

Fiscal Year 2026 Operating Budget Administration - N00A01

Response to Department of Legislative Services Analysis

Senate Budget and Taxation Committee
Health and Human Services
Senator Cory McCray
February 13, 2025

House Appropriations Committee Health and Social Services Delegate Emily Shetty February 12, 2025

Honorable Chair and members of the Subcommittee, my name is Carnitra White, and I serve as the Principal Deputy Secretary of the Maryland Department of Human Services (DHS). On behalf of DHS, I thank Governor Moore, Lieutenant Governor Miller, the Department of Budget and Management (DBM), and the Budget Committees for their support. We are also grateful to the Department of Legislative Services Analyst Nathaly Andrade for her assistance leading up to today's hearing. Joining me at the table are Daniel Wait, Deputy Secretary for Talent and Customer Service, Patrick McLoughlin, Executive Director of MD THINK, and Acting Chief Financial Officer Jessica Smith. We have senior members of our leadership team, including directors of our local departments of social services, present in the audience as well.

We are honored to serve more than one million Marylanders to empower them and to unlock opportunities. We serve to ensure all can reach their full potential by helping with preventive and supportive services, economic assistance, and meaningful connections to employment development and career opportunities.

We acknowledge that we continue to face major challenges in our efforts to modernize DHS. We regularly discover deeply embedded issues across our teams, such as with fragmented data reporting approaches with manual or outdated processes. To meet these challenges, we continue to invest in our people, policies, and practices.

We will begin with a discussion of MD THINK, and a summary of work in our Administration, and then will discuss our responses to the DLS analysis.

MD THINK:

Originally envisioned as a finite program in 2015, MD THINK has evolved into a dynamic, enterprise-wide digital services platform aligned with modern technology best practices. While initial plans projected a four to five year implementation timeline, the platform's model and expanding scope have transformed it into a sustainable, long-term digital ecosystem. We highlight that as we move from the initial operational buildout ("Design, Development & Implementation") to system operations ("Maintenance & Operation"), the 'routine' operating costs will continue forward indefinitely. This situation is similar to the services that individual consumers pay for ongoing monthly Apple, Microsoft, or Google software subscriptions.

This evolution has been marked by continuous enhancement, increased collaboration, and broader agency participation. We've grown from serving just DHS applications to supporting multiple agencies - including Maryland Department of Health (MDH), Maryland Health Benefit Exchange (HBE), Maryland Department of Public Safety and Correctional Services (DPSCS), Maryland Department of Labor (MDL), and others - necessitating budget adjustments to accommodate new partnerships, system integrations, and agency requirements. We have been able to shut down legacy systems and transition those to the MD THINK platform three months after the statewide implementation of the Child Support Management System (CSMS) in September 2022.

At its core, MD THINK provides cloud-based Platform-as-a-Service (PaaS) capabilities, enabling organizations to build, test, host, operate, and integrate mission-driven applications, data, and emerging technologies. Over the past two years, we have:

- Conducted technical and business reviews to streamline processes and implement operation improvements;
- Significantly reduced the percentage of application bugs and defects;
- Expanded the platform's capabilities to support cross-organizational collaboration;
- Introduced automation to reduce the amount of manual work required; and
- Enhanced service delivery while optimizing costs.

Our approach to MD THINK allows for ongoing operational changes to meet the needs of users and customers across agencies.

Already, we are seeing successes on both fronts - optimizing costs while enhancing services delivery to meet evolving needs. For example, MD THINK worked with us to enable our successful SUN Bucks program in summer 2024, making possible

Maryland's largest investment in combating childhood hunger for 594,000 students. The unified benefits screener was developed and launched in partnership with MDH, and the Maryland Department of Information Technology (DoIT) led by MDTHINK. We've shifted to a human-centered design approach focused on customer experience, redesigning a number of applications, resulting in a significant increase in customer satisfaction.

We are also working to enhance capabilities of the applications and platform faster, to meet the requirements of not only our customers and State partners that utilize the platform, but also the Federal Government, who continue to fund approximately 60% of the MD THINK annual budget. These factors are the significant drivers in the increased budget request for FY26.

Our next phase focuses on separating application ownership from platform operations. Historically, all components were managed under the MD THINK name. As more agencies and programs joined the platform, the program scope and budget grew accordingly, but visibility into individual program contributions became less clear. This phase includes DHS applications, which individually are significant in both size, scope, and services, but when considered as a single entity becomes a monolith and impossible to distinguish.

We have heard that "MD THINK doesn't work" because it was not developed in partnership with the agencies' partners' needs. To address this, we are transitioning application ownership directly to the sponsor agencies. This agency-driven model empowers organizations to:

- Maintain control over their product direction:
- Build stronger internal technology capabilities;
- Drive innovation in service delivery;
- Improve responsiveness to customer needs; and
- Introduce distinct oversight and accountability.

While we have made substantial progress, challenges remain. Many applications were migrated to the platform prior to 2023 through a "lift and shift" approach, missing opportunities to optimize user experience through human-centered design principles. Since 2023, we continue to:

- Partner with agency Chief Information Officers to modernize their applications, prioritizing those with the greatest need and highest potential impact;
- Expand cross-agency collaboration initiatives;
- Continue optimizing operations and modernizing infrastructure; and
- Support agencies in enhancing their service delivery to customers.

The ongoing evolution includes operational changes to meet user needs, modifications related to legislative changes, optimization opportunities, increased collaboration, and expanded agency participation. As a result, what was originally projected as a four-to-five years initiative has transformed into a sustainable, long-term digital platform.

DHS Administration:

We will now turn to the other areas of the DHS Administration Budget. DHS Administration provides direction through four major budgetary units: Office of the Secretary; Operations Office; Office of Technology for Human Services (OTHS); and Local General Administration (LGA).

We want to highlight three key topics across these areas:

- *Vacancies*: We have continued to rebuild state government in a responsive and sustainable way. On January 1, 2023, we had a vacancy rate of 15.2%. By December 31, 2024, that rate was down to 7.97%, a decrease of 7.23%.
 - This agency-wide recruitment strategy was refined in 2024 to include innovative solutions such as on-the-spot conditional employment offers at job fairs, streamlining of recruitment processes, and building new pipelines of talent.
- Customer Experience Training: We developed and launched a new learning opportunity, Cultivating Connection: Mastering the Art of Customer Experience in Fall 2024. We are committed to building a customer service culture where Marylanders are treated with the respect and dignity they deserve, and where we deliver solution-focused results with a "changemaker" spirit.

As of January 2025, the Customer Experience training has been successfully piloted to nearly 900 team members who have been able to provide feedback that has been incorporated to deliver an outstanding learning product. We will manage course offerings to the entire DHS team with the goal of providing

the learning opportunity to all staff by the end of July 2025. This will be supplemented by more direct engagement of management staff with a focus on internal customer experience, employee engagement, performance management, and accountability to build retention.

• Customer Service Center: For the DHS Customer Service Center, which transitioned to a new vendor on August 1, 2024, we are continuing our work to build vendor performance both from a quantitative and qualitative lens, ensuring that service level agreements that call for 90% of calls to be answered within 30 seconds are met, and that the answers provided to customers are accurate.

While this represents significant progress, we know that we have more work to do: to truly modernize our approaches, to work with integrity, and to leave no one behind.

DHS Responses to DLS Analysis:

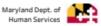
DHS should comment on the steps being taken to address these challenges [for children in out-of-home placement] and improve access to physical and mental health services for children in foster care. (pg. 6, DLS Analysis)

DHS Response: In fiscal year 2024 the CRBC only reviewed a small sample of cases, 693, of children that were in out-of-home placements. DHS monitors safety, permanency and well-being for all children in out-of-home care through headline indicators report; an example is shown below in **Exhibit 1**.

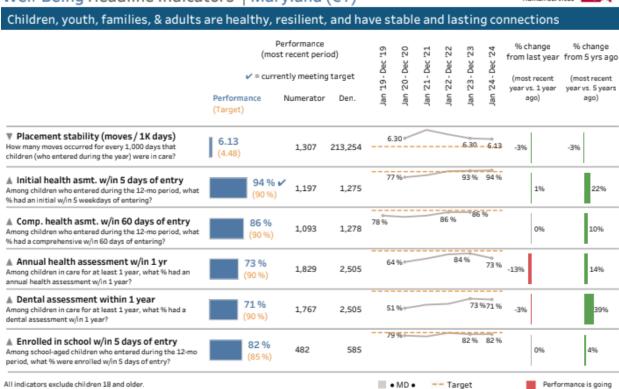
For calendar year 2024, 94% (target is 90%) of all children that entered out-of-home care received an initial health assessment within five days of entry and 86% (target is 90%) received a comprehensive health assessment within sixty days of entry. Each child in out-of-home care is required to receive an annual health assessment and annual dental assessment within one year of entering care and the target performance is 90%. In calendar year 2024, 73% of children received their annual health assessment within one year and 71% received their annual dental assessment within the one year timeframe.

Exhibit 1

Well-Being Headline Indicators | Maryland (CY)



in wrong direction



DHS has implemented several initiatives and partnerships to address and enhance physical and mental health provision for out-of-home youth placements, that include:

1. Monthly SSA Health Workgroup Meetings.

▲ A higher value is more desirable. ▼ A lower value is more desirable

- a. The monthly meetings include representation from Managed Care Organizations (MCO), Local Department Social Services (LDSS), Medical Assistance (MA) and the SSA Medical director and nurse consultant to address both administrative, logistics and other service provision issues. Through these meetings, there have been several successes:
 - i. DHS has worked with the Maryland Department of Health (MDH) Managed Care Office of Medical Benefits Management to address the initial step of entry into HealthChoice including assignment of MCO where communication of the new MA number and E-track code may be delayed for children already on MA.

- ii. Within DHS, SSA is working with the Family Investment Administration (FIA) to address communication of MA status to facilitate entry into the MCO by LDSS and the provision of the initial and comprehensive exam in a timely manner.
- iii. In coordination with MDH, transmittals have been sent to MA primary care providers and MCOs clarifying the health needs of children in out-of-home care and detailing reimbursement procedures.
- 2. SSA Audit Compliance Quality Improvement (ACQI) sessions. Sessions are held with counties that are not meeting the 90% compliance standard for obtaining health exams for children in foster care. These sessions allow collaboration between LDSS and SSA team members in clarifying providers that are available to provide health services and to troubleshoot other issues such as MA track assignment which may impede service delivery.
- 3. Statewide Advisory Task Force. DHS, in collaboration with MDH, convened a statewide advisory task force charged with developing guidelines for psychotropic medication use, developing evidence-based practices and training requirements for health care providers, caregivers, and child welfare professionals as well as quality assurance and monitoring metrics. Task force members included local health care providers, child welfare and human service experts, pediatric psychopharmacologists, leaders from local departments of social services, and other child behavioral health subject matter experts. The work of the task force concluded in December 2024 and the draft statewide guidelines on psychotropic medication use intended to promote the psychological well-being of children and youth in out-of-home care are being finalized.

There has been improved communication with Skygen, the MA dental Administrative Service Organization (ASO), which has led to improved compliance with dental exams.

DHS should comment on the use of the fiscal 2024 funds, including how much was spent for stipends or implementation activities [of the Human Services Careers Pilot Program]. Additionally, DHS should clarify whether stipends are funded in fiscal 2025 and 2026. If stipends are not funded in these years, DHS should explain how it plans to support these costs. (pg. 8, DLS Analysis)

DHS Response: DHS concentrated first on implementing the scholarship portion of the Human Service Careers Pilot Program. In order to implement the scholarships, we needed to adjust the original program during the 2024 Legislative Session, which

delayed implementation time frames for the internship program. As a result, the FY2024 funds were not spent; these funds have been encumbered, and we have begun program awards as of Fall 2024. More information can be found in our 2024 report here. Funds for the stipends are fully funded in the FY25 and FY26 budgets at \$50,000 per year.

DHS should discuss why the total funding for the [call center] contract described as supporting this contract in fiscal 2026 exceeds the amount that the department indicates is needed by more than \$20 million and any plans to realign funding for the contract to consolidate costs in one location to provide more transparency for overall funding levels and costs. (pg. 9, DLS Analysis)

DHS Response: The increase in the Office of Home Energy Programs (OHEP) budget of \$23 million is not for the call center contract; we inadvertently labeled a contract with the wrong title in our submission of our budget data. We will work with DBM to make this adjustment. This increase is to realign federal fund appropriation to spend the total available funding of federal Low-Income Home Energy Assistance Program (LIHEAP) grants.

In order to ensure more transparency on the overall funding levels and costs, we plan to consolidate the call center contract costs in one location in FY 2026.

DHS should comment on the implications for CJAMS following DJS' decision to discontinue its use. (pg. 15, DLS Analysis)

DHS Response: CJAMS is the state's Title IV-E eligibility system of record. Title IV-E, part of the Social Security Act, provides financial assistance for children in the care of the state, including both those in Foster Care and at DJS facilities. It is administered by the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services (HHS).

In order to minimize the need for manual federal claiming data entry and processing, we have asked that the system that DJS chooses to ultimately replace their legacy ASSIST system integrate directly with CJAMS to determine eligibility for Title IV-E federal funding for individuals under DJS' care. There may be additional, but currently indeterminate, MD THINK costs to perform any needed integration or software development work.

