Part I – Business Architecture
Appendix B – Maturity Model Details

Introduction

This chapter provides a detailed look at the MITA Maturity Model (MMM). The overview of the MMM is in Part I, Chapter 3, MITA Maturity Model. A maturity model measures the improvement and transformation of a business across two (2) dimensions – time and level of maturity. The time dimension marks progress from the As-Is (i.e., current) operations to the To-Be (i.e., future) environment. The level of maturity dimension shows how the business looks at present and what its capabilities likely will be as it matures.

The purpose of the MMM is to serve as a reference model for grounding the definitions of business capabilities, as described in Part I, Chapter 5, Business Capability Matrix, information capabilities as described in Part II, Chapter 6, Information Capability Matrix, and technical capabilities, as described in Part III, Chapter 7, Technical Capability Matrix. The MMM establishes boundaries and measures to use in determining whether a business capability definition is clear and concise.

The MMM applies to the State Medicaid Enterprise, the domain that centers on the Medicaid environment including leveraged systems and interconnections among Medicaid stakeholders, providers, beneficiaries, insurance affordability programs (e.g., Children's Health Insurance Program (CHIP), tax credits, Basic Health Program), Health Information Exchange (HIE), other state and local agencies, other payers, Centers for Medicare & Medicaid Services (CMS), and other federal agencies. The Medicaid Enterprise is defined in the MITA context as:

- The domain where federal matching funds apply.
- The interfaces and bridges among Medicaid stakeholders, including providers, beneficiaries, other state and local agencies, other payers, CMS, and other federal agencies.
- The sphere of influence touching and touched by MITA (e.g., national and federal initiatives such as the Nationwide Health Information Network [NwHIN]). (See Front Matter, Chapter 6, Overview of the MITA Initiative for a discussion of the Medicaid Enterprise.)

The previous version of MITA Framework did not include MITA maturity Levels 4 and 5 definitions. The MITA team provides definitions for these maturity levels at a high-level taking into account the recent factors concerning Medicaid Enterprise modernization (e.g., American Recovery and Reinvestment Act (ARRA) of 2009, Health Information Technology for Economic and Clinical Health Act (HITECH) of 2009, and Affordable Care Act of 2010). The MITA team will further refine Levels 4 and 5 as the MITA Framework continues to evolve.

MMM Levels of Maturity Defined

This section defines the MITA Maturity Model five (5) levels for the MITA Framework. Level 1 of the MMM include capabilities to demonstrate adherence to federal and state legislative mandates. Level 2 improves over Level 1 with the introduction of quality improvements and data access achieved by the implementation of technology standards. Level 3 has high use of industry standards for data exchange and the State Medicaid Agency (SMA) is collaborating with intrastate agencies to improve health care coordination. Level 4 introduces the intrastate and interstate exchange of clinical information. Seamless coordination, real-time processing, and the integration of state and federal agencies is the defining capability for Level 5. **Table B-1** further describes the Medicaid Enterprise as it moves from one maturity level to another.

Table B-1. MITA Maturity Model Timeline Overview

Maturity Model Definition of Levels – General Timeline					
Timeline	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
	As-Is		***Near Future***		***To-Be***
CMS expects majority of state agencies to be at appropriate Level based on federal initiative deadlines. Agencies may be at Level 1 for some business processes and Level 2 for others in the present time.	**Level 1 – Widespread use of all technology, policy, and statutory enablers. Agency complies with baseline requirements.**	**Level 2 – Widespread use of all technology, policy, and statutory enablers. Agency improves important parts of its business.**	**Level 3 - Widespread use of industry standards. Agency promotes collaboration, data sharing, interoperability, and consolidation of business processes.**	**Level 4 – Widespread use of leverage and reuse of technologies. Agency is collaborating with interstate agencies.**	**Level 5 – Integration of state and federal exchanges. Agency coordination is seamless and data exchange is real-time. Focus is on continued improvement.**

The general definition of the five (5) levels of maturity establishes boundaries for each level. For example, a SMA can achieve Level 4 only if the business process uses clinical data to improve health outcomes and operational efficiencies. The MMM

provides a structure that shows the To-Be environment and the intermediate steps (or levels) the SMA will reach to achieve its objectives. The MMM shows a pathway of continuous business improvement toward a realistic To-Be environment. Each higher level of maturity incorporates the best practices of the level below and, more importantly, introduces new higher level capabilities.

