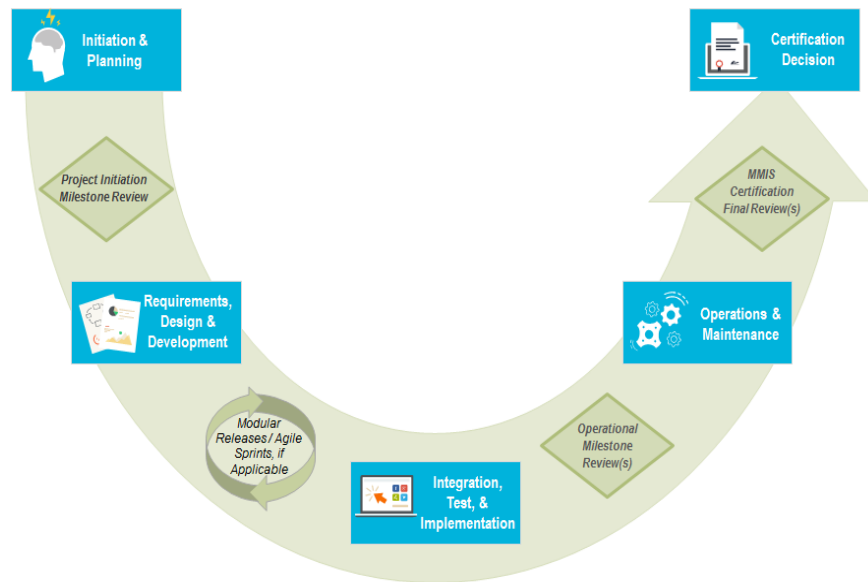


MILESTONE REVIEW PREPARATION GUIDE

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1 Overview

This appendix explains how milestone reviews are conducted and how states can prepare for them.

A milestone review can be either of the following review types:

- Virtual/on-site review, where the Centers for Medicare & Medicaid Services (CMS) conducts real-time meetings with the state and its contractors either in person, by phone, or as a mix of in-person and phone
- Desk review, where CMS reviews checklists and evidence without scheduling review sessions with the state

Project Initiation Milestone Reviews (R1) are usually desk reviews. The Operational Milestone Review (R2) can be either a virtual/on-site review or a desk review, depending on the circumstances. The Medicaid Management Information System (MMIS) Certification Final Review (R3) is usually a virtual/on-site review.

1.1 Timeline

Figure 1 shows the timeline of a milestone review, including pre-review and post-review activities.