8

¹ Please see January 2, 2025 Report on Programs for Children in Out-of-Home Placement Standards for Staff and System for Outcomes Evaluation report, available here: https://dlslibrary.state.md.us/publications/Exec/DHS/HU8-1004%28g%29_2024.pdf

DHS should comment on how certification [of CSMS and E&E] is being conducted, why certification is still pending despite these systems being in use for several years, and provide an update on whether certification was received. Additionally, DHS should clarify whether CJAMS has already received certification. (pg. 15, DLS Analysis)

DHS Response:

Eligibility & Enrollment (E&E)

The E&E system went live statewide in November 2021. Of the two certifications required, one is complete, the second is in process.

U.S. Department of Agriculture, Food and Nutrition Service (FNS) Certification: Several deliverables regarding the E&E system were prepared and submitted to FNS in areas, such as training, pilot strategy, contingency plan, outstanding defects, data conversion, interfaces, escalation plan, notices and reports. After reviewing the deliverables, the FNS conducted their assessment of the functionality related to SNAP during the pilot phase of the system rollout in September 2020 and found the systems in compliance with the FNS requirement in March 2021.

U.S. Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) Certification: An Operational Readiness Review (ORR) was performed by CMS in 2020 before the system went live. This review met the CMS requirements for the system to become operational. As part of the CMS certification process, the E&E system's performance was evaluated across various metrics (e.g., application counts, supporting document counts, timeline/correctness of eligibility determination, notices counts), along with system compliance measures such as disaster recovery, 508 compliance and security checks. During the ORR assessment, two Corrective Action Plans (CAP) were identified - (a) ExParte renewals and (b) No Wrong Door functionality between MAGI and Non-MAGI, and they were subsequently completed & implemented in September 2022.

In June 2024, CMS contacted the state to acknowledge that the CAP was completed successfully and that they needed to certify this new E&E system (please see **Appendix B**). MDH and DHS met with CMS in August and September 2024 to kickoff the certification process, discuss the process and clarify the data and metrics that would be required for the final Certification Review. MDH has submitted the required metrics to CMS; DHS and MDH are awaiting final questions from CMS and scheduling of required demonstrations as part of the final Certification Review. We anticipate completing this final certification review within the next six months but cannot say for certain given the current communication outage.

<u>Child Support Management System (CSMS)</u>

CSMS went live statewide in September 2022. Prior to the certification process the 3rd party Independent Verification & Validation (IV&V) vendor contracted by the state gathered pre-certification documents using system test results to demonstrate compliance with the OCSS "Automated Systems for Child Support Enforcement: A Guide for States updated 2017" objectives. This pre-certification was completed by the IV&V vendor in May 2024 and submitted to OCSS. The contract with the IV&V vendor ended in May 2024. This statewide IV&V contract has been recompeted and we are currently awaiting approval from ACF to solicit a new IV&V vendor for this process.

The certification of Child Support systems is a two-phase process. The first phase involves a functional review by OCSS of all requirements outlined in their certification guide. During the pre-certification, 25 non-compliant functions out of over 1,100 in the certification guide were identified and must be addressed prior to the start of certification. We are prioritizing multiple system fixes identified during the pre-certification process. Once IV&V is in place, a formal request will be submitted to begin the certification process.

The second phase of the certification involves on-site visits by OCSS to local offices to observe system functionality in a live operational environment. Additionally, OCSS officials will visit other key locations involved in system operations, including the State Disbursement Unit and state circuit courts.

Child, Juvenile, and Adult Management System (CJAMS)

CJAMS went live statewide in July 2020. In April 2023, the Administration for Children and Families (ACF) conducted a Technical Assessment/ Monitoring Review of the CJAMS system, excluding the Juvenile module. This review evaluated the system's architecture, security, functionality, and operations for compliance with Section I: 1355.52 and 1355.53 of the ACF Comprehensive Child Welfare Information System (CCWIS) Requirements. The system was found to be in substantial compliance with CCWIS requirements in November 2023. As a result, no performance improvement plan was required. ACF provided some recommendations for improvements, most of which have already been implemented. Three remaining recommendations are currently outstanding and are being addressed by the technical team alongside other SSA priorities.

DHS should comment on how much of the \$157.6 million in the fiscal 2026 allowance is for operations and maintenance and how much is for enhancements to the system. In light of the State's fiscal outlook, DHS should describe why each planned enhancement is essential for fiscal 2026. (pg. 16, DLS Analysis)

DHS Response: Of the \$157.6 million in the fiscal 2026 allowance, \$125 million is specific DHS work, while the remaining \$32 million is work that is reimbursed by partner agencies using the platform (MDH, MHBE, DPSCS). For the DHS work, we anticipate the following breakdown of work to be 46.83% for design development, and implementation (DDI) and 53.17% for maintenance and operations (M&O). This breakdown does not include the reimbursable work external to DHS agencies. Of this DHS work, approximately 60% is federally funded based on a reimbursable match basis. Removal of general funds will have a greater than 1:1 impact on drawing down federal funds for this work.

MD THINK has significant operational changes to meet user needs planned for FY26. These enhancements are being implemented to meet regulatory and compliance requirements (federal, state), new feature functionality requested by DHS' administrations and customers, increased integration with partner programs for more efficient delivery of services and continued improvements to issues with current capabilities of the applications. The following provides a high-level summary of the changes, with the entirety of the changes and program impacts listed in detail in **Appendix A**.

Failure to complete these planned changes will:

- 1. Lead to Maryland's non-compliance with federal requirements, and put in jeopardy our federal funding; and
- 2. Delay needed work to FY2027 or beyond, which will penalize Marylanders seeking the benefits they are entitled to.

(E&E)

E&E serves as the official state system of record for eligibility and enrollment for Temporary Assistance for Needy Families (TANF) and determines medical assistance eligibility under Title IV-A and TItle XIX of the Social Security Act. This system processes applications for multiple benefit programs, including Temporary Cash Assistance (TCA), Supplemental Nutrition Assistance Programs (SNAP), Refugees and Asylees Assistance, and more. Eligibility workers use E&E to process applications through automated decision-making tools that determine benefit eligibility and issue benefits in accordance with federal regulations. The integrated platform

provides workers with a centralized workspace to efficiently manage cases, track outcomes, and collaborate on complex cases through workflow management tools. This approach ensures accurate benefit determination, reduces processing time, and maintains compliance with federal and state requirements while enabling workers to service customers more effectively. E&E issues approximately \$20 million in cash assistance to approximately 30,000 families and \$120 million in SNAP benefits to approximately 320,000 families on a monthly basis.

Changes to E&E are crucial to effectively provide benefits to Marylanders and meet the evolving federal and state requirements. The changes included in FY26 streamline access to essential benefits through an improved consumer portal, while ensuring compliance with new regulations through automated system updates. By enhancing data exchanges between federal and state systems, we reduce manual processing, minimize errors, and accelerate benefit determinations. The enhancements will create a more efficient workflow for caseworkers managing cash assistance, SNAP benefits, MD SUN Bucks, and Medicaid, while the medical expense and spend-down redesign will improve accuracy in benefit calculations.

Integration of provider management, appeals processing, and energy assistance (OHEP) into a single, cohesive system within E&E reduces administrative burden, enhances program integrity, and provides a more seamless experience for both customers and workers/staff. These improvements will ultimately lead to faster service delivery, reduced processing times, and better outcomes for Marylanders who rely on these critical programs. All changes planned for FY26 are found in appendix A and detail the impact on Marylanders or the regulatory and compliance requirements.

CJAMS

CJAMS is the official state system of record required by the federal government for child welfare and adult services in the state of Maryland under Title IV-E of the Social Security Act. This system is used to track all reports of abuse and neglect, provide case management services for all child protection and adult protection investigations, in-home/family preservation services, out-of-home care services, adoption and guardianship services, as well as, all programming provided by the Office of Adult Services.

The changes required for CJAMS are essential for data-driven decision making and service delivery to improve the outcomes of the families and youth served. The changes are necessary to address many of the issues in the three class action suits that have been filed against DHS, one of which is 40 years old. The improvements to CJAMS will ensure compliance with legislative and regulatory requirements, as well as, address many of the challenges which have caused inaccuracies in data collection

and reporting, enhance the overall quality assurance and continuous quality improvement, and ensure better service delivery to vulnerable children and adults so that no Marylander is left behind.

CSMS

CSMS is the official system of record mandated for operation of the State Child Support program under Title IV-D of the Social Security Act. This system is used to establish, track and enforce court orders for child support obligations for non-custodial parents to ensure financial stability for children. The system manages interstate cases across the United States, as well as international cases around the world. CSMS is also the system that maintains records, manages collections and distributions of payments from the non-custodial parent (NCP) to the custodial parent (CP). The system is capable of applying enforcement to parties for non compliance of payment, sending reminders and notices, as well as connecting with multiple third-party providers and vendors for data exchange and services. For the State Fiscal Year 2024, the Child Support Administration used CSMS to support 184,365 families, collecting \$482.71M in payments from non-custodial parents. In the same year, they issued \$486.67M in payments to custodial parents for support.

The changes included in FY26 for CSMS, detailed in Appendix A, are critical for enhancing service delivery through automated processes and improved data accuracy; improving collections and preventing cases/accounts from falling into arrears and staying current; streamlining intake and registration processes to expedite service delivery; ensuring data integrity across integrated systems; and strengthening the program integrity and accuracy. The addition of mobile application capabilities will provide customers and staff with secure, on-the-go access to essential services and information. These improvements will significantly reduce manual processing, minimize errors, ensure compliance with regulatory requirements, and ultimately deliver a more efficient and responsive service to all parties.

Shared Platform

The shared platform consists of the teams that manage the core cloud infrastructure, shared services, agile governance, cybersecurity, and data support for MD THINK across the entire platform. Significant enhancements are required in FY26 to ensure efficient operation, security, and scalability of MD THINK systems. Support of the Project Management Office (PMO), who are responsible for MD THINK's agile governance process, federal reporting, risk management, and resource allocation while providing clear roadmaps for future product enhancements.

With additional changes to our master data management (MDM) platform and enterprise search capabilities, we can deliver a more comprehensive 360-view of

customer information across all programs on the MD THINK platform, leading to better decision making, data accuracy, and service delivery. The introduction of automated processes will streamline operations, enhance system availability, and generate significant cost savings through reduced manual intervention. Critical improvements to our cloud infrastructure, including enhanced disaster recovery and cybersecurity measures, will safeguard sensitive data while ensuring continuous system availability. The changes will expand our integration capabilities with partner agencies that coordinate with DHS programs, creating a more connected and responsive government. These enhancements will not only ensure compliance with federal and state requirements, but also continue to establish a foundation for future growth, innovation, and improved services - while reducing operational risks and costs.

Finally, Shared Platform also includes the new state program "Unified Benefits" which is a simplified and consolidated process for identifying eligibility to multiple benefits (Medicaid, SNAP, Cash, Energy Assistance, Emergency Assistance, and WIC) and introduces a single or common application for customers to submit. These changes for FY26 are included in Appendix A.

DHS should discuss the cause of the discrepancy in reported spending and the reason that the fiscal 2026 allowance includes such a significantly higher level of funding than DHS reported has been spent in recent years. (pg. 18, DLS Analysis)

DHS Response: The analysis reflects the three major applications (E&E, CJAMS, and CSMS), but excludes the overall program costs included in the budget request. These costs encompass the shared platform, the new Unified Benefits program (which consolidates the eligibility and application process for Medicaid, SNAP, Cash, Energy Assistance, Emergency Assistance, and WIC) - AWS cloud hosting expenses to support all platform customers, and software costs (approximately \$60 million). Additionally, reimbursable costs for partner agencies for cloud hosting and services are not included in the analysis (approximately \$32 million).

DHS should discuss the steps being taken to address functionality gaps in deployed components and the challenges encountered during implementation.

DHS Response: All applications on the MD THINK platform are currently in production and used daily to support over 2 million Marylanders. In 2023, MD THINK began following a product development model for each application, encompassing concept development, design, prototyping, and testing to drive application enhancements.

This process is executed through Agile development, enabling continuous iteration and improvement of systems and applications. Functionality gaps may represent new capabilities desired by customers, identified through field testing, or arising from new requirements or compliance needs. A gap may also occur when a feature is designed and delivered as expected, but ultimately fails to achieve its intended purpose, requiring modification. These issues are often discovered during user acceptance testing, but, in some cases, may not emerge until full deployment to a broader audience.

Each application has a roadmap outlining planned functionality enhancements and associated timelines. As new needs or gaps are identified, they are incorporated into the roadmap and prioritized in collaboration with the three administrations they support. Since introducing this process, each application has seen a significant reduction in functionality gaps.

Given the significant investment and ongoing challenges related to the MD THINK platform, including the increase in costs, delays in implementation, and the need for continued system enhancements, DLS recommends adopting committee narrative requesting DHS to submit a report on the costs, implementation progress, and long-term sustainability of MD THINK. (pg. 19, DLS Analysis)

DHS Response: We concur, and will provide this report. We request a due date of December 1, 2025, in order to ensure that we have accurate reporting and align with federal reporting.