CMS expects the majority of state agencies to be at an appropriate level based on federal initiative deadlines. Currently, the SMA may be at Level 1 for some business processes and Level 2 for others. Federal initiatives are directing the SMA to achieve Level 3 or, in some processes, Level 4 and 5 maturity.

Qualities of Each Level of Maturity

To further explain the differences between the levels of maturity, the MMM includes a set of measurable qualities for each architecture (i.e., business, information and technical) to help distinguish performance at one level from another level.

BUSINESS QUALITIES FOR MMM

The MMM for the business architecture includes a set of six (6) measurable qualities to help distinguish performance at one level from performance at another level for each of the MITA business model processes. These business qualities are as follows:

- **Timeliness of Process** – Time lapse between SMA initiation of a business process and attaining the desired result (e.g., length of time to enroll a provider, assign a member, pay for a service, respond to an inquiry, make a change, or report on outcomes).
- **Data Access and Accuracy** – Ease of access to data that the business process requires and the timeliness and accuracy of data used by the business process.
- **Effort to Perform, Efficiency** – Level of effort necessary to perform the business process given current resources.
- **Cost Effectiveness** – Ratio of the amount of effort and cost to outcome.
- **Accuracy of Process Results** – Demonstrable benefits from using the business process.
- **Utility or Value to Stakeholders** – Impact of the business process on individual members, providers, and Medicaid staff.

Qualities defined for each level should differentiate clearly between the levels and show a realistic progression toward improvement.

INFORMATION CAPABILITIES FOR MMM

The MMM for the information architecture includes a set of four (4) qualities to help distinguish performance at one level from performance at another level for each of the MITA business model business areas. See Part II, Chapter 6, Information Capability Matrix, for descriptions that are more detailed. The information capabilities are as follows:

- **Data Management Strategy** – Provides a structure that facilitates the development of information/data, effectively shared across a State Medicaid Enterprise to improve mission performance.
- **Conceptual Data Model** – Represents the overall conceptual structure of the data, providing a visual representation of the high-level data needed to run an enterprise or business activity.
- **Logical Data Model** – Identifies all of the logical data elements that are in motion in the system or shared within the Medicaid Enterprise.
- **Data Standards** – Identifies the applicable standard for each MITA data element.

TECHNICAL CAPABILITIES FOR MMM

The MMM for the technical architecture includes a set of three (3) technical services areas with specific technical service classification qualities to help distinguish performance at one level from performance at another level for each of the MITA business model business areas. See Part III, Chapter 7, Technical Capability Matrix, for descriptions that are more detailed. The technical capabilities are as follows:

- **Access and Delivery** – Encompasses design drivers and enablers such as web browser connectivity, language support, Customer Relationship Management (CRM), and forms and reporting services.
  - Client Support
  - Business Intelligence
  - Forms and Reporting
  - Performance Measurement
  - Security and Privacy
- **Intermediary and Interface** – Contains drivers and enablers, such as process orchestration, work flow and relationship management functionality.
  - Business Process Management

- Relationship Management
- Data Connectivity
- Service Oriented Architecture
- System Extensibility

- **Integration and Utility** – Includes design drivers and enablers such as solution stacks, database access layer services, scalability, application versioning and verification type utility services.
  - Configuration Management
  - Data Access and Management
  - Decision Management
  - Logging
  - Utility

The MMM Vision Layer

MITA goals and objectives support the Medicaid mission and goals. The Medicaid mission draws on a variety of sources, including policy making, strategic planning, and legislation. MITA is one of the key supports for achieving the Medicaid mission. MITA has its own stated objectives and goals that align with the Medicaid mission and with federal initiatives such as the Federal Health Architecture (FHA) and the NwHIN. The MITA Framework builds the Medicaid and MITA goals and objectives are built into it. Each level of maturity describes the realization of these goals. This is the capstone of the MMM and is the foundation for all three (3) MITA architectures.