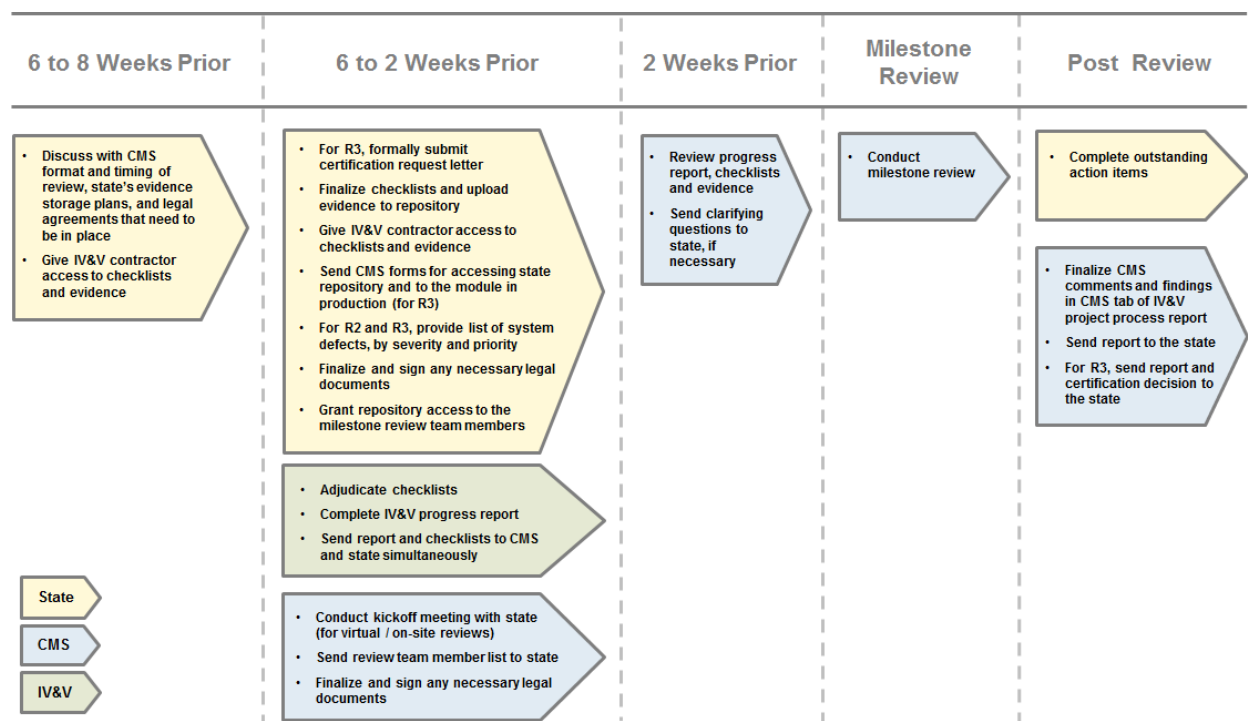


Figure 1. Milestone Review Timeline

1.2 Six to Eight Weeks Prior to Milestone Review

Several months before the state's preferred milestone review date, the state should let CMS know about its plans. In the Independent Validation & Verification (IV&V) tab of the quarterly IV&V Progress Report, there is a schedule section where tentative milestone review dates are entered; this enables CMS to have an advanced view of upcoming engagements.

No later than six to eight weeks before the state wishes to conduct a review, it formally notifies its Regional Office (RO) to discuss the timing and format of the milestone review. The milestone review will be scheduled in accordance with CMS availability.

CMS and the state discuss any legal non-disclosure and data-sharing agreements that may be required. They also discuss plans for granting access to the evidence repository (e.g., whether the state plans to use a state-controlled SharePoint site).

The state should finalize its checklists and ensure that the IV&V contractor has sufficient time to review the evidence, to complete the checklists and the IV&V Progress Report, and to send the completed documents to CMS and the state.

1.3 Two to Six Weeks Prior to Milestone Review

The state will ensure that the CMS team has access to the checklist evidence. The state can either upload evidence to the CMS repository or grant CMS access to the state's own repository that is compliant with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Using the CMS repository is the preferred method. Should the state choose to use the CMS repository, it should talk to its RO analyst to gain access.

Other actions completed during this timeframe are as follows:

- The IV&V contractor sends the completed checklists and IV&V Progress Report to CMS and the state.
- CMS has a kickoff meeting with the state (for virtual/on-site reviews).
- CMS sends the list of milestone review team members to the state.
- CMS and the state finalize and sign any necessary legal documents.
- The state provides CMS with any forms that the team is required to submit to gain access to the state repository (if applicable) and to the module in production (for R3).
- The state grants repository access to the milestone review team members (if applicable).
- For R2 and R3, the state provides a list of existing system defects, by severity and priority.

1.4 Two Weeks Prior to Milestone Review

CMS begins its preliminary review of checklists and evidence. CMS may send clarifying questions to the state if the checklists or evidence are not clear.

1.5 Milestone Review

If the review is a desk review, the CMS milestone review team will continue its review of the artifacts and evidence. If the review is a virtual/on-site review, the CMS milestone review team and the state and its contractors will meet to review the module(s). Depending on how many and what type of modules are being reviewed, the milestone review can last two to five days.

The milestone review consists of structured and semi-structured sessions. A structured session follows a pre-defined agenda. The first structured session is the overview session, in which the state sets the agenda, prepares the deck, and leads the review team through a demonstration. CMS sets the agenda for the closeout session.

In the semi-structured sessions, the state may present material, if it wishes to do so. The state is not required to prepare slides. The semi-structured sessions will include time for the CMS team to ask specific questions needed to complete the review. Questions vary based on the team's preliminary review of the checklists, and demonstrations spur questions.

In many cases, a question is asked, and the state will need to follow-up with clarification or additional evidence. A running list of these action items is kept during the sessions.

Table 1. Types of Sessions

Session	Structured/ Semi-Structured	Description
Overview	Structured	• Led by the state. • Team introductions. • History of the system/module(s) and general information about its functions. • Topics that the state wishes to share or discuss. • The state gives a demonstration of the module(s) and its basic functions. If this is an R3 review, then the demonstration must be for the system in production, not in a test environment.
Business Functional Checklist	Semi-structured	• This is when the business function checklist is discussed. • The state is not required to prepare a presentation, but may. If the state does prepare a deck, it should cover checklist criteria individually. (Multiple criteria could be covered in a single slide.) • Time is allocated for the CMS team to ask questions. • The state should be prepared to give demonstrations of specific functions if asked. • The state should ensure that all relevant subject matter experts, whether state or contractor staff, are present.
Information Architecture	Semi-structured	• These sessions are for the five core checklists. • In some cases, one session will cover more than one checklist.
Integration and Utility	Semi-structured	

Session	Structured/ Semi-Structured	Description
Standards and Conditions for Medicaid Information Technology (IT)	Semi-structured	- The state is not required to prepare a presentation, but may. If the state does prepare a deck, it should cover checklist criteria individually. (Multiple criteria could be covered in a single slide.) - Time is allocated for the CMS team to ask questions. - The state should be prepared to give demonstrations if asked. - The state should ensure that all relevant subject matter experts, whether state or contractor staff, are present.
Access and Delivery	Semi-structured	
Intermediary and Interface	Semi-structured	
Open	Varies	Depending on the circumstances, a state or CMS may wish to schedule a topic-specific session.
Closeout	Semi-structured	- Review and agreement on the list of action items. - Closing remarks by the state. - CMS team members share impressions and recommendations with the state. - Next steps are agreed upon.