DHS should discuss:

- The steps that it is taking to ensure data reporting throughout the department is accurate and timely including any internal audits of existing data that have been conducted or are underway;
- 2. The timetable for resolving data issues;
- 3. The impact data integrity issues will have on the on the ability of the new office to produce reliable internal and public facing data; and
- 4. The cost of the new office. (DLS Analysis, pg. 21)

DHS Response:

 Over the last year, we have renewed our focus on ensuring that any public-facing data is consistent, validated, and comprehensive. In our data review, spanning our approaches to individual case records, fiscal and statistical data, and our systems, we found that we had inherited antiquated and manual data creation or reporting processes that we did not have confidence in. As we uncovered such challenges, we immediately began to rebuild our approaches to reporting out our data. Addressing these unexpected data-related challenges while preparing reports or summary statistical analyses can take our team extra time, which can therefore lead to a delayed submission.

We have prioritized improving the integrity of the data and validation practices we inherited. As a result, we developed a Data Office. This office is designed to modernize the agency's data collection and public reporting across its various programs and divisions. We brought in new leadership across all of our Administrations, and hired key program staff that will allow us to consistently and accurately prepare reports for publication.

DHS has made a concerted effort to ensure our data reporting to the Maryland General Assembly has our confidence and reflects our high standards of integrity.

- 2. Like our work on MD THINK, we have focused on restoring data integrity and validating all of our data since January 2023. Our work in 2024 laid the foundation for continuing work in the future, including basic training on data standardization across all local jurisdictions. We believe that our data integrity efforts in 2025 will ensure that our data can be made public via data dashboards so that it can be reviewed and further improved upon.
- 3. The DHS Data Office is making steady progress in identifying and resolving various system-level and person-level issues that compromise DHS data integrity. Our goal is to complete several high traffic reports across the three administrations to ensure continuous operations with high quality data. Special efforts are being made to consolidate existing reports from the same functional area to reduce the risk of multiple sources and multiple estimates.
- 4. DHS has implemented the Data Office with the existing administration budget. We will officially adjust the budget and subprogram depicting the Data Office during the submission of the FY 2027 budget request.

DHS should discuss any identified sources to address this deficit [of the \$100.2M in nonbudgeted clearing account] or if general funds will be required and the efforts that it has undertaken to monitor clearing accounts moving forward. (pg. 22, DLS Analysis)

DHS Response: We anticipate that reconciliation will be fully complete by FY2025 closeout. We will review the FY2024 year-end non-budgeted clearing account and will process any journal entries to eliminate the deficits. As stated in the FY2024 close out review, the system reports depict a positive net balance that will offset the negative balance.

The Comptroller's General Accounting Division (GAD) confirmed the availability of unallocated special funds from the FY2024 close out. The expenditures will be reported against these unallocated special funds balances. As a result, general funds should not be needed to resolve.

As next steps, we will partner with DBM to review the FY 2024 non-budgeted clearing accounts. In FY2025, clearing accounts are being closely monitored to ensure proper reconciliation of the expenditures posted.

Response to DLS Recommended Actions

Report on the Costs, Implementation Progress, and Long-term Sustainability of the Maryland Total Human-services Integrated Network (MD THINK) [due September 1, 2025] (pg. 23, DLS Analysis)

DHS Response: We concur, and will provide this report. We request a due date of December 1, 2025, in order to ensure that we have accurate reporting and align with federal reporting.

Appendix A - MD THINK Planned Changes in FY2026 (Updated February 7, 2025)

E&E

#	Planned Changes	Impact
1	myMDTHINK Consumer Portal Changes	Enable 1.4M+ Marylanders that use myMDTHINK portal to apply, track and manage benefits online to improve access to services as well as to comply with Executive order <u>01.01.2024.25</u> (Maryland Plain Language Initiative). The enhancements will help with providing access to benefits to children and families in a timely manner and reduce the manual workload. This impact will be achieved by:
		 Redesigning the content and portal navigation to comply with the Maryland plain language and accessibility initiative Allowing customers, SNAP Partners, and community-based organizations to schedule and manage appointments online. These improvements will allow reminders to be sent via text, email, or through the myMDTHINK portal. Encourages customer self-service by use of electronic submissions of documents, applications, appointment scheduling, etc, where the system can perform automated actions reducing manual workload for staff staff.
2	Implementation of Federal and state regulatory and/or legislative-related system changes. Any additional legislative or regulatory changes that occur throughout FFY25-26 will be incorporated into the MD THINK roadmap and implemented according to requirements. Examples include but are not limited to, changing system parameters to	Due to sunsetted (e)(14)A waiver authorities, Maryland opted to pursue renewals for Individuals based on SNAP Eligibility (MAGI) and for Children based on SNAP Eligibility (Non-MAGI) after the unwinding of the Public Health Emergency. Using SNAP data to renew Medicaid eligibility where possible reduces effort for participants and improves continuity of health care. CMS has encouraged states to leverage certain processes used during the Public Health Emergency by authorizing their continued use. New federal requirements for streamlining eligibility determinations and redeterminations are effective in FY 2026 (Department of Health and

allow an increase in federal benefits and Human Services. Centers for Medicare & Medicaid Services 42 CFR Parts expense deductions, documenting a 431, 435, 436, 447, 457, and 60) and affect many processes for non-MAGI request for reasonable accommodations (as Medicaid recipients at annual renewal and when their circumstances mandated by the Civil Rights change. A subset of the streamlining changes are aimed at improving access for low-income disabled and retired persons to Medicaid payment Administration), or generating notifications to customers that qualify for medical of Medicare premiums and cost sharing. reimbursement for medical deductibles. Enhancements to meet legislative requirements under Health General Modifications required by Federal or State 19-214.4 which provides requirements for Medical Reimbursement to law, regulations, statues or policy changes. customers by hospitals. Mass modifications are automated actions by the E&E system reducing manual workload. Reasonable Accommodation is mandated by the Civil Rights Administration. Medical Reimbursement is a MD Legislative project requiring hospitals to reimburse customers. Enhance the integration of federal and state The federal government requires integration of federal and state electronic data exchanges and matching electronic data exchanges and matching services for SNAP. This is to services prevent individuals from receiving SNAP benefits in multiple states simultaneously. These services will enable case managers to assist customers applying for various benefit Recent automation in E&E has improved the effectiveness of the public programs by obtaining verification of assistance reporting information system (PARIS) matching used to income, citizenship, child support, death prevent duplicate Medicaid enrollment across states. matches, automation of State Data Exchange (SDX), including Auto-Disabled The 2018 Farm Bill mandated the creation of the National Accuracy Clearinghouse (NAC). This is a federal system where states must report Adult Children, Disabled Widow(er), State On-line Query Internet (SOLQ-i), and other SNAP recipient information to identify individuals receiving benefits in available electronic data services available to more than one state. DHS. Enhancing the integration of federal and state electronic data exchanges Integrate the data from the and matching services is important for several reasons, primarily related

interfaces/exchanges into the customer's case record to reduce manual workload thus reducing manual data entry work (less key strokes), improving data integrity, increase in timely processing of customer's cases. Improve compliance and accuracy of customer benefits. Automate certain exchanges to reduce manual workload.

to efficiency, accuracy, and improved service delivery which align with the Mooore-Miller values:

- Improved Efficiency: Streamlining data exchange reduces redundant data entry and manual processes. This saves time and resources for both federal and state agencies, allowing staff to focus on other critical tasks. It also speeds up processing times for individuals applying for or receiving benefits.
- Increased Accuracy: Automated data matching reduces the risk of human error associated with manual data entry and verification. This leads to more accurate eligibility determinations for benefits and reduces the potential for fraud or improper payments.
- Better Service Delivery: Integrated systems allow the Local Department of Social Services to have a more complete and up-to-date view of an individual's circumstances. This enables state staff to provide more personalized and effective services. For example, it can help identify individuals who are eligible for multiple programs and ensure they receive the full range of benefits they qualify for.
- Reduced Fraud and Abuse: Enhanced data matching can help identify discrepancies and inconsistencies in information provided by individuals, making it more difficult to commit fraud or receive benefits they are not entitled to. This protects taxpayer dollars and ensures that resources are directed to those who truly need them.
- Improved Program Integrity: By ensuring accurate eligibility determinations and reducing fraud, integrated data exchanges strengthen the integrity of federal and state programs. This helps maintain public trust in these programs and ensures their long-term sustainability.

Data-Driven Decision Making: Integrated data provides valuable insights into program performance and the needs of the populations served. This information can be used to make data-driven decisions about program design and resource allocation, leading to more effective and impactful programs.

Overall, better integration of electronic data exchanges and matching services leads to more efficient, accurate, and effective government programs, ultimately benefiting both the agencies administering the programs and the individuals we serve. The resulting efficiencies reduce the costs associated with manual intervention to address missing or overpayments of benefits.

4 Streamlining worker business processes

This initiative aims to increase the user-friendliness of the MD THINK platform for end-users, as well as caseworkers. Streamlining will extend to: identifying tasks for statewide distribution (SPM), enhancing the claims calculation process for over and underpayments within the eligibility system, reducing duplicative or manual processes/handoffs, improving the sanction and Intentional Program Violations (IPV) disqualification processes, decreasing manual entry, and automating specific actions.

Automatic distribution of work items within the assigned regions across the state. System re-design to streamline the capture of IPV disqualifications.

- Automated Task Distribution (SPM): This automatic distribution across jurisdictions successfully ensured a more efficient and equitable distribution of over 11K Interim Changes and 49K Maryland Benefit Reviews since September 17, 2024. The distribution is strictly based on staff resource levels and is not limited by location.
- Timeliness of Processing: The United States Department of Agriculture, Food and Nutrition Services has a 95% Application Processing Timeliness (APT) benchmark. This requires 95% of applications received to be addressed timely. Streamlining of the business process has assisted the state as we increased APT from 86.31% in October 2023 to 97.18% in September 2024 (state calculated). The goal is to sustain this improvement.
- Increased Accuracy: Automation and streamlined processes reduce the potential for human error, leading to more accurate calculations and data management.
- Cost Savings: Potential cost savings through reduced manual labor, improved efficiency, and decreased errors.
- Faster Benefit Delivery: Streamlined processing leads to quicker

Automatic distribution of workload across all jurisdictions to maximize worker availability to process case actions for Marylanders. Improves customer service, increases timeliness of processing work and compliancy.

access to benefits Improved customer service..

- Reduced Errors: Reduce worker error rate by a minimum of 6%
- Decrease processing time by Case Managers by 36%
- Reduce the disparity between an average caseload ratio of 303 per Case Manager and 1,176 per Case Manager by equalizing the distribution.
- Enhanced Claims Calculation: The improvements to over/underpayment calculations within the eligibility system, are mandatory for accuracy and efficiency in recouping funds owed to the State or the customer.

5 Cash program changes

This initiative will improve business process workflows, as well as resolve any gaps or defects between policy and system design, to ensure that benefits are accurate and issued promptly. It will also enhance the way Emergency Assistance is processed in the system, cascading from one Cash program to another when warranted. Furthermore, the Family Investment Plan will be integrated into the eligibility system, allowing plans to be stored, printed, shared, archived, and used as criteria for Cash eligibility. The platform page designs for data entry by workers and eligibility result pages will be upgraded for useability.

Enhance the system to ensure the system rules are aligned with the Cash policy, regulations, laws and statutes. Improves

Our current manual processes require extensive staff hours and create opportunities for errors that lead to improper payments and inefficiencies. By implementing automated workflows and enhanced eligibility verification, we can significantly reduce processing time, staff overtime, and error-related costs

These changes are not optional improvements but necessary investments to meet federal compliance requirements including the OCR Voluntary Resolution Agreement mandates. Without these updates, we risk federal penalties and potential legal costs from civil rights violations. The system must also be upgraded to meet legislative reporting requirements stemming from the comprehensive TCA evaluation, ensuring we maintain compliance with state oversight mandates.

From a fiscal perspective, these changes represent a strategic investment that will yield measurable returns. The integration of the Family Investment Plan into the eligibility system will eliminate costly paper storage and manual filing processes. Enhanced Emergency Assistance processing will prevent duplicate data entry across programs, reducing administrative burden and associated labor costs. The streamlined notice generation system will decrease mailing and manual processing

accuracy of customers benefits, streamlines the worker's business process workflow improving processing timeliness and compliancy. Automated certain tasks to reduce manual workload, improve customer service and compliance. expenses, while improved eligibility verification will prevent improper payments.

Delaying these changes would result in higher long-term costs through continued inefficiencies, potential compliance penalties, and missed opportunities for process automation. In the current fiscal environment, these investments are crucial for achieving the cost savings and operational efficiencies needed to maintain effective service delivery while managing budget constraints.

6 SNAP program changes

This initiative will improve business process workflows and resolve any open gaps or defects between policy and system design to ensure that benefits are accurate and issued timely. It will also revert the system to a 30-day denial state by automating denials at day 30 if the application is not adjudicated (in keeping with policy and federal regulations). It will also modify the Maryland Benefit Review form to support automated actions by the system, as well as improve the page designs for data entry and eligibility result pages.

