallet-sized card. This new ID will look like other health plan identification cards distributed to recipients by other insurance carriers. The new card will contain the recipient's name, identification number and date issued. That means providers will be required to verify eligibility and other coverage information by using one of the methods that will be in place when the system is implemented.

Communication is critical

"We realized that communication with providers -- early and often -- would be one of the most important

factors in the system's acceptance and ultimate success," said Combs.

He explained that each DHS business already had established channels to communicate to their providers. "We decided to build on that," he said, "so that wherever possible we communicate information about the project through these established relationships. This builds on the trust already established with the various provider groups and reinforces the message of partnership between DHS and the provider community."

A key component of the communication plan for providers is a series of informational bulletins called the *MMIS Insider*. Content for these bulletins is developed by the workgroup, and then published by DMAP's communications unit.

With that unit's assistance, the workgroup has also established an [MMIS Provider Web site](#) with information specific to providers. It lists all of the new system's changes and how providers will benefit from them, has a Frequently Asked Question (FAQ) section and an e-mail address for providers to contact the project for more information. It also contains an archive of the *MMIS*

Insiders and all past provider announcements about the project.

Training plan

In addition to communication, the workgroup has developed a training plan that will deliver this spring 46 days of provider training in 34 locations across the state and adjoining areas. A small group of providers received a preview of these training sessions during the first week of December. Feedback received from the preview sessions will be used to fine-tune the training for statewide delivery in the spring.

"I have no doubt that providers will be very pleased with the system once they get used to it," Combs said. "That's why we're doing all we can to keep them updated on our progress and to help them prepare for the changes that are coming."

MMIS



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