The majority of the criteria that comprises the MMM focuses on the performance of specific Medicaid business functions. There are, however, other components within the Medicaid Enterprise that benefit from the application of maturity model principles. One such area is the Medicaid Mission and Goals (**Table B-2**) and another is the MITA Mission and Goals **Table B-3**). The MMM Vision Layer applies maturity model principles to these higher levels of state strategic planning for the Medicaid Program. The following tables describe in more detail the capabilities for each of the five (5) levels of maturity.

Table B-2. MMM for Medicaid Mission and Goals

MITA Maturity Model Vision Layer – Medicaid Mission and Goals					
Medicaid Goal	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
Medicaid Mission: To provide quality health care to members by providing access to the right services to the right people at the right time for the right cost.					
Improve health care outcomes for Medicaid Members	The SMA focuses on compliance with regulatory requirements for enrollment of providers and beneficiaries, and payment of claims within a specified timeframe to encourage the participation of providers and thereby promote access to care.	Improved health care outcomes are a by-product of new, creative programs primarily focused on managing costs, e.g., managed care and waiver programs.	There is widespread adoption and use of national standards for administrative data, and sharing of business services that provides a better base for comparing outcomes. Coordination and collaboration across intrastate health care programs contributes to improved outcomes.	All stakeholders have access to clinical data that produces a major leap forward in analysis of health care outcomes. The SMA empowers beneficiaries and providers to make decisions affecting outcomes.	National interoperability among state and federal agencies in the most comprehensive way we can envision at this time. Agencies now have access to necessary data to compare outcomes across a broad spectrum of other agencies and States.
Transformation of capability to measure health care outcomes	Limits measurement of outcomes to observations based on administrative data (claims) and surveys. Improved health care outcomes are a by-product of the level of participation of the providers and the SMA's ability to	Expert independent research contractors conduct evaluations of cost effective initiatives and include statistically sound reports on health care outcomes.	Use of national standards and shared business services, along with multi-program collaboration and use of intrastate information exchange provides access to health care outcome data.	Access to clinical data transforms the measurement of outcomes.	The SMA realizes economies of scale and focuses on strategic goals including improved health care outcomes within the state along with comparison to national standards.

MITA Maturity Model Vision Layer – Medicaid Mission and Goals					
Medicaid Goal	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
	perform oversight.				
Ensure efficient, effective, and economical management of the Medicaid Program	Automated application of rules meets statutory requirements for error rates in eligibility determinations, claims payments, and fee schedules.	Program evaluations show savings resulting from managed care and waiver initiatives, use of Web portal, increases in revenue collections from third-party liabilities and compliance incidents, and better decision making and program analysis using decision support tools.	The SMA is able to consolidate programs and processes and experiences economies of shared and reusable business services and standard data.	Access to and use of clinical data increases the efficiency and effectiveness of decision making. Decisions are rapid, consistent, appropriate, and rules-based.	The SMA realizes economies of scale and focuses on strategic goals such as effective management.

Table B-3. MMM for MITA Mission and Goals

MMM Vision Layer – MITA Mission and Goals					
MITA Goal	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
MITA Mission – Establish a national framework of enabling technologies and processes that support improved program administration for the Medicaid Enterprise.					
Develop seamless and integrated systems that effectively communicate to	Level 1 system is typically unable to exchange information with other systems, known as	Agencies begin to implement data exchange standards and establish trading partner agreements;	Agencies share business services and adopt use of industry accepted standards. Statewide	Agencies have seamless integration with clinical and administrative systems, health	The SMA is part of the NwHIN. Medicaid goals merge with national health care goals. Interoperability