Enhance the system to ensure the system rules are aligned with the SNAP policy, regulations, laws and statutes. Improves accuracy of customers benefits, streamlines the worker's business process workflow improving processing timeliness and compliancy. Reduction in Quality Control Error Rate. Automated certain tasks to

Our current workflow processes require extensive staff hours and create opportunities for errors that lead to improper payments and inefficiencies. There are gaps and defects in the system that are significantly impacting benefit accuracy and timeliness.

These changes are not optional improvements but necessary investments to meet federal SNAP compliance requirements. By implementing automated workflows and enhanced eligibility verification, we can significantly reduce processing time, staff overtime, and error-related costs. Aligning policy with system logic and rules will assist with case accuracy and correct case processing and benefit issuance. System enhancements and improvements must be made to meet legislative policy and reporting requirements stemming from management evaluation and audit findings.

From a fiscal perspective, these changes represent a strategic investment that will yield measurable returns. System enhancements will cut down on errors and reduce administrative burden and associated labor costs.

Delaying these changes would result in higher long-term costs through

	reduce manual workload, improve customer service and compliance.	continued inefficiencies and potential compliance penalties. In the current fiscal environment, these investments are crucial for achieving the cost savings and operational efficiencies needed to maintain effective service delivery while managing budget constraints.
7	Maryland will make continuous improvements to the Maryland SUN Bucks program for the Summer of 2025, including creating sampling procedures and processes in E&E to meet the Food and Nutrition Service (FNS) requirements; adding customer service-friendly options; as well as utilizing direct certification and FARMS eligibility files from our sister agencies to issue SUN Bucks to eligible children for the upcoming operational period. Updates will also apply and enhance the rules for automating determinations and provide parents or guardians with the ability to view their eligibility within the consumer portal and/or opt out of the SUN Bucks program. Changes required to meet federal regulations for SUN Bucks. Customer Self Service options and improvement in MyMDTHINK consumer portal. Continue with Automated Actions by the system	MD SUN Bucks is a newly established program that needs system enhancements and improvements to meet federal guidelines and reporting requirements. These changes will allow customers to more easily access account information and self-serve through the consumer portal. These changes will allow for cleaner data sharing, reduction of manual workload and reduce delays in case processing. Delaying these changes would result in higher long-term costs through continued inefficiencies and potential compliance penalties. In the current fiscal environment, these investments are crucial for achieving the cost savings and operational efficiencies needed to maintain effective service delivery while managing budget constraints.

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	reducing manual workload and delays in processing SUN Bucks cases and changes.	
8	This initiative will modify how medical expense data is collected and tracked for Medicaid Spend-down programs, as well as for SNAP-eligible households. The goal is to make a more efficient and effective business process for the end users. This process will improve how eligibility for Medicaid spend-down is calculated, ensuring that customers receive the maximum spend-down eligibility segment; creating a way to track when a medical bill was applied or partially applied to spend-down calculations; modifying rules to determine if a submitted medical bill is eligible to be counted towards spend down based upon policy rules; modifying the categorization of medical expenses (list of values); and improving file transfer to MMIS (to include medical expenses used to calculate spend-down costs paid out of pocket by consumers during a given eligibility span). System redesign to align with Medicaid policy, regulations, laws and statutes. Ensures customers eligibility for medical expenses under SNAP and Medicaid are accurate in determining eligibility. Ensures the MMIS Medicaid Claims system receives the accurate data for billing purposes.	 This initiative will streamline medical expense data collection and tracking for Medicaid Spend-down, improving efficiency and accuracy. Key changes include: Improved Spend-down Calculation: Maximizing customer eligibility by refining how spend-down eligibility is calculated. Expense Tracking: Tracking when and how medical bills are applied to spend-down. Eligibility Rules: Refining rules for determining eligible medical expenses. Expense Categorization: Updating the list of medical expense categories. Enhanced MMIS Integration: Improving file transfer to MMIS, including out-of-pocket medical expenses used in spend-down calculations. These changes will ensure accurate eligibility for both Medicaid, improve MMIS data for billing, enhance expense tracking, reduce errors and training needs, and minimize quality control issues.

	Improves tracking of expenses; reduces defects and training issues for workers. Reduces quality control errors.	
9	General worker and system improvements This process will enhance data collection and calculation on the MD THINK platform by cleaning up outdated values for living arrangements, income, and resources. Rules associated with these eliminated values will be updated accordingly. UI and rule modifications will ensure compliance with policies, regulations, and business workflow improvements, such as adding guidance text.	This change will automate systems which currently require manual touches from case workers - including - satisfying requirements for ex-parte eligibility and enrollment for Non-MAGI Medicaid participants (CMCS Informational Bulletin 11/26/24) The enhancements to the "User Interface" (UI) will reduce redundant work, and assure compliance with CMS regulations as well as other federal partners.
10	Provider or Vendor Management improvements Maryland will add the certified list of Assisted Living Facilities, CARE homes, and other providers/vendors to the E&E system. This automation will reduce error and processing time by allowing case workers to choose from a standardized, up-to-date provider/vendor list, instead of manually entering the name of the provider/vendor. This update will allow caseworkers to utilize the data from the selected vendor/provider across multiple processes, including eligibility, correspondence, MMIS transfers, fiscal components, and reports. This update will create standards for end-users, ensuring	By automating provider certification verification and data management, this enhancement will reduce payment errors and staff time spent on manual data entry. The standardized, automatically-updated provider list ensures accurate payments, reduces duplicate data entry across multiple systems (eligibility, MMIS, etc.), and maintains compliance with state provider certification requirements. The periodic automatic updates from source systems eliminate the need for manual provider data maintenance, reducing administrative overhead while ensuring provider eligibility and certification status remain current. This automation is particularly critical for maintaining program integrity as it prevents payments to providers who may no longer be certified or eligible to provide services. From a cost-benefit perspective, this enhancement will generate ongoing savings through reduced payment errors, eliminate duplicate or incorrect data entry, and decreased staff time spent on provider verification and

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	that the provider/vendor contact information is complete and up-to-date. This update will automatically pull certified provider/vendor information from source systems periodically, assuring the providers/vendors available in the E&E are up-to-date for end-users.	data maintenance tasks.
11	Appeal Workflow Enhancements within E&E This initiative will enhance the current appeal page for a given case to expand its usability, and track appeals for case actions, outcomes, and necessary actions. This project will move the Maryland appeal process within the E&E system. Features will be added within the consumer portal so that customers can appeal the eligibility decision. Workers will have the ability to track the appeal regardless of how it is received.	This initiative will significantly improve the appeals process for Maryland residents who receive services through the E&E system. It is also required in order to assure compliance with CMS' CIB Guidance 12202024 regarding streamlining the application as well as the enrollment process. Improvements will include: Increased Usability: Enhancing the appeal page makes it easier for people to understand the process and submit their appeals effectively. This is especially important for those who may have limited digital literacy or face other barriers. Improved Tracking: Tracking appeals for case actions, outcomes, and necessary actions ensures transparency and accountability. Both individuals and workers can monitor the progress of an appeal, leading to more timely resolutions. Centralized System: Moving the entire Maryland appeal process within the E&E system streamlines operations. It creates a single, organized platform for all appeals, making it easier to manage and reducing the risk of lost or mishandled information. Customer Empowerment: Adding features to the consumer portal empowers individuals to directly appeal eligibility decisions. This gives them more control over the process and reduces reliance on caseworkers for initiating appeals. Efficiency for Workers: Enabling workers to track appeals regardless of how they are received (online, mail, phone, etc.) improves their efficiency. It allows them to manage their workload more

		effectively and provide better service to individuals.
		Overall, this initiative aligns with the Moore-Miller values and aims to make the appeals process more accessible, transparent, and efficient for both individuals and workers. It promotes fairness and ensures that people have a clear and straightforward way to challenge decisions that affect their access to essential services.
12	E&E and CRISP Integration - LTC MA and SNAP This effort will improve the interface with CRISP, especially about individuals who are potentially eligible for SNAP, as well as individuals enrolled in Medicaid Long-Term Care.	CRISP is in the process of connecting to all Skilled Nursing Facilities in the state and creating data exchanges between that interface and the SNFs. Building connections between E&E and CRISP is key to assuring timely payment, reduction in waste, fraud and abuse, as well as assuring that Maryland has accurate data regarding our Non-MAGI LTC population currently receiving benefits or in the process of applying or in some instances appealing. This will also reduce cost and duplication of effort by assuring that MA recipients of LTC receive automated consideration of their eligibility for SNAP. A data sharing agreement/MOU has been executed with DHS, CRISP and MDH to allow for customers to consent to share their potential eligibility for SNAP with CRISP. System enhancements are required to automate the implementation of the MOU and share the data between organizations. This initiative will assist with accessibility to SNAP benefits and case management to ensure that households are applying for benefits that they may be entitled to and also help with prevention of case closure when a recertification or verifications are needed for a household's SNAP case. This aligns with the Moore-Miller goal of ending child poverty in the state of Maryland.

13 Medicaid Processing Improvements and Policy Changes

MD THINK will expand E&E and LTSSMaryland integration services for improved customer service and workload efficiencies. This effort will result in Improved business process workflows, resolution of gaps/defects between policy and system design, increased timeliness of LTC and certain HCBS waiver notices, transfer of Autism Waiver letters from E&E to LTSSMaryland; automation of Letter 81 to ensure claims payment despite delays in eligibility decisions, resulting in an integrated LTC Partnership Plan.

Enhance the system to ensure the system rules are aligned with the Medicaid policy, regulations, laws and statutes. Improves accuracy of customers benefits, streamlines the worker's business process workflow improving processing timeliness and compliancy.

Reduction in Medicaid Quality Control Error Rate. Automate certain tasks to reduce manual workload, improve customer service and compliance. The system integration features with LTSSMaryland will provide State Operating Agencies and State contracted case management entities with information essential to assisting Medicaid Home and Community Based medically fragile children and adults and elderly applicants/recipients with completing the eligibility process to obtain services in their home resulting in a reduction of institutionalization. Case Management entities are contractually required to support their clients with eligibility maintenance tasks (redeterminations, requests for information, etc.). This enhancement will provide transparency to the case managers so that they can better serve their clients.

The State of Maryland aims to modernize processes and automate where possible to reduce provider payment delays, consumer inquiries, and manual processing. This initiative will enhance case manager notifications to ensure timely eligibility determinations. Addressing regulatory and policy compliance gaps/defects will reduce audit findings and protect federal funding. Finally, integrating the Asset Verification System (AVS) for income verification and clearances will replace manual processes, streamlining verification and determination timelines while meeting federal requirements.

<u>Assure compliance with CMS' CIB 11202024 - Financial Eligibility</u> <u>Verification Requirements and Flexibilities</u>. If the state fails to support these programs and comply Maryland faces fines.

14 Program of All-inclusive Care for the Elderly The Program of All-Inclusive Care for the Elderly (PACE) requires (PACE) enhancements to support its expansion and improve efficiency. Specifically, the program needs: The PACE program is currently manually processed. Under this initiative, PACE • Electronic Application: Enable online PACE applications via the processes will be added to the E&E system. Consumer Portal, eliminating the current paper-only process. increasing automation, efficiency, and • System Integration: Integrate PACE into the Eligibility & Enrollment timeliness. This work will build the PACE (E&E) system to streamline case processing, eliminate manual program data collection and rules within the workarounds, and improve reporting capabilities. E&E system. PACE enrollees will have the Automated Forms & Electronic Notices: Automate PACE form same experience as other non-MAGI generation within the system and offer participants the option to customers who use the E&E system about receive electronic notices thereby reducing operational costs for their redeterminations, applications, notices, the program. etc. 15 **Quality Control** As required under federal regulations, each State agency is responsible for conducting quality control reviews. Quality control reviews measure the validity of SNAP cases at a given time (the review date) by reviewing Continuous enhancements and defect management will improve the business against SNAP standards established in the Food and Nutrition Act of 2008 process workflows for the QC staff; modify and the Regulations. Data collected during the BQC review, known as the notices and forms; adjust the QC module, if SNAP payment error rate is used to identify areas for program any FNS regulations are modified. improvement. The SNAP payment error rate measures how accurately state agencies determine household eligibility and benefit amounts. This Ensure that the QC Module works properly includes both overpayments — when households receive more benefits by modifying code for high-priority gaps. than they are entitled to — and underpayments — when households receive less benefits than they are entitled to. At the end of each fiscal year, each State agency's payment error rate over the entire fiscal year will be computed and evaluated to determine whether the payment error rate goal (national performance measure) established in paragraph (d)(1) of this section has been met. Each State agency that fails to achieve its payment error rate goal during a fiscal year shall be liable. Currently, the state of Maryland is in liability status. The Quality Control

module must include federally mandated components and supervisory

		monitoring tools to ensure that review findings are transmitted to FNS timely. Untimely submission may lead to more monetary penalties.
16	BQC SNAP Management Evaluation Develop a module in E&E to manage the SNAP ME sampling and review process. Design a system solution and prefill data from the E&E case management system for SNAP ME, including automation of automated sampling, report generation, outcome review, and CAP plan monitoring. This will be a full system solution with role-based access that is configurable so that caseworkers can pull data by residential jurisdiction, processing jurisdiction, or by other means.	As required under federal regulations, each State agency shall ensure that project areas operate SNAP in accordance with the Act, regulations, and FNS-approved State Plan of Operation. To ensure compliance with program requirements, ME reviews shall be conducted to measure compliance with the provisions of FNS regulations. During each review period, State agencies shall review the national target areas of program operation specified by FNS.State agencies shall determine the method of reviewing the program requirements associated with each program area. State agencies shall use a review worksheet to record all review findings. Currently the Management Evaluation unit manually conducts all reviews. The case sampling process for all FNS requirement components are manually completed. All components of the ME review process are manual and error prone.
17	OHEP Full Integration within the E&E system Maryland will move the energy assistance program into the E&E system; thereby, standardizing and automating the eligibility and enrollment process for OHEP. Implement OHEP into the E&E system and ensure that benefit calculations, payment transmittals, and reporting requirements are accurately met.	DHS currently operates a standalone OHEP Data Management System to process energy assistance applications, which is not integrated with E&E. This lack of integration creates inefficiencies, delays in benefit processing, and missed opportunities to streamline services for vulnerable households who are Categorically Eligible for energy assistance benefits. There are about 270K OHEP customers. To modernize and optimize OHEP, funding is needed to integrate the program with the E&E system. This investment will: • Enhance Customer Service – Automating processes to reduce application wait times, minimize paperwork burdens, and ensure faster benefit delivery to households. • Strengthen Program Integrity – Implementing advanced verification tools to prevent fraud, ensure compliance with

regulations, and safeguard taxpayer dollars.

