MITA
Medicaid Information
Technology Architecture

CM – Case Management					
Manage Case Information					
Capability Question	*Level 1*	*Level 2*	*Level 3*	*Level 4*	*Level 5*
Business Capability Descriptions					
Is the process primarily manual or automatic?	The process consists primarily of manual, paper-based activity to accomplish tasks. SMA subjectively determines decisions based on interventions.	SMA uses a mix of manual and automatic processes to accomplish tasks.	SMA automates process to the full extent possible within the intrastate Health Information Exchange (HIE). SMA produces audit trail of case determination 100% of the time.	SMA automates process to the full extent possible across the interstate by a regional Health Information Exchange (HIE).	SMA automates process to the full extent possible nationally via the Nationwide Health Information Network (NwHIN).
Does State Medicaid Agency use standards in the process?	SMA focuses on meeting compliance thresholds for state and federal regulations using state-specific standards.	SMA applies a mix of HIPAA and state-specific standards to monitor compliance thresholds established by state and federal regulations, professional standards, or administrative business rules.	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for a state Health Information Exchange (HIE).	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for clinical and interstate information exchange of information via a regional Health Information Exchange (HIE).	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for national exchange of information via the NwHIN.
How does the State Medicaid Agency collaborate with	Very little collaboration occurs with other agencies	SMA collaborates with other agencies and entities to adopt	SMA collaborates with other intrastate agencies, and entities	SMA collaborates with other regional agencies, and	SMA collaborates with national agencies, and

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other agencies or entities in performing the process?	to standardize information exchange or business tasks. The process consists primarily of manual processes (e.g., telephone contacts, facsimile, letters) to gather and share information between social services agencies, physician offices, and other provider types to coordinate care.	HIPAA standards and Electronic Data Interchange (EDI) transactions. An automatic process documents care plan and tracks cases. SMA permits authorized users to access other information bases and retrieve pertinent information about the patient (i.e., eligibility, claims history).	and the Regional Health Information Organization (RHIO) to adopt national standards, and to develop and share reusable business services.	entities, and the RHIO to adopt national standards, and to develop and share reusable processes including clinical information shared via a regional Health Information Exchange (HIE).	entities, and the RHIO for national (and international) interoperability improvements that maximize automation of routine operations shared across the NwHIN.
Business Capability Quality: Timeliness of Process					
How timely is this end-to-end process?	Process meets threshold or mandated requirements for timeliness (i.e., the process achieves results within the time specified by law or regulation).	Process timeliness improves through use of automation. Timeliness exceeds legal requirements. The process uses automatic reports for tracking compliance with state and federal guidelines for case management and for	Timeliness improves via state and federal collaboration, use of information sharing, standards, and regional information exchange hubs. All information to manage the case is immediately available from a state Health	Information is available in near real time. Processes that use clinical information result in immediate action, response, and results. SMA has regional Health Information Exchange (HIE)	Information is available in real time. Processes improve further through connectivity with other States and with federal agencies via the NwHIN. Most processes execute at the point of service. Results are almost

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		the delivery of care, improving timeliness over Level 1.	Information Exchange (HIE). Timeliness exceeds Level 2.	interoperability, which further improves timeliness over Level 3.	immediate.
Business Capability Quality: Data Access and Accuracy					
How accurate is the information in the process?	Use of direct data entry for information collection is manually intensive and susceptible to inconsistent or incorrect information. Stakeholders are unable to rely on information for decision-making.	HIPAA standard transactions improve accuracy of information but the decision-making process may be erroneous or misleading. Accuracy is higher than at Level 1.	Automation of information collection increases the reliability of a state's Health Information Exchange (HIE) internal information. External sources of information use MITA Framework for information exchange. Decision-making is automatic using standardized business rules definitions. Accuracy is 99% or higher.	Automation of information collection increases the reliability of regional Health Information Exchange (HIE)'s internal and external sources of information. SMA adopts MITA Framework for information exchange by interstate agencies. Decision-making is automatic using regional standardized business rules definitions. Accuracy rating is at 99% or higher.	SMA adopts MITA Framework for national information exchange via the NwHIN. Decision-making is automatic using national standardized business rules definitions. Accuracy rating is at 99% or higher.