MMM Vision Layer – MITA Mission and Goals					
MITA Goal	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
MITA Mission – Establish a national framework of enabling technologies and processes that support improved program administration for the Medicaid Enterprise.					
achieve common Medicaid goals through interoperability and common standards.	"information silo." There are no common standards or interoperability between systems.	however, there is no interoperability between systems.	data exchanges facilitate communications. Intrastate agencies coordinate and collaborate on common benefit plans and business services.	information exchanges, and electronic health record systems. This introduces a paradigm shift as providers, members, and payers gain access to clinical information for real-time decision making.	strengthens each SMA through the power of shared services.
Promote an environment that supports flexibility, adaptability, and rapid response to changes in programs and technologies.	Agencies meet mandatory changes but lack technical flexibility. Program changes are costly and time consuming to implement.	Agencies introduce elements of flexibility in program design and selection of technology driven by requirements to manage costs and implement new programs.	Agencies improve on flexibility and adaptability through implementation of shared and extensible business services, adoption of nationally accepted standards, and increased collaboration among intrastate agencies with the use of regional information exchanges.	Integration of clinical information calls for increased flexibility and adaptability between systems using electronic medical records and/or electronic health records. Immediate access to the clinical information speeds response time in critical business processes.	Agencies have full interoperability within the intrastate, interstate and federal agencies. Agencies can collaborate on response to changes and share solutions.
Promote an enterprise view of requirements and	Agencies do not have an enterprise view of their operations.	MITA framework encourages an enterprise view of	The SMA adopts an enterprise architecture that	The SMA enhances the enterprise architecture to	The state enterprise architecture includes national exchanges

MMM Vision Layer – MITA Mission and Goals					
MITA Goal	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
MITA Mission – Establish a national framework of enabling technologies and processes that support improved program administration for the Medicaid Enterprise.					
structure that supports enabling technologies that align with Medicaid business processes and technologies.	There is development of a business vision and process models with information models representing how the state envisions its Medicaid Program. The SMA has a strategic information technology plan.	SMA operations. The SMA adopts a business vision with supporting business, information and technological architectures that support operations.	describes the structure of the enterprise, subsystems, and relationships with internal and external entities. The SMA is utilizing MITA Framework, industry standards, and other nationally recognized standards for intrastate exchange of information.	include MITA Framework, industry standards, and other nationally recognized standards for interstate exchange of information.	with intrastate, interstate and federal entities using MITA Framework, industry standards, and other nationally recognized standards.
Provide data that is timely, accurate, usable, and easily accessible in order to support analysis and decision making for health care management and program administration.	The source of data is primarily the claim. Data is accessible via a request/response process that meets the current goals, but management experiences delays and inconsistencies in acquisition of data. Data is non-standard, and the SMA primarily uses it to manage operations.	Claim data and managed care encounter data are available. Decision support tools provide faster, better analysis, and improve decision-making. Health Insurance Portability and Accountability Act (HIPAA) mandates some data exchange standards for limited external	The SMA uses MITA Framework, industry standards, and other nationally recognized standards, such as the Council of Affordable Quality Healthcare (CAQH) Committee on Operating Rules for Information Exchange (CORE) Operating Rules for intrastate exchange of information. Intrastate information	The SMA uses MITA Framework, industry standards, and other nationally recognized standards for interstate exchange of information. Access to standardized clinical data through regional health information exchange using the Enterprise Master Patient Index (EMPI) greatly enhances the decision-making	Access to Master data management exchange on a national scale optimizes the decision-making capabilities of state, regional and federal agencies.

MMM Vision Layer – MITA Mission and Goals					
MITA Goal	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
MITA Mission – Establish a national framework of enabling technologies and processes that support improved program administration for the Medicaid Enterprise.					
		stakeholders, but few agencies use the standard data in their internal processes.	exchanges improve efficiency of access. This results in improvements in accessibility and accuracy of data used in program administration.	process. With clinical evidence, decisions can be consistent and decisive.	
Provide performance measurement for accountability and planning.	Accountability and planning activities use administrative, claims-based information. The SMA focus is on day-to-day operations. The SMA does not pay provider related to their performance.	The SMA focuses on cost containment and measures the success of its program initiatives, e.g., comparison of managed care and fee-for-service, evaluation of Diagnosis Related Group (DRG) payment systems, and comparison of Home and Community-Based services vs. cost of institutional care. Decision support tools improve accountability and planning.	With more information exchange standards in place and the ability to share business services, agencies make broader use of performance measurements. Information exchange hubs provide better support for accountability and planning; however, performance measurement continues to rely on administrative information.	With access to clinical information, the SMA implements true performance measurements and accountability. The SMA implements payment related to performance with patient satisfaction being part of the measurement.	Agencies engage in performance measurements for all providers and contractors based on performance information shared with other intrastate, interstate, and federal agencies.