• Improve Performance Management – Providing real-time data analytics for accurate reporting, better forecasting of energy assistance needs, and informed policy decisions.

By leveraging MDTHINK's capabilities, this integration will increase access to assistance, reduce administrative costs, and proactively enroll eligible households, ensuring that no Maryland family goes without critical energy support. Investing in this modernization effort is not just an operational improvement—it is a necessary step toward a more efficient, accountable, and equitable energy assistance program.

18 Report Enhancements

Enhancements will be made to current and new reports to better capture information, which will improve: management, productivity, fiscal oversight, caseload management, as well as benefit-specific needs (e.g., Cash, SNAP, Medicaid including LTC and Waiver programs, Quality Control, WPR, etc.). This effort will focus on refining and enhancing MD THINK's reporting capabilities to support data analysis and trends and enhance the capacity of end-users to modify existing reports to include new data elements. These reporting enhancements will greatly improve Maryland's capacity to serve our most vulnerable populations while reducing costs and increasing efficiency.

The E&E System captures data for approximately a million Marylanders served under the Family Investment Administration (FIA) each year. Data analytics is essential in allowing data-driven decision making to guide policies to better serve customers. Reporting that is accurate and timely supports improved efficiency and understanding of FIA beneficiaries.

Reporting enhancements are essential for additional reasons such as the following:

- As new technologies and features are added to E&E, reporting capabilities need to be enhanced as well.
- As new FIA programs and initiatives are introduced, there is always an associated reporting mandate, such as with MD SUN Bucks in 2024.
- Federal and State reporting requirements continuously change, requiring FIA to adapt to those requirements.
- Ad hoc reporting needed to fulfill requests from internal and external parties such as, the MD Legislature, Public Information Act stakeholders, Community Based Organizations, federal and state agencies, impose the need for enhancements.

		A major new technology upgrade, AWS QuickSight, is currently underway to replace MD THINK's current data analytics platform, Qlik Sense. QuickSight will improve the quality and efficiency of report generation, including a new self-service capabilities which allows users to easily create reports, dashboards, and perform ad-hoc analysis on their own. This will eliminate the cost that would otherwise be required for technical resources to develop reports.
19	WORKS database system Enhancements Enhancement will modify the system to accept bi-directional relationships within the E&E system; align and map codes for Able-Bodied Adults Without Dependents (ABAWD) and SNAP work registration; and remove any defects to ensure that the WORKS database and E&E system values align.	This enhancement will enable Local Departments of Social Services (LDSS) and Central staff to ensure that the 29K ABAWDs receive seamless service and are not exposed to undue hardships while meeting work requirements. It also reduces the risk of SNAP recipients inaccurately losing benefits or Work Participation progress not being captured across systems which will result in loss of benefits and an increase in fair hearing cases. It will also increase reporting metrics while making the systems more malleable to adapt to FNS rule changes in real time. These changes will keep Maryland in compliance with reporting requirements and producing accurate data. Will ensure that system rules are equal across programs and will enhance user capabilities.
20	Technology enhancements Enhance 508 compliance testing and modifications, as well as: page updates to the MD THINK E&E consumer and worker portals; Cottage Applications (standalone databases); Quality Control and Maryland Office of Refugees/Asylees databases; Quicksight Migration (replacing QLIK/QLIKSense for reports); upgrades (v38) the Verify Lawful Presence (VLP); E&E technology upgrades; and support the data self-service and reporting initiative.	Continue upgrades and patches to reduce outage risks, vulnerability and continue support from software providers. Compliance with Accessibility Standards (508 Compliance): To enhance the 508 compliance testing and modifications ensures that the MD THINK portals remain accessible to individuals with disabilities, meeting federal legal requirements and promoting digital inclusion. This will also comply with Executive order 01.01.2024.25 (Maryland Plain Language Initiative) and ADA Title II Final Rule. Enhanced User Experience for Worker Portal and associated app: Page update to the MD THINK E&E worker portal, Quality Control and associated apps will optimize navigation, improve content presentation,

	Increase efficiency and productivity, improved security, better compatibility with newer systems, enhanced competitiveness, automation of repetitive tasks, reduced errors, and the ability to access advanced features and functionalities.	and streamline workflows, resulting in higher user satisfaction, reduced user error and increased in adoption of new programs and workflows. Technology Upgrades for Verify Lawful Presence (VLP v38): Upgrading VLP technology improves compliance with federal guidelines with modern systems, boost performance, enhanced verification process and ensure the determination of accurate eligibility by using the VLP data. Migration of Quicksight for reporting: Reduce cost and bring advanced reporting capabilities by moving to AWS Quicksight a cloud-based business intelligence platform which has following advantage improved data visualization, faster data access, and easier integration with other tools Data Self-service and Reporting Initiative support: Enable business customers to make data-driven decisions in alignment with prioritizing data and evidence guidance from the 2024 State Plan. The self-service reporting tool empowers users to generate customized reports on demand without the cost of expensive technical assistance, improving decision making speed, reducing development team dependency and enhancing operational transparency. E&E Technology enhancement: Continuous upgrades to E&E technology ensures compatibility with federal guidelines, compliance support, technical support, reducing downtime, and providing access to cutting edge features for eligibility determination process.
21	Unified Benefits One Application	Enhance Unified Benefits solution to deliver on the Moore-Miller Administration 2024 State Plan priority "ENDING CHILD POVERTY IN THE STATE OF MARYLAND" and its objective 1.1 to increase economic benefits for families across the state. The enhancements also comply with Executive order 01.01.2024.25 (Maryland Plain Language Initiative). These

		enhancements build on top of the mobile friendly Unified Benefits screening tool launched by the Governor in Dec 2024 which has been used more than 50K+ times since launch. Following enhancements are planned to achieve the impact: • A redesigned mobile friendly common application for benefits that allows customers to input their information, just once, to apply for multiple economic benefits simultaneously across the state significantly reducing application time and complexity while improving customer experience. The redesigned common application will be made available to 1.4M + Marylanders using myMDTHINK portal. • Provide integrated tracking and notifications where customers can track their applications from a single platform, and receive timely notifications about the status of their submissions. This effort will enhance transparency and engagement throughout the benefits enrollment process.
22	Cottage Applications Projects Cottage Applications Enhancements and M&O, WORKS Bi-Directional Relationship - Analysis, Minor modifications for the enhancement stories to stabilize or improve cottage applications.	This covers the maintenance and enhancements to around 20+ applications under the Cottage Applications umbrella such as-Procurement Tracking System (PTS), Federal Ledger, Work Opportunity Record Keeping System (WORKS), Online Work Readiness Assessment (OWRA), Office of Home Energy Program (OHEP), myDHR, myDHRAdmin, SML, System Security, Common Landing, Maryland Legal Services Program (MLSP), Community Emergency Relief Tracking System (CERTS), Security Log, myOHEPStatus.org, TeamMate, Xpression and Adoption Notices.
23	Technical Projects - Enterprise-level upgrades Aurora and Dynamsoft Upgrade,	Aurora Postgresql: This database upgrade for application databases will provide improved security, new features and enhancements, and also continued customer support and reduce the outage risks.

	Java/Angular Upgrade, DoIT security enhancements and migrations, E&E technical upgrades, Support: Data self-service and Reporting Initiative. Increase efficiency and productivity, improved security, better compatibility with newer systems, automation of repetitive tasks, reduced errors, and the ability to access advanced features and functionalities.	Dynamsoft: Upgrading Dynamsoft can improve the performance and functionality of the E&E application document management and provide access to new features like Improved Recognition, Faster Processing, Improved Camera Control, and Support for more barcode types. DoIT Security Enhancements: This helps in a more streamlined user experience with single sign-on (SSO), improved operational efficiency due to Identity Access Management (IAM) user-friendly interface, reduced total cost of ownership (TCO) through a potentially more straightforward licensing structure, enhanced security features, and greater flexibility for application integration, especially in cloud-based environments. Data and Self Service Initiative Creation of the data pipeline to enable data access to workers and decision makers to analyze data via self service. Self service reporting will help the users for the below. 1. Reduction in cost of technical resources 2. Improved decision-making 3. Real-time insights 4. Data Literacy 5. Customizable Dashboard 6. Enhanced Customer Privacy Java/Angular Upgrades: Upgrading Java and Angular ensures access to the latest development frameworks, tools, and libraries, improving overall system performance and maintainability. Newer versions address security vulnerabilities present in prior frameworks, reducing cybersecurity risk. It
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24	RBAC and ABAC continuos Improvements Improve the Role Based Access(RBAC) and Attribute Based Access controls (ABAC) with	Restricts users access to workflows, field elements, or components within the E&E system. Users will only be able to view or modify what is relevant to their job function. Continuous updates as new fields, workflows, or components are added to the system to limit users access to what is

	the E&E system. Security measures to restrict what actions or attributes a specific type of user can do in the system. End-users will only access what they need to do their specific jobs. Prevents users from viewing or modifying elements not relevant to their positions.	relevant to their specific job function.
25	DDA Waiver Consolidation Project Modify the E&E system to support the MDH DDA consolidation initiative and Community Options waiver requirement to create workflow and rules for processing in the system.	The Moore-Miller Administration continues to make record investments in the Developmental Disabilities Administration (DDA). The proposed FY 2026 budget is more than \$1.3 billion. This funding will support new enrollments, enable LTSSMaryland improvements, and maximize sustainable funding. Currently there are three DDA-operated Medicaid Waivers - Community Pathways, Community Supports, and Family Supports. Self-directed participants currently existing within the existing three DDA Waivers: Community Pathways, Community Supports and Family Supports. The federal Access Rule requires timely access to services. Individuals whose needs can no longer be met in their approved Medicaid waiver program have to disenroll from that program and complete a new waiver application process to receive services. Operating three Medicaid waiver programs is not cost effective or efficient, and creates confusion and duplicative processes/reporting. As part of a cost containment strategy, Community Supports and Family Supports will sunset leaving the comprehensive waiver - Community Pathways - in existence. The Community Options Waiver updates are also part of this initiative. This Waiver is not in compliance with HEALTH - GENERAL § 15-132, and will require immediate updates to the application process in order to align with the statute.

26	Suspend Medicaid Benefits for Adults	Medicaid eligibility for HealthChoice Managed Care Organization (MCO) participation is dependent on a participant not being in an institutional or
	Modify E&E system to "suspend" Medicaid eligibility for customers who are incarcerated. Customers will continue to be eligible for Fee For Services within the MDH MMIS system. Customers will be removed for MCO coverage.	carceral setting. If a person is in a carceral setting they are eligible for Fee-for-service benefits for acute care; however, their MCO eligibility (and payments to MCOs) needs to be suspended until the person returns to the community. Assuring that these changes in eligibility spans are reflected in both MMIS as well as the E&E system will assure seamless transition between MCO and FFS benefits as participants move between the community to carceral settings and vice versa.