1.6 Post-Review

The CMS team will not complete its report until all of the outstanding action items have been resolved. CMS will enter its summary, findings, and recommendations into the CMS tab of the IV&V Progress Report and will return it to the state. For final, MMIS certification reviews (R3), CMS will send a formal report along with a certification decision letter.

2 Tips for Preparing for a Milestone Review

2.1 Completing Checklists

- Complete all checklists and provide evidence for all criteria. Nothing should be blank or without evidence/explanation, regardless of the current MITA maturity level.
- Provide appropriate justification for criteria marked as “No” or “N/A.”
- Populate the evidence column with one direct link per criterion that leads to a single folder containing all corresponding evidence.
- If the system being evaluated has a criterion that covers functionality being performed by a different system housed in a different agency (e.g., E&E), the state must demonstrate how data interaction and data flow occur between the two systems and must have the information/evidence to support the explanation and reasoning.

2.2 Organizing Evidence

- When uploading evidence to the repository (whether the CMS repository or the state repository), organize evidence by using folders that correspond to each of the checklist criteria.
- Indicate which evidence contains Personal Health Information (PHI) / Personally Identifiable Information (PII). For example, label the evidence as “Confidential.”

3 Is the State Ready for a Milestone Review?

The state can use the following lists to ensure that it is ready for milestone reviews.

3.1 Project Initiation Milestone Review

Table 2. Project Initiation Milestone Review

Question	Yes/No
Has the state notified CMS, at least six to eight weeks before the target review date, of its desire to have a milestone review?	
Has the IV&V contractor sent a copy of the IV&V Progress Report and the completed checklists to the state and the CMS address (MES@cms.hhs.gov)? Are the IV&V and programmatic tabs in the report filled out?	
Has the state stored its evidence in a HIPAA-compliant repository and granted the CMS review team access to that repository?	
Is the repository organized such that each of the criteria has its own evidence folder?	
Are all of the artifacts required by the Required Artifacts List in the state’s repository?	

Question	Yes/No
In the checklist evidence cells, is there only one hyperlink to evidence? Does the link navigate the reviewer to the explicit location within the target document where the criterion evidence exists?	
Has the state given an answer and explanation for each checklist criterion?	
Has the state demonstrated that the project planning process is largely complete for the module(s)?	
Does the state have a project management plan and a fully developed Concept of Operations (ConOps)?	
Has the state appropriately documented the timeline, major milestones, risks, and mitigation strategies?	
Has the state identified key stakeholders and put plans into place to communicate with and involve them throughout the project?	
Is the state planning for reuse in its design and development?	
Has the state submitted its Implementation Advance Planning Document (IAPD)?	

3.2 Operational Milestone Review

Table 3. Operational Milestone Review

Question	Yes/No
Has the state notified CMS, at least six to eight weeks before the target review date, of its desire to have a milestone review?	
Has the IV&V contractor sent a copy of the IV&V Progress Report and the completed checklists to the state and the CMS address (MES@cms.hhs.gov)? Are the IV&V and programmatic tabs in the report filled out?	
Has the state stored its evidence in a HIPAA-compliant repository and granted the CMS review team access to that repository?	
Is the state repository organized such that each of the criteria has its own evidence folder?	
Are all of the artifacts required by the Required Artifacts List in the evidence repository?	
In the checklist evidence cells, is there only one hyperlink to evidence? Does the link navigate the reviewer to the explicit location within the target document where the criterion evidence exists?	

Question	Yes/No
Has the state given an answer and explanation for each checklist criterion?	
Is the module(s) ready for production?	
Have all or most of the unit, regression, integration, and user acceptance testing been completed?	
Have any remedial actions been completed? If major defects exist, does the state have appropriate and sustainable workarounds and mitigations in place to address them?	
Is the operator and user training for the support staff completed or near completion?	

3.3 Final Certification Milestone Review

Table 4. Final Certification Milestone Review

Question	Yes/No
Has the state notified CMS, at least six to eight weeks before the target review date, of its desire to have a milestone review?	
Has the IV&V contractor sent a copy of the IV&V Progress Report and the completed checklists to the state and the CMS address (MES@cms.hhs.gov)? Are the IV&V and programmatic tabs in the report filled out?	
Has the state stored its evidence in a HIPAA-compliant repository and granted the CMS review team access to that repository?	
Is the state repository organized such that each of the criteria has its own evidence folder?	
Are all of the artifacts required by the Required Artifacts List in the evidence repository?	
In the checklist evidence cells, is there only one hyperlink to evidence? Does the link navigate the reviewer to the explicit location within the target document where the criterion evidence exists?	
Has the state given an answer and explanation for each checklist criterion?	
Has the module(s) been operating for at least six months? Is it stable?	
Has the state sent a Certification Request Letter? Did the letter include a copy of the acceptance letter addressed to the system developer and a proposed review date?	