MMM Vision Layer – MITA Mission and Goals					
MITA Goal	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
MITA Mission – Establish a national framework of enabling technologies and processes that support improved program administration for the Medicaid Enterprise.					
Coordinate with Public Health and other partners, and integrate health outcomes within the Medicaid community.	Medicaid agency respond to requests from other agencies for information based primarily on summaries of claims data. The SMA bases outcome studies on special research projects that extract clinical information from medical records (manually) or via surveys.	The SMA agrees to share information with sister agencies within the state. The SMA continues to base outcome analysis on claims/administrative information. Information exchanges typically use archival media and require data translation.	The SMA adopts nationally recognized information exchange standards for shared business services and enters into Service Level Agreements (SLA) for data sharing.	Clinical data is available to supplement administrative data. The SMA widely adopts national standards, and uses SLA for intrastate data sharing and uses an EMPI. Widespread use of Health Information Exchange (HIE) by intrastate agencies.	Interstate SLA allows regional and national interoperability by allowing Master data management exchange.
Provide a beneficiary-centric focus.	Focus is on payments to providers. Service to the beneficiary is a by-product of maintaining an adequate provider network.	Because of a focus on cost management, managed care and waiver programs, the SMA introduces and produces results that secondarily benefit the member. Members access benefit information via a portal or a help desk.	Applicants and members have direct access to information about program benefits, enrollment procedures, and personal health information. Intrastate agency cooperation increases sharing of information and establishes a single point of entry. The SMA increases beneficiary focus with	With the additional access to clinical information as well as statewide and regional data exchange, the member can participate in treatment choices; thus, a beneficiary/patient-centric Medicaid Enterprise exists.	Master data management exchange provides interoperability and national data exchange of information. An individual accesses beneficiary health information no matter where they reside. Providers access vital clinical information to coordinate care and respond quickly to

MMM Vision Layer – MITA Mission and Goals					
MITA Goal	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
MITA Mission – Establish a national framework of enabling technologies and processes that support improved program administration for the Medicaid Enterprise.					
			shared member business services and national data standards.		emergencies. This further strengthens the beneficiary-focus objective.

MITA Maturity Model Detailed Characteristics

As stated in the introduction, the MMM is a reference model defining parameters for the Medicaid Enterprise as it matures from one level to the next. In this section, MITA describes the core MMM at each of the five (5) levels. The MITA team offers a general description of each Level. Then, includes several categories of characteristics used to give more detail to the General Description. Together, the MITA team uses the General Description and the Characteristics to specify business capabilities for each business process at each maturity level.

This chapter presents the MMM and shows how to use it specifically in building business capabilities. Part II, Chapter 6, Information Capability Matrix, defines information capabilities and Part III, Chapter 7, Technical Capability Matrix, discusses technical capabilities.

Table B-4 below shows the MMM levels and characteristics. Level 1 of the MMM includes capabilities to demonstrate adherence to federal and state legislative mandates. Level 2 improves over Level 1 with the introduction of quality improvements and data access with the implementation of technology standards. Level 3 has high use of industry standards for data exchange, and the SMA is collaborating with intrastate agencies to improve health care coordination. Level 4 introduces the intrastate and interstate exchange of clinical information. Seamless coordination, real-time processing, and integration of state and federal agencies are the defining capability for Level 5.