CJAMS

#	Planned Changes	Impact
1	Identity Access Management (IAM) Migration	Migrate the existing IAM system to the Department of Information Technology IAM platform via enhancements to the system to support the launch of the new IAM solution replacing SAILPOINT, Forgerock, and other related components. The impact of doing this would be a better and faster means of getting onboarding done for the 24 jurisdictions served. This is in alignment with the executive order on Government Modernization and initiatives led by the Department of Information Technology.
2	Qlik to QuickSight Migration	Reduce cost and bring advanced reporting capabilities by moving to AWS Quicksight, a cloud-based business intelligence platform which has the following advantages: improved data visualization, faster data access, and easier integration with other tools. The impact of not doing this would be less readily available reports which are critical to all the vulnerable children and adults we serve.
3	Support - Data self-services and Reporting Initiative	Enable business customers to make data-driven decisions in alignment with prioritizing data and evidence guidance from the 2024 State Plan. The self-service reporting tool empowers users to generate customized reports on demand without technical assistance, improving decision making speed, reducing development team dependency/cost and enhancing operational transparency. The impact of not doing this would be continual increases in

		costs for technical teams and less reliable outcome of reports which are critical to all the vulnerable children and adults we serve.
4	Child Welfare – L. J. consent decree reports	Transition and further refine reports as a result of the federal consent decree - Baltimore City L. J. Consent Decree - to ensure monitoring and to build a pathway to exit this 40yr decree. The impact of not doing this would be a less reliable outcome of reports which are critical to all the vulnerable children and adults we serve.
5	Share Platform Connectivity Issues	Address the connectivity issues experienced by Child Welfare, Adult Services and Providers, so program participation and search provide a unified view. The impact of not doing this is continued barriers with connectivity which can then have a major impact on the work being done and services offered to the children, families and adults we serve in Maryland.
6	Adult Services Reports	Includes those to satisfy New Federal Reporting Requirements
7	Child Welfare & Provider Reports	Reports to satisfy data needs for local, state and federal and to support legislative and federal report requirements

CJAMS

#	Planned Changes	Impact
1	OLM CJAMS Development	 Resource Management Support (on-boarding, off-boarding, Provider Training). Onboarding/ Offboarding support Access Management to private providers, Hardware and Security Monitor support, SailPoint login assistance. Supporting audit trails and compliance Qlik report support Defect management Expand and enhance search capabilities Independent Living Program apartment inspection enhancement Improve OLM report navigation Ability to generate a statical report Establish data analysis beyond raw data Update the system language Revise document categories and subcategories types Enhance change request capabilities More direct pathways for system navigation (less clicking) Ad Hoc Reports Audit Compliance Report enhancements Provider RVP Development Uniform Incident Report enhancements, Annual Budget Return to Provider, Program Manager Group, Provider portal document section, Person Search, OLM Access to Financials, Initial inquiry for private provider license, OLM initial inquiry part 2, OLM inquire for potential provider part 3, CAP stratification, OLM CAP Provider Communication, OLM CAP Grouping, OLM Budget and LOI Refinement.

CJAMS

#	Planned Changes	Impact
1	CJAMS Contact Notes Update	The contact tab will be enhanced to align policy, practice, and data collection. The reconstruction of this tab will allow for better documentation, better data collection. The revision will include the option for the user to select who they met with, and if the visit was completed or attempted, without putting in multiple contacts for one visit. The "purpose of contact" dropdown list is being revised to condense this list. Currently there are 128 options leading to multiple choices being selected and sometimes the policy designed choice is being missed. As an example, when an option such as "monthly visit with the child" is selected a template would appear in the narrative to include all the needed items in the policy that need to be reviewed/asked in a monthly home visit with a caregiver and the foster child. The worker would then be able to fill in these areas from the visit. Templates would be designed that are aligned with the policy across all program areas. Finally, a new feature will be added to allow case workers to select "Immediate Safety Concerns." There are 3,687 children currently in our care who would be impacted by not having adequate contact notes added for proper services offered plus the additional 60,000+ children and adults served in other programs.
2	OLM Provider & Worker Portal Post RVP	The impact of not having a repository of needed enhancements to the system can impact the timeframe in which providers are registered and available to serve families in critical need.
3	CJAMS NEICE Interface	Interface with NEICE platform (CCWIS requirement) for child placements outside of state of origin. National Electronic Interstate Compact Enterprise (NEICE) interfaces to support Maryland's interactions with other states in the Interstate Compact on the Placement of Children (ICPC). The impact would be on the children who would continue to not receive needed services. NIECE has served 176 children since 2019 to-date for OOS. If these enhancements went unmet, the children in OOS would be impacted.

4	CJAMS Root Cause Analysis and System Stability across the Applications	1) Root Cause Analysis for all defects, 2) IPad Testing, 3) Regression Testing, 4) Automation Scripts maintenance, 5) Performance / Load Testing, 6) Keeping Training Environment in Sync with Production, and 7) Documentation update (ERD, Data Catalog / Dictionary, Screen to column mapping) Not having this enhancement would have an impact on the stability of the CJAMS systems and would directly affect the timeliness of or prevent services from being available.
		This has an impact for the 3,687 youth in care plus the additional 60,000+ children and adults served in other programs and the inability of workers to effectively get CJAMS defect tickets resolved.
5	Child Welfare - Title IV-E Dashboard	Title IV-E Dashboard to ensure constant insight and oversight over the federal penetration rate to allow for more federal drawdown. Without this we could lose potential funding for children who are eligible for Title IV-E.
ın	Child Welfare - Caseworker dashboard	Caseworker dashboard to allow for oversight of each child and family being served in the state of Maryland to ensure a level of urgency and responsiveness. For the 3687 youth in care plus the additional 60,000+ children and adults served in other programs, workers would not be able to adequately see what is required to do in terms of their caseload.
7	Hospitalizations/ER Visits	The system shall have the ability to provide a streamlined health screen containing information about all health assessments (medical/mental health/vision/dental), clear delineation of disabilities and special needs, and ongoing health/mental health needs that still need to be addressed—the data elements will align with elements made available through MDH data exchange, as well as being and consistent with data required by federal performance measures (e.g. CFSR). This would have an impact on any child who has an ER visit or is hospitalized. It would impact SSA's inability to report out on these visits.
8	Adult Service Enhancements	Enhancements to the Adult Services module will ensure the safety of the more than 12,000 vulnerable adults served annually through CJAMS. This includes needed alerts in the system to ensure that timely response and services to vulnerable adults are received

		to meet the statutory requirements for Adult Protective Services (APS), as well as checklists to allow for quality oversight of services provided. In SFY24, APS received 21,760 reports of maltreatment and self-neglect of vulnerable adults. The enhancement to screening tools that assist workers and supervisors in determining a needed APS response are critical in the protection of vulnerable adults. The enhancement of Adult Services role functionality is essential in the daily operations of workers and supervisors. Without this, due to the rising volume of adult maltreatment reports, APS will struggle to meet response deadlines. This includes supervisor override and supervisor reroute features.
9	Child Welfare - Family First Feature	FTDM finalization, improvements to the billing of EBPs - local contractual payments need to be submitted to the Finance module, report develop to demonstrate billing versus candidacy
10	Legislative and Regulatory Compliance	Enhancements to the system based on legislative mandates that have been enacted at both the state and federal level to ensure timely reporting and mandated compliance as to avoid any financial penalty. This is a state and federal level requirement that comes from legislation sessions and will impact the services that are offered to children.
11	Child Welfare - Post Deployment enhancements	Ongoing minor enhancements throughout the application. This would have an impact on the 3687 youth served plus the additional 60,000+ children and adults served in other programs and ensure that CJAMS has been effectively tested to ensure proper usage of the system.
12	Child Welfare Fatality and Critical Incident Report	CPS Fatality and Critical Incident reporting improvements to allow for accuracy of fatality oversight and reporting as required by federal reporting.
13	Child Welfare - Enhanced functionality for Living Arrangement Tracking	Address the lack of functionality around living arrangements and improve the data collection to ensure that Maryland is aware at all times where a child in state's custody is placed. If not implemented, this would impact accurate reporting in placement and living arrangements in CJAMS.
14	Adult Services Post Deployment Continuous Improvements	Ongoing minor enhancements throughout the application. This would have an impact on the 1200+ vulnerable adults served and ensure that CJAMS has been effectively tested to ensure proper usage of the system.
15	Adult Services Risk Screening and Priority Analysis Tools	Enhancements to the Adult Services module will ensure Adult Services Risk Screening and Priority Analysis Tools are updated and refined to allow for more effective and efficient service delivery to the vulnerable adult population.

16	OLM Post RVP Enhancements	The impact of not having a repository of needed enhancements to the system can impact
	(App + Report)	the timeframe in which work is done, delaying .
17	OLM Post deployment	Prioritized continuous improvements related to the management of Child Welfare
	continuous improvements	providers, including resource homes.
18	Adult Services	Ensure Adult Services and Child Welfare Access Across Platforms such as E&E and
'		MDTHINK Programs View to streamline service delivery to Maryland's vulnerable adult
		population.
19		Compliance with Accessibility Standards (508 Compliance): To enhance the 508
'		compliance testing and modifications ensures that the MD THINK portals remain
		accessible to individuals with disabilities, meeting federal legal requirements and
		promoting digital inclusion. This will also comply with Executive order <u>01.01.2024.25</u>
		(Maryland Plain Language Initiative) and <u>ADA Title II Final Rule</u> .

CJAMS Provider

#	Planned changes	Impact
1	Child Welfare & Providers - NEICE Data Migration	National Electronic Interstate Compact Enterprise (NEICE) interfaces to support Maryland's interactions with other states in the Interstate Compact on the Placement of Children (ICPC). Active and historical data migration (Clients, Placement Resources, etc) from NEICE to CJAMS. The impact here is that we could not accurately report on ICPC and children impacted
2	Provider NEICE Interface	National Electronic Interstate Compact Enterprise (NEICE) interfaces to support Maryland's interactions with other states in the Interstate Compact on the Placement of Children (ICPC). The impact here is that we could not accurately report on ICPC and children impacted
3	Provider - Family Finding	Real time Integration with external systems to locate family as required by SB708 Kinship Care and to ensure there are capabilities to onboard Kinship providers and Kinship Placement. This is a legislative mandate.
4	Provider module enhancement for all Reports (including LJ Reports)	This enhancement includes changes to reporting required by federal court order (L.J. Consent Decree) that established a plan for caring for foster children in Baltimore City. Without this enhancement, SSA would not have a repeatable accurate report of how many vacancies and how many licensed homes are available.

#	Planned changes	Impact
5	enhancement to	Refinement to the fields to match the application and re-application requirements. Currently, the system does not provide the correct areas matching COMAR requirements and does not provide a check and balance to the process to ensure that all required fields are completed before the user approves. The impact is that homes that need to be recertified each year are not accurately recertified.

CSMS

#	Planned changes	Impact
1	Automate Funding Request Approval	Enhancements to the system to allow for local offices to submit requests for funding to CSA Central Office to replace the tedious manual process currently in place. Automating this process will decrease the time it takes to replace payments to custodial parties that have been incorrectly issued to another custodial party as a result of mis-identification of a collection. Families rely on child support payments to meet their bills. Delay in getting these payments can cause serious problems for families. This enhancement will also help in the reconciliation process allowing CSA to maintain accurate data to ensure exact and timely reporting.
2	Update User interface Inconsistencies	Address user interface Inconsistencies e.g. fields that are inconsistent, ability to fill or make fields read-only etc. There are fields in CSMS that are currently missing that need to be developed in order to fully perform required case management. Where there are fields replicated in more than one screen, the transfer of input data must be sent to the corresponding field. Currently there is a mismatch of data occurring which can skew reporting.
3	Condense / Combine Intake and Registration	Currently, Intake and Registration are two separate processes within CSMS. These processes are not combined as they should be; due to the fact that these processes are handled as separate functions, there is an impact on the Member Identification process. This can cause a duplication of Member Identification creation. This also causes our local caseworkers to duplicate their efforts, where they could spend the time serving families. The separation of registration and intake impacts the Federal timeframes that have been mandated for processing incoming applications. This slows down service being provided to families.
4	Update Interface Reconciliations	Reconciliation with all program partners is necessary to ensure data accuracy. Identify interface file errors including, but not limited to: Federal Case Registry, State Services Portal, CSENet, Informatix, Bank of America, SMART, State Treasurers' Office, DLS/PLS, etc must be fixed. CSA is

		dependent on interfaces with partnering agencies and administrations in order to accurately register, establish and enforce cases. CSA has over one hundred interfaces. We are federally mandated to interface with various partners to ensure compliance through all facets of our program.
5	Medical Performance Ratios/Performance Medicaid Data	CSA is federally mandated to provide Medical Insurance information to the Family Investment Administration (FIA) and the Maryland Department of Health (MDH) for those cases where their customers are receiving both Medicaid and Medicare.
6	Use of SSN for interfaces not IRN	Use of the SSN for interfaces and not the Individual Registration Number (IRN) causes payments to fail when applying to a case. This causes a delay in sending payments to families. This effort will improve collections for families and improve federal performance measures which are used in determining the amount of incentive funding we receive from our federal oversight agency.
7	Independent Verification & Validation Services	This is required/mandated by the Federal Office of Child Support Services, as part of the federal certification process.
8	Partial Reallocation Report Requirements	The Federal Tax Adjustment Report(injured spouse) is currently only available through the federal interface. A report is not created in the CSMS. The information in the federal portal does not maintain historical information and is refreshed quarterly. CSA needs the historical information to provide timely service to our customers and to fulfill audit requirements.
9	Multifamily Adjustment Updates to CSMS *Pending Legislation*	This effort looks to further the Governor's initiative to end childhood poverty in Maryland, by supporting families that are most vulnerable who rely on our agency for services. This would change the way that child support is calculated when either parent has another child living in the home whom they are legally obligated to support. A separate child support calculation must be performed for that other child using just that parent's income. Seventy-five percent of that amount is then deducted from that parent's income while calculating the support obligation for the child who is the subject of the case.
10	Monetary Award Intercept *Pending Legislation*	This effort looks to further the Governor's initiative to end childhood poverty in Maryland, by supporting families that are most vulnerable who rely on our agency for services. This effort will improve collections for families and improve federal performance measures which are used in determining the amount of federal incentive funding we receive.
11	Cease Foster Care Reimbursement	This effort looks to further the Governor's initiative to end childhood poverty in Maryland, by supporting families that are most vulnerable who rely on our agency. Research shows that the

	Pending Legislation	Agency spends more money in collection reimbursement efforts than is actually collected. This will increase CSA's cost effectiveness.
12	Driver's License Suspension *Pending Legislation*	This effort looks to further the Governor's initiative to end childhood poverty in Maryland, by supporting families that are most vulnerable who rely on our agency for services The Driver's License Suspension program has been the subject of review for many years. CSA is looking to enhance the program to ensure we are accurately storing and reporting data.
13	Enhance/Improve Use of Email and Text (Omnichannel)	This effort looks to further the Governor's initiative to modernize technology and quicker communication with customers. CSA is looking to integrate this functionality into our system to improve communication with the families that CSA serves. Additionally, this would decrease the amount CSA spends on mailing letters.
14	Child Support Mobile Application	This effort looks to further the Governor's initiative to modernize technology. Building and launch of a mobile application to meet the needs of customers on devices they are likely to have access to, leveraging features unique to the mobile phone.
15	Independent Contractors & Liens *Pending Legislation*	This effort looks to further the Governor's initiative to end childhood poverty in Maryland, by supporting families that are most vulnerable who rely on our agency for services. This requires employers to report the hiring of independent contractors to the Maryland New Hire Registry. This effort will improve collections for families and improve federal performance measures which are used in determining the amount of federal incentive funding we receive.
16		This effort looks to further the Governor's initiative to end childhood poverty in Maryland, by supporting families that are most vulnerable who rely on our agency for services. This allows for the intercept of sports winnings of obligors who are in arrears in the payment of child support. Certification to State Lottery and Gaming Control Agency to include sports wagering facility licensees. This effort will improve collections for families and improve federal performance measures which are used in determining the amount of incentive funding we receive from our federal oversight agency.

