

June 15, 2015

Centers for Medicare & Medicaid Services Department of Health and Human Services Attention: CMS-2392-P P.O. Box 8016 Baltimore, MD 21244-8016

The Center for Law and Social Policy (CLASP) appreciates the opportunity to comment on the proposed rule for Mechanized Claims Processing and Information Retrieval Systems (90/10). CLASP is a national, nonpartisan, anti-poverty organization advancing policy solutions that work for low-income people. We offer nearly 50 years of trusted expertise, a deeply knowledgeable staff, and a commitment to practical yet visionary approaches to opportunity for all.

We are writing to support the proposed rule to permanently extend enhanced federal financing of state Medicaid eligibility and enrollment systems. Comments are informed in part by the experience of six states (CO, ID, IL, NC, RI, SC) involved in the CLASP-led Work Support Strategies (WSS) initiative that supports states in streamlining, reforming, and integrating health and human service delivery. WSS states have demonstrated that modernizing state Medicaid eligibility and enrollment systems is critical to efficient service delivery, which is seriously hampered by inadequate and aging legacy systems, and to delivering the intended value for customers – an enrollment process that is straightforward, simple, timely, and accurate. As state health agencies strive to accurately and efficiently administer Medicaid, the proposed modification will ensure that states have access the resources to build and maintain eligibility and enrollment systems.

CLASP offers the following specific comments on the proposed rules for file code CMS-2392-P:

§ 433.112(c)(1) and §433.116(b)

CLASP strongly supports the proposed permanent extension of the 90/10 match rate for design, development, installation or enhancement of an eligibility and enrollment system for costs incurred after April 19, 2011. Providing states with 90% federal funds, on a permanent and ongoing basis, to update their eligibility and enrollment system is beneficial to states and enrollees. WSS states' experiences have shown that Medicaid officials need additional time to fully modernize their information technology systems, including seizing the opportunities to achieve efficiencies through human services integration and ensuring that technology reforms align appropriately with business processes and case management.

These Medicaid eligibility and enrollment system improvements have taken longer than originally anticipated, in part due to their complexity and also due to the age of the systems being updated with some states replacing 30 year old systems; as a result, many states will need time beyond 2015 to update their systems and achieve the ACA's intent of streamlined eligibility. Three WSS state are launching new integrated eligibility systems in multiple phases, a strategic decision to ensure successful technology reform by mitigating risk from initial system glitches and outages and ensuring adequate resources for end-user testing and training for staff. Allowing states to undertake this important work on an on-going basis rather than rushing it within a short timeframe will ultimately achieve updated and efficient eligibility and enrollment systems to replace outdated legacy systems.

CLASP supports the proposed permanent extension of a 75% match rate for on-going operations and maintenance of a Medicaid eligibility and enrollment system, so long as the system meets the requirements set forth in the proposed rule. We also encourages HHS to include as a requirement for enhanced federal funding the capability of the system to collect and submit key performance measures for eligibility and enrollment on a timely basis. Providing states with this enhanced matching rate for on-going operations and maintenance will help states keep their new systems operating as efficiently and effectively as possible as well as having to technical capacity to measure performance. A key lesson from WSS is that states need the flexibility and resources to modify technology as policy changes at the state and federal levels or as agencies update their local practices and business process.

§433.111 Definitions

Definition of Claims Processing and Information Retrieval Systems: CLASP strongly supports the inclusion of Medicaid eligibility and enrollment systems in the definition of mechanized claims processing and information retrieval systems. CLASP also supports specifically defining eligibility and enrollment systems to include applications, renewals, and updates from beneficiaries. Aligning the federal match rate (90/10) for eligibility and enrollment systems with that match rate for claims processing systems will ensure that all components of the Medicaid IT infrastructure can be updated as needed to operate efficiently as accurate eligibility determination is the step first in ensuring accuracy in claims processing. Additionally, having fully updated systems for eligibility and enrollment and claims processing is likely to create overall efficiencies and improve customer service for providers and enrollees.

§433.112 FFP for system development

• CLASP supports the additional requirements included in §433.112(b) for conditions an eligibility and enrollment system must meet in order to qualify for the enhanced federal match, especially those outlined in (b)(16). Requiring seamless coordination and integration with the Marketplace, the Federal Data Services Hub, and allowing interoperability with health information exchanges, public health agencies, human services programs, and community organizations providing outreach and enrollment services as applicable will maximize the benefit of a new Medicaid eligibility and enrollment system and support the vision of seamless program integration in the ACA. Five WSS states have or are building integrated eligibility systems for both health and human services programs taking advantage of the most cost-effective way to administer programs when there is significant overlap in eligibility between programs. Integrated eligibility system or interoperability between systems can ensure more efficient use of resources for programs with overlapping eligibility and aids in cross-program enrollment to ensure that low in-come people receive access to full package of benefits that are eligible for.