Table B-4. MMM Description and Characteristics

MITA Maturity Model Description and Characteristics					
General Description	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
Brief description that captures essence of the Maturity Level; description is high level and covers all Business Areas	The SMA focuses on meeting compliance thresholds for state and federal regulations, aiming primarily at accurate enrollment of program eligibles and timely and accurate payment of claims for appropriate services.	The SMA focuses on cost management and improving the quality of and access to care within structures designed to manage costs (e.g., managed care, catastrophic care management, and disease management).	The SMA focuses on coordinating and collaborating with other agencies to adopt national standards, develop and share reusable processes to improve the cost effectiveness of health care service delivery. The SMA promotes intrastate information exchange and business services.	The SMA has widespread and secure access to clinical information. The SMA improves health care outcomes, empowers members and provider stakeholders, measures objectives quantitatively, and focuses on program improvement. The SMA promotes interstate information exchange and business services.	The SMA focuses on fine-tuning and optimizing program management, planning, and evaluation, with national (and international) interoperability improvements that maximize automation of routine operations.

Characteristics further detail the look and feel of a maturity level. The MITA team uses them as guidelines for defining business capabilities. Business capabilities describe a business process at a specific maturity level. Maturity level characteristics are measurable and usable in verifying that the SMA has achieved a certain business capability.

In the Business Capability Matrix (BCM), the processes represent the typical operations of the SMA. As the SMA matures, it transforms some processes and replaces others. Stakeholders develop new business processes for effectiveness and efficiency. **Table B-5** provides basic “rules of thumb” for defining business capabilities within each of the five (5) levels of maturity along with the

example performance measures. Each business process is unique and includes business capabilities statements specific to the business process.

Table B-6. MMM with Detailed Business Qualities

MITA Maturity Model Detailed Qualities					
Capability Question	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
Business Capability Descriptions: This section provides general background on the process to identify the differences between the levels of maturity.					
Is the process primarily manual or automated?	The process consists primarily of manual paper based activity to accomplish tasks.	The SMA uses a mix of manual and automated processes to accomplish tasks.	The SMA automates process to the fullest extent possible within the intrastate.	The SMA automates process to the fullest extent possible within the interstate.	The SMA automates process to the fullest extent possible across the nation.
Does the State Medicaid Agency use standards in the process?	The SMA focuses on meeting compliance thresholds for state and federal regulations using state-specific standards.	The SMA applies a mix of HIPAA and state-specific standards.	The SMA adopts MITA Framework, industry standards, and other nationally recognized standards for intrastate exchange of information.	The SMA adopts MITA Framework, industry standards, and other nationally recognized standards for clinical and interstate exchange of information.	The SMA adopts MITA Framework, industry standards, and other nationally recognized standards for national exchange of information.
How does the SMA collaborate with other agencies or entities in performing the	Very little collaboration occurs with other agencies to standardize information	The SMA collaborates with other agencies and entities to adopt HIPAA standards and Electronic Data	The SMA collaborates with other intrastate agencies and entities to adopt national standards,	The SMA collaborates with other interstate agencies and entities to adopt national standards,	The SMA collaborates with agencies and entities for national (and international) interoperability

MITA Maturity Model Detailed Qualities					
Capability Question	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
process?	exchange or business tasks.	Interchange (EDI) transactions.	and develop and share reusable business services.	and develop and share reusable processes including clinical information.	improvements that maximize automation of routine operations.
Business Capability Quality: Timeliness of Process					
How timely is the 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.	Timeliness improves via state and federal collaboration, use of information sharing, standards, and regional information exchange hubs. Timeliness exceeds Level 2.	Information is available in near real time. Processes that use clinical information result in immediate action, response, and results. The SMA has interstate interoperability, which further improves timeliness over Level 3.	Information is available in real time. Processes improve further through connectivity with other States and federal agencies. Most processes execute at the point of service. Results are almost immediate.
Business Capability Quality: Data Access and Accuracy					
How accurate is the information used in the process?	Use of direct data entry for information collection is manually intensive and susceptible to inconsistent or incorrect	HIPAA standard transactions improve accuracy of information but the decision-making process may be erroneous or misleading.	Automation of information collection increases the reliability of SMA internal information. External sources of	Automation of information collection increases the reliability of the SMA internal and external sources of information. The	The SMA adopts MITA Framework and industry standards for information exchange with national agencies. The SMA