Shared Platform

#	Planned changes	Impact
РМ	0	
1	Project management and scrum support across MD THINK	The Project Management Office (PMO) is critical in ensuring Agile governance compliance, adherence to project plans, and the timely delivery of mandated initiatives across MD THINK. MD THINK's role as a state-managed Cloud-based shared services platform supporting DHS programs and the need for a structured legislatively-backed project management framework is essential for compliance with federal and Maryland state regulations for publicly-funded programs.
2	Solution Roadmaps	The PMO is responsible for resource optimization, forecasting, planning, and reporting, as well as justifying MD THINK's funding needs. The Solution Roadmaps are an integral part of the tactical plan. These roadmaps serve as a mechanism for the delivery teams to align with appropriated funding from various federal partners (ACF, FNS, CMS).
3	Deliverables	The MD THINK platform is a critical state-managed Cloud-based infrastructure that supports various DHS (Department of Human Services) programs, including child support, child welfare, and public assistance services. Ensuring efficient governance, risk management, and transparent reporting across all client programs within MD THINK is a legislative imperative to meet compliance, accountability, and performance expectations mandated by state and federal regulations. MD THINK operates under multiple federal and state laws; and such legislative bodies require transparency in managing public funds, necessitating program performance monitoring, which requires building and maintaining various key performance indicator metrics and periodic progress reports. Key deliverables include managing project budgets, projections, and tracking, while also providing dashboard solutions for performance management. The structured reporting to legislative bodies and auditors helps to verify funding is being used effectively and efficiently.
4	Risk Management	MD THINK is a shared services platform used by multiple state agencies (MDH, MHBE, DPSCS, DOL, etc.), requiring cross-agency coordination and governance mechanisms to align priorities, identify risks, and standardize reporting. Ensuring efficient governance, risk management, and transparent reporting across all the Solution Trains within MD THINK is not just a strategic necessity but also a legislative imperative to meet compliance, accountability, and performance expectations mandated by state and federal regulations. Legislative bodies require

		transparency in managing public funds, necessitating program risk management and performance monitoring.
5	Resource Management	MD THINK is built and maintained by the in-house implementation management team and consulting contractor services procured through the Agile services contract. To accomplish the mandated outcomes, ~500 resources continuously provide their expertise. The efficient disbursement of appropriated funding from federal and state partners and alignment with the execution plan requires effective resource management. This management initiative includes resource induction and separation, as well as continuous procurement and contract renewals.
6	Continuous Improvements	Government agencies and organizations managing federally- and state-funded programs are mandated to ensure transparency, accountability, and documentation of program management activities. Maintaining a structured and easily accessible repository aligns with federal and state legislative requirements. The development and continuous enhancement of the Enterprise Information Portal is not just an operational necessity but a legislative imperative. The portal helps to ensure compliance with statutory obligations, strengthens governance and oversight, facilitates system integrations necessary for regulatory reporting, and aligns with digital transformation goals mandated by federal and state authorities. Investing in this initiative is crucial for maintaining transparency, efficiency, and legal adherence, ultimately reinforcing public trust and program accountability. The Enterprise business process management system facilitates audit readiness by providing real-time access to compliance documentation, risk assessments, and policy adherence records.
Dat	a	
1	MDM Data Cleanup and Process changes	Quarterly data cleanup in the Master Data Management (MDM) system ensures that all information is accurate and up-to-date, addressing any incorrect data identified through agency requests or analysis. This ongoing process helps maintain the integrity of our data, reduces errors, and improves decision-making by providing teams with reliable, high-quality information. Regular cleanups also enhance operational efficiency, minimize the risk of issues caused by outdated or incorrect data, and ensure that business processes run smoothly and effectively.
2	MDM - E360 Tool Enablement for MDM team and Data steward	Enabling the E360 (Data Steward UI) tool will empower the MDM support team with a user-friendly interface to efficiently manage and oversee data. This tool will streamline data stewardship tasks, making it easier for team members to ensure data quality and consistency. Additionally, providing training sessions for both application and business team data stewards

		will equip them with the knowledge and skills needed to use the tool effectively, ensuring better data management, improved collaboration, and more accurate decision-making across the organization.
3	MDM Enhancements and Core Upgrade	Performing regular enhancements to the MDM (Master Data Management) application based on agency requirements ensures that the system continues to meet the evolving needs of the business. These updates will improve the system's efficiency, functionality, and overall user experience. Periodically upgrading the MDM product to remain compliant with industry standards and regulations helps mitigate risks, ensures data security, and supports smooth business operations. This approach allows us to maintain a reliable, up-to-date system that delivers high-quality data and supports the organization's goals effectively.
4	MDM Administration and support	Providing administrative support for all MDM environments ensures that the system remains operational, with necessary patches applied to keep everything running smoothly. This ongoing maintenance helps avoid disruptions, ensuring consistent access to reliable data for decision-making. Managing MDM activities, including PI Planning, Story Planning, and Scrum tasks, ensures that the team stays aligned and focused on delivering valuable updates on time. By having each team member contribute to planning and preparation for future sprints and PI events, we can ensure better coordination, improve efficiency, and deliver continuous improvements to the system that support the business's data management needs.
5	Data Governance - Establish Data Governance Team to improve Data Challenges	Establishing a Data Governance team will help address data challenges and significantly improve data quality across the organization. This team will be responsible for ensuring that data is accurate, consistent, and reliable, which is essential for making informed business decisions. By overseeing data quality, the team will help prevent errors, reduce risks, and ensure that everyone in the organization is working with the best possible data. This approach will lead to improved operational efficiency, better compliance, and stronger overall business performance.
6	R360 Search /Performance Optimization and R360 UI & MDM Data cleanup and attribute enhancements	Integrating updated data elements and standardizing search data attributes will improve the consistency and accuracy of the data, making it easier to find and manage. Developing a user-friendly search interface for data stewards will allow them to quickly access and work with the most up-to-date information, improving efficiency and decision-making. Additionally, updating MDM to modify match attributes and aligning Enterprise Search-R360 with these changes ensures that the system remains accurate and in sync, enhancing overall data quality

		and supporting more reliable business operations. This will streamline processes, reduce errors, and help teams work more effectively.
7	R360: Data Sharing & Security Enhancements	Capturing the effort used to integrate R360 and DPSG with SailPoint will ensure a smoother, more secure user access management system, improving operational efficiency and security across platforms. Implementing fine-grained, role and attribute-based controls within R360 through DPSG will provide more precise data access and help maintain the right level of security while streamlining workflows. Additionally, enabling the onboarding of additional agency features will enhance the system's flexibility, ensuring it can adapt to future needs and provide better support for Marylanders. This approach will optimize resource usage, improve security, and support the organization's growth and evolving requirements.
8	R360 M&O support activities for FIA/SSA/CSA,MHBE & MSDE	Ongoing maintenance and operational support for all agencies and applications, including E&E, CJAMS, CSMS, MORA, MDM, EDMS, MHBE, and CCATS, are crucial for ensuring that these systems remain reliable and functional. Addressing defects and resolving issues promptly helps minimize disruptions and maintain smooth operations across the organization. Performing data refresh activities when necessary will correct any data mismatches, ensuring the integrity and accuracy of the information being used. Additionally, supporting planned release activities ensures that the systems stay up-to-date, with new features and improvements being properly implemented. This proactive approach to maintenance and support leads to increased efficiency, reliability, and overall business continuity.
9	EDMS/ECMS M&O support activities for FIA/SSA/CSA	Ongoing maintenance and operational support for all agencies and applications, including FIA, SSA, and CSA, are essential to ensure the systems continue to run smoothly and effectively. Promptly addressing defects and issues helps prevent disruptions, maintain reliable services, and support business continuity. Additionally, performing data migration activities as needed ensures that critical data is accurately transferred between systems, supporting improved functionality and ensuring that all applications have the most up-to-date information. This will help optimize operations, reduce risks, and ensure the systems remain reliable and efficient.
10	Data Team M&O support activities for E&E	Providing comprehensive support for FIA/EE is essential to enhancing database management and cloud services across multiple platforms. This includes managing key tools like Informatica and Qlik, as well as offering cloud support for OpenSearch, DocumentDB, Kinesis, and Glue. Ongoing support for Master Data Management (MDM) ensures that data remains accurate and reliable. The team also facilitates R360 enterprise search capabilities, maintains the Enterprise Data Management System (EDMS), and oversees the Data Portal, ensuring easy access to critical

		information. By managing new onboarding initiatives and ensuring smooth operations through PI26Q4, the team helps maintain a seamless user experience, improving productivity and business efficiency.
11		Providing comprehensive support for SSA/CJAMS is critical to improving database management and cloud services across various platforms. This support includes managing key tools like Informatica and Qlik, as well as offering cloud support for services such as OpenSearch, DocumentDB, Kinesis, and Glue. Ongoing Master Data Management (MDM) support ensures data accuracy and consistency across the organization. The team also facilitates R360 enterprise search, maintains the Enterprise Data Management System (EDMS), and manages the Data Portal to ensure that users have easy access to important information. Additionally, overseeing CJAMS's new onboarding initiatives ensures smooth operations and enhances user experience, helping to drive efficiency and productivity through PI26Q4.
12	Data Team M&O support activities for CSA/CSMS	Providing comprehensive support for CSA/CSMS is essential to improve database management and cloud services across multiple platforms. This support includes managing key tools like Informatica and Qlik, offering cloud services such as OpenSearch, DocumentDB, Kinesis, and Glue, and providing ongoing Master Data Management (MDM) support to ensure data accuracy and consistency. The team also enhances user experience by facilitating R360 enterprise search, maintaining the Enterprise Data Management System (EDMS), and managing the Data Portal, making it easy for users to access critical information. Additionally, overseeing new onboarding initiatives ensures smooth operations and helps improve efficiency, ultimately supporting the business's goals through PI26Q4.
13	Data Team's EDMS support for UB's initiative	Providing comprehensive support for UB is crucial to enhancing the Enterprise Database Management System, ensuring it operates efficiently and meets the needs of the organization. By overseeing new onboarding initiatives, the team will ensure that all new systems and processes are smoothly integrated, allowing for seamless operations and a positive user experience. This support will drive productivity, improve system reliability, and ensure that the business can effectively meet its goals through PI26Q4 and beyond.
14	Data Team's EDMS support for AHS initiative	Providing comprehensive support for AHS is essential to improving the Enterprise Database Management System, Master Data Management, and Enterprise Search. This support will ensure smoother operations, better data management, and more efficient search capabilities, ultimately enhancing the user experience. Overseeing new onboarding initiatives will help

		integrate new systems seamlessly, supporting the organization's goals and ensuring reliable performance through PI26Q4.
	Data Team's M& O support for MHC (HBX), DPSCS, MSDE	Providing essential support for Maryland Health Connection (MHC), Department of Public Safety and Correctional Services (DPSCS), and the Maryland State Department of Education (MSDE) is key to maintaining efficient operations and high data integrity. By supporting data management, system maintenance, and process enhancements, we ensure smooth operations and reliable services. Facilitating seamless platform integration will improve the agencies' ability to serve the public effectively and enhance the overall user experience.
	Data Pipeline execution for CRM	Maintaining the data pipeline in the Data Lake and completing the data migration for the CRM project is essential for ensuring smooth data flow and accurate information storage. This will support efficient access to data, improve decision-making, and ensure the CRM system is fully integrated with the latest and most reliable data, ultimately enhancing service delivery and operational efficiency.
	Data and Architecture Governance - Performance Stability, Observability	Data and Architecture Governance is crucial for ensuring performance stability and observability in the MDTHINK Shared Data Platform environment. With multiple applications and tools relying on the same databases, ETL processes, and reporting tools, maintaining high reliability and performance becomes a challenge. Effective governance will address these issues, improve system stability, and provide clear visibility into the platform's operations, ensuring smoother workflows and better service delivery across the platforms.
	Data Portal Application - Dashboards with SSO Integration, Private, Public Access, Agency Onboarding, BI Tools Integration	Migrating the Data Portal Application to Staging and Production environments with RVP features will enhance accessibility and performance. By integrating Single Sign-On (SSO), providing private and public access, and supporting agency onboarding, we will streamline user experience and ensure secure data access. Additionally, integrating Business Intelligence (BI) tools and setting up a robust database will improve reporting capabilities. Standardizing serverless applications with cloud-native components and setting up continuous integration and delivery (CI/CD) will ensure smooth, efficient updates across all environments, optimizing system performance and supporting future growth.
19	Cloud Services -Operations support	Performing operational support for databases and tools—including monitoring, backups, restores, patches, outage management, and data refreshes—ensures the system remains reliable, secure, and up-to-date. This proactive approach helps prevent disruptions, maintain data integrity, and support smooth business operations across all environments at MDTHINK.