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How accessible is the information in the process?	SMA stores information in disparate systems including paper storage and obtains information manually.	SMA stores information in disparate systems, but automation and HIPAA standards increase accessibility over Level 1.	SMA obtains information easily and exchanges with intrastate agencies and entities from a state Health Information Exchange (HIE) based on MITA Framework and industry standards. Accessibility completes in less than three (3) seconds.	SMA obtains information easily and exchanges with regional agencies and entities from a regional Health Information Exchange (HIE). Accessibility completes in less than three (3) seconds.	SMA obtains information easily and exchanges with national agencies via the NwHIN. Accessibility completes in less than three (3) seconds.

Business Capability Quality: Cost Effectiveness

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What is the cost to perform the process compared to the benefits of the results?	High relative cost due to low number of automatic, standardized tasks. The process meets state budget guidelines or established dollar thresholds for case	Automation improves process and allows focus on exception resolution, improving cost effectiveness ratio over Level 1.	SMA adopts MITA Framework, industry standards, and other nationally recognized standards within a state Health Information Exchange (HIE). The process	SMA adopts MITA Framework, industry standards, and other nationally recognized standards with a regional Health Information Exchange (HIE) improving cost	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for national (and international) information exchange via the NwHIN improving cost

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	savings.		demonstrates the Return on Investment projected by SMA further improving cost effectiveness ratio over Level 2.	effectiveness ratio over Level 3.	effectiveness ratio over level 4.
Business Capability Quality: Effort to Perform; Efficiency					
How efficient is the process?	Process is labor intensive. There is wasted effort or expense to accomplish tasks. Process meets minimum state process guidelines and SMA performance standards. Efficiency is low.	Automation and state standards increase productivity. Efficiency is higher than Level 1.	SMA adopts MITA Framework, industry standards and information exchange with intrastate Health Information Exchange (HIE) and entities improving efficiency to 95% or higher.	SMA adopts MITA Framework, industry standards and information exchange with regional Health Information Exchange (HIE) and entities improving efficiency to 98% or higher.	SMA adopts MITA Framework, industry standards and information exchange via the NwHIN improving efficiency to 98% or higher.
Business Capability Quality: Accuracy of Process Results					
How accurate are the results of the process?	Manual processes result in greater opportunity for human error. The process meets state	Automation and standardized business rules definitions reduce error and improve	SMA adopts MITA Framework, industry standards and information exchange with intrastate Health	SMA adopts MITA Framework, industry standards and information exchange with interstate	SMA adopts MITA Framework, industry standards and information exchange via the NwHIN

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	and federal expectations for member education, coordination of care between providers, and maintaining the plan of care. SMA decision-making is manual for the process is using established parameters and guidelines and may result in some subjective and inconsistent decisions. Accuracy is low.	accuracy above Level 1.	Information Exchange (HIE) and entities improving accuracy to 95% or higher.	regional Health Information Exchange (HIE) and entities improving accuracy to 98% or higher.	improving accuracy to 98% or higher.
Business Capability Quality: Utility or Value to Stakeholders					
Does the business process satisfy stakeholders?	Stakeholders lack confidence in information negatively affecting stakeholder satisfaction with the process. SMA has few dedicated	Automation and standardization provides clear and useful information. Stakeholder satisfaction is greater than Level 1.	SMA adopts MITA Framework, industry standards and information exchange with intrastate Health Information Exchange (HIE) and entities improving	SMA adopts MITA Framework, industry standards and information exchange with interstate regional Health Information Exchange (HIE) and	SMA adopts MITA Framework, industry standards and information exchange via the NwHIN improving stakeholder satisfaction to 98% or

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	resources for improve and few measurements in place (e.g. reliance on complaints, legal mandates for action regarding improving stakeholder satisfaction.)		stakeholder satisfaction to 90% or higher. SMA uses survey or questionnaire for information collection.	entities improving stakeholder satisfaction to 95% or higher.	higher.