
Part I - BUSINESS ARCHITECTURE

PREFACE



Introduction

The Medicaid IT Architecture (MITA) Framework contains three interrelated architectures: Business Architecture (BA), Information Architecture (IA), and Technical Architecture (TA).

This preface summarizes the components of the BA. The BA provides the foundation for improvements in Medicaid Program operations that result in better outcomes for all stakeholders. The BA contains models of typical Medicaid business processes and describes how these processes will improve over time. States use the BA to assess their As-Is operations and determine the To-Be environment for improvement.

The MITA Framework adapts to technical, legislative, and policy changes that facilitate the transformation of the Medicaid Enterprise and support the vision of the future. Some external factors to the MITA Initiative that impact the evolution of the MITA Framework include:

- ❖ Health Insurance Portability & Accountability Act (HIPAA) of 1996
- ❖ International Classification of Diseases (ICD-10)
- ❖ Children's Health Insurance Program Reauthorization Act (CHIPRA) of 2009
- ❖ American Recovery and Reinvestment Act (ARRA) of 2009
- ❖ Health Information Technology for Economic and Clinical Health Act (HITECH) of 2009
- ❖ Plain Writing Act of 2010
- ❖ Patient Protection and Affordable Care Act of 2010
- ❖ President's Council of Advisors on Science and Technology (PCAST) Report on Health IT
- ❖ Medicaid Program; Federal Funding for Medicaid Eligibility Determination and Enrollment Activities
- ❖ Enhanced Funding Requirements: Seven Conditions and Standards (a.k.a. Seven Standards and Conditions)
- ❖ Guidance for Exchange and Medicaid Information Technology (IT) Systems (a.k.a. IT Guidance)

Chapter 1 Business Architecture Introduction

This chapter provides an overview of the components of the MITA BA. The BA is the starting point of the MITA Framework and supports a business-driven enterprise transformation that is common across all State Medicaid Enterprises. The BA represents the business goals of each individual state and presents a collective vision of the future.

The purpose of the Business Architecture is to:

- ❖ Establish a generic business framework for all States while recognizing their differences.

- ❖ Describe how each state Medicaid Program can mature over a given period with the help of stakeholders, leadership, enabling legislation, and technology.
- ❖ Provide a baseline for State Medicaid Agency (SMA) to use in assessing their current business capabilities and measure progress toward improved capabilities.

The BA focuses on the Medicaid Enterprise that includes all State Medicaid Enterprises. The MITA context defines Medicaid Enterprise 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, Centers for Medicare & Medicaid Services (CMS), and other federal agencies.
- ❖ The sphere of influence touched by MITA (e.g., national and federal initiatives such as the Nationwide Health Information Network [NwHIN]).

The BA acknowledges technology as one of several enablers that are important to growth and transformation but it does not introduce technical implementations or solutions into the BA components. All technical references are found in Part III, Technical Architecture.

Chapter 2 Concept of Operations

The Concept of Operations (COO) provides a framework for describing the As-Is operations and the To-Be environment. The SMA is familiar with As-Is and To-Be models as tools to describe current operations and future improvements. The MITA team chose the COO model as the best approach for communicating future capabilities and identifying transition plans for States that leverage technical solutions to improve their business operations. The focal point of the COO is to provide a collective vision of the future State Medicaid Enterprise.

The COO helps frame the vision and showcase the target To-Be environment. It does not describe the transformation pathway. As with any vision, short-term gains are more concrete than long-term achievements. The To-Be COO depends on enablers that are and will be available in the foreseeable future. The MITA Framework will adapt as these changes occur.

Chapter 3 Maturity Model

This chapter explains the maturity model used for MITA and both its role in the MITA Framework and its use by the MITA team, CMS, States, and vendors.

The MITA Maturity Model (MMM) serves as a reference model for establishing the definitions of business capabilities as described in Part I, Chapter 5, information capabilities as described in Part II, Chapter 6, and technical capabilities as described in Part III, Chapter 7. The MMM establishes boundaries and measures used to determine whether a business capability has a correct and sufficient definition.

The MMM applies to the State Medicaid Enterprise only. The Medicaid Enterprise encompasses all administrative services and interfaces to exchange information for operations for which CMS provides federal matching funds.

The SMA can choose to encourage their data exchange partners (e.g., providers, managed care organizations, benefit managers, other agencies, and other payers) to follow these guidelines.

Chapter 4 Business Process Model

This chapter focuses on communicating the structure of and rationale for the MITA Business Process Model (BPM) and the role of the BPM in the MITA Framework. The BPM is one of the key building blocks within the Framework. One of the MITA core concepts is that business needs and objectives inform and drive technical design.

MITA Framework delivers a baseline model and descriptions of eighty (80) business processes. Emphasis is on defining business processes for the SMA as they are now or As-Is. In the future or To-Be, the model expands to describe new business processes that come online as the business matures. Many business processes that the SMA engages in today will become obsolete in the future.

The MITA BA business process definition is the foundation for creating the IA Conceptual Data Model (CDM) and Logical Data Model (LDM). The BPM also provides critical information that the TA needs to develop and provide services.

Chapter 5 Business Capability Matrix

The Business Capability Matrix (BCM) describes the boundaries and behavior of each MITA business process in the context of the five (5) levels of the MMM as described in Part I, Chapter 3, MITA Maturity Model. The BCM is one of the principal building blocks of the MITA Framework. Business capabilities link to defining information standards (see Part II, Chapter 4, Data Standards) to enable technical capabilities, the principal drivers of business services (see Part III, Chapter 3, Business Services). It is important to see the BCM as the main link between the BA, IA, and TA. It is a MITA principle that an enterprise supports enabling technologies aligned with Medicaid business processes. States are to align to and advance increasingly in MITA maturity for business, architecture, and data.