MITA Maturity Model Detailed Qualities					
Capability Question	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
	information. Stakeholders are unable to rely on information for decision-making.	Accuracy is higher than at Level 1.	information use MITA Framework and industry standards for information exchange. SMA automates decision making based on intrastate standardized business rules definitions. Accuracy rating is at 99% or higher.	SMA adopts MITA Framework and industry standards for information exchange with interstate agencies. The SMA automates decision making based on regionally standardized business rules definitions. Accuracy rating is at 99% or higher.	automates decision making based on nationally standardized business rules definitions. Accuracy rating is at 99% or higher.
How accessible is the information used in the process?	The SMA stores information in disparate systems including paper storage and obtains information manually.	The SMA stores information in disparate systems, but automation and HIPAA standards increase accessibility over Level 1.	The SMA obtains information easily and exchanges with intrastate agencies and entities based on MITA Framework and industry standards. Accessibility is greater than Level 2.	The SMA obtains information easily and exchanges with interstate agencies and entities. Accessibility is greater than Level 3.	The SMA obtains information easily and exchanges with national agencies and entities. Accessibility is greater than Level 4.
Business Capability Quality: Cost-Effectiveness					
What is the cost of the process	High relative cost due to low number	Automation improves process	The SMA adopts MITA Framework,	The SMA adopts MITA Framework,	The SMA adopts MITA Framework,

MITA Maturity Model Detailed Qualities					
Capability Question	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
compared to the benefits of its results?	of automated, standardized tasks.	and allows focus on exception resolution, improving cost effectiveness ratio over Level 1.	industry standards, and other nationally recognized standards further improving cost effectiveness ratio over Level 2.	industry standards, and other nationally recognized standards for interstate information exchange. The SMA increases cost effectiveness ratio over Level 3.	industry standards, and other nationally recognized standards for national (and international) information exchange. The SMA increases cost effectiveness ratio over level 4.
Business Capability Quality: Effort to Perform; Efficiency					
How efficient is the process?	Process is labor intensive. The SMA wastes 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.	The SMA adopts MITA Framework, industry standards and information exchange with intrastate agencies and entities improving efficiency to 95% or higher.	The SMA adopts MITA Framework, industry standards and information exchange with interstate agencies and entities improving efficiency to 98% or higher.	The SMA adopts MITA Framework, industry standards and information exchange with national agencies and entities improving efficiency to 98% or higher.
Business Capability Quality: Accuracy of Process Results					
How accurate are the results of the process?	Manual processes produce a greater opportunity for	Automation and standardized business rules	The SMA adopts MITA Framework, standardized	The SMA adopts MITA Framework, standardized	The SMA adopts MITA Framework, standardized

MITA Maturity Model Detailed Qualities					
Capability Question	***Level 1***	***Level 2***	***Level 3***	***Level 4***	***Level 5***
	human error. Accuracy is low.	definitions reduce error and improve accuracy above Level 1.	business rules definitions, industry standards and information exchange with intrastate agencies and entities improving accuracy to 90% or higher.	business rules definitions, industry standards and information exchange with interstate agencies and entities improving accuracy to 98% or higher.	business rules definitions, industry standards and information exchange with national agencies and entities improving accuracy to 98% or higher.
Business Capability Quality: Utility or Value to Stakeholders					
How satisfied are the stakeholders?	Stakeholders lack confidence in information negatively affecting stakeholder satisfaction with the process.	Automation and standardized business rules definitions provides clear and useful information. Stakeholder satisfaction is greater than Level 1.	The SMA adopts MITA Framework, standardized business rules definitions, industry standards and information exchange with intrastate agencies and entities improving stakeholder satisfaction to 90% or higher. The SMA uses survey or questionnaire for information collection.	The SMA adopts MITA Framework, standardized business rules definitions, industry standards and information exchange with interstate agencies and entities improving stakeholder satisfaction to 95% or higher.	The SMA adopts MITA Framework, standardized business rules definitions, industry standards and information exchange with national agencies and entities improving stakeholder satisfaction to 98% or higher.