20	Performance stability, Observability	Migrating from ForgeRock to Okta will enhance security and streamline user authentication processes, improving overall system access management. Additionally, ongoing database and tool operational support, including monitoring, backups, restores, patches, outage management, and data refreshes, ensures the system remains secure, reliable, and fully operational, minimizing disruptions and supporting efficient business operations.
21	DB and Tools Operational support	Performing operational support for databases and tools, including monitoring, backups, restores, patches, outage management, and data refreshes, is essential to ensuring the system's reliability, security, and continuous operation. This proactive maintenance helps minimize disruptions, maintain data integrity, and ensures smooth business processes across all environments.
22	Create a Data Quality Dashboard for CJAMS	Establishing a Data Quality Dashboard for CJAMS will provide clear insights into data accuracy by tracking key metrics such as validity, completeness, uniqueness, and rule compliance. This will help improve data integrity, ensure reliable reporting, and support better decision-making by clearly highlighting any data quality issues that need attention.
23	Self-Service - DHS support	Providing support to DHS through enablement dashboards will streamline access to critical information, empowering teams to make faster, data-driven decisions. This will improve service delivery and operational efficiency, ensuring that DHS staff can easily track and manage key metrics.
24	Self-Service for DHS CJAMS	Creating a KDE for CJAMS will enhance data accessibility and organization, enabling efficient management of critical case details like intake, health, education, and maltreatment information. This will improve data quality, support decision-making, and ensure a more streamlined process for managing case details.
25	Self-service PMO/INFRA/CJAMS/E&E /CSMS//Data Platform	Developing systems dashboards for CJAMS, CSMS, E&E, and MORA will provide real-time visibility into active client counts, case types, and referral flows. This will ensure accurate tracking, improve reporting, and help agencies better manage resources and case workflows, enhancing overall operational effectiveness.
26	Technical Upgrade	Supporting the ongoing MDM upgrade into 2025 Q2 ensures improved data accuracy, system efficiency, and seamless integration, driving better operations and decision-making.

27	EDW/Data Lake	Supporting onboarding activities for new agencies ensures smooth integration into the EDW/Data Lake, improving data accessibility, collaboration, and operational efficiency.
28	Data & Architecture Governance	Architecture Review Board, solution approach, implementation, estimate review, data quality review, and DG processes ensures effective project execution, improved data integrity, and alignment with business goals.
29	Data & Architecture Governance - Application Data Architecture and Design Assessment for DHS applications	Assessing the application data architecture and design for DHS and MDTHINK applications ensures optimized performance, improved data management, and seamless integration, supporting efficient operations and better service delivery.
30	SDP - Data Team's support for EE's M&O and initiatives	Enhancing R360 enterprise search capabilities and managing EDMS, the Data Portal, and onboarding initiatives will improve system efficiency, ensuring seamless operations and an optimal user experience through PI26Q4.
31	Data Team's support for CJAMS's M&O and initiatives	The Data Team provides essential support for SSA/CJAMS by enhancing database management and cloud services across various platforms. This includes managing tools like Informatica and Qlik for data integration and reporting, OpenSearch for cloud search capabilities, DocumentDB for document storage, Kinesis for real-time data streaming, and Glue for data transformation. Additionally, the team supports ongoing Master Data Management (MDM) efforts, maintains the Enterprise Data Management System (EDMS), manages the Data Portal, and oversees new onboarding initiatives. These efforts ensure seamless operations, improved data accessibility, and an enhanced user experience through Pl26Q4.
32	Data Team's support for CSMS's M&O and initiatives	The Data Team provides comprehensive support for CSA/CSMS to enhance database management and cloud services across various platforms. This includes managing tools like Informatica and Qlik for data integration and reporting, OpenSearch for cloud search capabilities, DocumentDB for document storage, Kinesis for real-time data streaming, and Glue for data transformation. Additionally, the team supports ongoing Master Data Management (MDM) efforts, facilitates R360 enterprise search capabilities, maintains the Enterprise Data Management System (EDMS), manages the Data Portal, and oversees new onboarding initiatives. These efforts ensure seamless operations, improve data accessibility, and enhance the user experience through Pl26Q4.

	Data Team's DB support for UB's initiative	The Data Team provides comprehensive support for UB to enhance database management and Enterprise Data Management System (EDMS) operations. This includes overseeing new onboarding initiatives, improving data accessibility, and ensuring seamless system integration. The team's efforts will enhance operational efficiency and support a better user experience through PI26Q4.
	Data Team's DB support for AHS's initiatives	The Data Team provides comprehensive support for AHS to enhance database management, Enterprise Data Management System (EDMS), Master Data Management (MDM), and Enterprise Search capabilities. This includes overseeing new onboarding initiatives to improve data accessibility and integration. These efforts ensure seamless operations, enhanced data quality, and a better user experience through PI26Q4.
	Data Team's support for MHC (HBX) M&O and initiatives	The Data Team supports the Maryland Health Connection (MHC) as part of its Maintenance and Operations (M&O) initiatives through Pl26Q4. This support focuses on data management, system maintenance, and improving operational processes to ensure seamless functionality. By enabling efficient data integration and maintaining high data integrity, the Data Team plays a crucial role in enhancing service delivery and user experience for MHC stakeholders.
Infra	astructure	
1	Infra - Agency Onboarding	 Developing standardized processes and automated systems for agency and application onboarding onto the MD THINK platform is essential to ensuring a secure, efficient, and scalable integration framework. By leveraging automation, this initiative reduces manual effort, minimizes onboarding time, and mitigates risks associated with configuration errors or security gaps. A structured approach enhances operational efficiency, ensures compliance with security and governance policies, and provides a seamless transition for new agencies and applications. This investment supports platform scalability, improves service delivery, and strengthens overall system integrity.
2	Infra - Unified Benefits	Providing implementation support for the Unified Benefit application is critical to ensuring secure, scalable, and efficient service delivery. This includes: • Overseeing Architecture Design: Ensuring the application's infrastructure is robust, scalable, and aligned with organizational goals while maintaining high availability and security.

		 Integrating Identity and Access Management (IAM): Ensuring secure user authentication and authorization, enforcing access controls, and safeguarding sensitive data throughout the system. Establishing and Maintaining Provisioning Environments (Development, Staging, and Production): Facilitating smooth testing, quality assurance, and deployment processes by creating dedicated environments for each stage, minimizing risks and optimizing performance. Managing Release Plan and Go-Live Support: Coordinating a structured release plan to ensure seamless deployment, providing post-deployment support to address any issues promptly, and ensuring operational stability post-launch. These efforts ensure that the Unified Benefit application is implemented effectively, minimizing risk and ensuring compliance with security and regulatory requirements, while providing high-quality service to end-users.
3	Infra - DHS-Apps Support Services	Ensuring the security, stability, and efficiency of critical DHS applications—CSMS, CJAMS, E&E, MORA, and AHS—is essential to maintaining operational continuity and meeting organizational objectives. This includes: Ongoing Support for User Onboarding and Configuration Synchronization: Facilitating seamless integration of users and ensuring consistent configuration across environments, enhancing system reliability and user experience. Post-Production Deployment Activities: Providing continuous support after production deployments to address issues promptly, ensuring minimal disruption to services. Diagnosing and Resolving Performance Issues: Actively identifying and resolving performance bottlenecks to ensure optimal system functionality and user satisfaction. Optimizing System Resources for Month-End Batch Processing: Managing system resources effectively to handle peak loads during critical batch processes, ensuring efficient operations without delays. Scaling Infrastructure as Required: Adjusting infrastructure capacity in response to operational demands, maintaining system reliability and performance during periods of increased load. These activities collectively contribute to maintaining the security, performance, and operational stability of the applications, ensuring that DHS can continue delivering vital services without disruption.

4	Infra - IAM Migration	 Identity and Access Management (IAM) systems provide secure access to the applications and data on the platform for internal and external users and the solution is being migrated to the recommended DoIT IAM platform. IAM migration to the DoIT platform and rollout for DHS agency applications such as E&E, CJAMS, CSMS, MORA, Cottage applications and Data platform applications, validation, load testing, user migration; Design and Implement SailPoint, User roles and access management replacement; and IAM systems design: Plan and provide design approach to replace and implement IAM infrastructure, software, and data components, coordinate implementation with MDH applications teams.
5	Infra - SDP-Apps Implementation	Providing infrastructure implementation and security integrations for the Shared Data Platform (SDP) and its applications is crucial to enhancing connectivity, security, and operational efficiency. This includes: • Enhanced Connectivity and Security Integrations: Implementing secure and reliable network infrastructure to facilitate seamless data flow while safeguarding sensitive information from unauthorized access. • Role-Based Access Control: Enforcing strict access policies to ensure that only authorized users can access specific data and applications, minimizing the risk of data breaches. • Operational Efficiency in Managing Data Processes: Streamlining the intake, storage, processing, and dissemination of data to ensure timely, accurate, and secure delivery to workers and stakeholders. • Change Management for Data Handling: Ensuring that all changes to data management processes are securely implemented, efficiently tracked, and aligned with organizational and regulatory requirements. These efforts contribute to a secure, efficient, and scalable Shared Data Platform that enhances accessibility and ensures the integrity and confidentiality of critical data throughout its lifecycle.
6	Infra - SDP-Apps Support Services	Providing ongoing support for the Shared Data Platform (SDP) applications—ECMS, R360, and DPSG that are utilized by over 8000 internal users—is critical for ensuring system performance, security, and compliance. This includes: • Application Monitoring: Continuously monitoring the performance and health of SDP applications to ensure operational continuity, identify potential issues, and proactively address performance concerns.

		 Patching and Assessments: Regularly applying security patches and conducting assessments to mitigate vulnerabilities, enhance system stability, and maintain compliance with security standards. User, Role, and Access Provisioning for DHS Application Users: Managing user access and roles to ensure proper authorization and access control, minimizing the risk of unauthorized access and data breaches while supporting operational needs. These support services ensure that the Shared Data Platform operates securely and efficiently, delivering reliable and compliant services to the DHS applications.
7	Infra - Shared Service Continuous Improvements	 Platform shared services provide capabilities across business units, development teams, and administrators for efficient and consistent governance and security within the cloud infrastructure. DevOps and infrastructure ongoing enhancements: Regular maintenance and upgrades of shared platform tools (e.g., DevOps tools, Batch Job Scheduler, Secure Managed File Transfer) to ensure optimal performance and seamless integration across the platform. Additionally, continuous improvements to the AWS microservices platform (EKS, ECS, API Gateway, Lambda, S3, CloudWatch) enhance the platform's ability to build, deploy, and manage AWS infrastructure at scale. Enhanced Code Quality and Security Vulnerability Checks: Implementation of automated tools to scan application code prior to deployment, ensuring the integrity and security of applications. This proactive measure mitigates risks by identifying vulnerabilities early in the development cycle, enhancing the overall security posture of the organization. Upgrades to Developer and Monitoring Tools: Upgrades to key developer and monitoring tools such as the Consul upgrade and automation of Red Hat Fuse 7.x to Apache Camel enhance the efficiency and functionality of the development process. Additionally, the IOG migration of monitoring tools for DHS applications ensures reliable monitoring at scale. Security Information and Event Management (SIEM) Support and Enhancements: Ongoing support and enhancements for SIEM onboarding, IAM (Internal Sailpoint) upgrades, and integration of security solutions like Zscaler Zero Trust VPN for DHS MD THINK. This ensures secure, compliant access to all platforms, while bolstering the organization's overall security operations. Alerting Capabilities and Application Monitoring: Enhancements to alerting mechanisms for all applications through New Relic provide proactive monitoring and fast response to potential issues, ensuring operational continuity. Integration of S

		 Sailpoint to manage access to both R360 and DPSG applications ensures seamless user authentication. Platform Operations and Long-Term Support: Ongoing support and continuous improvement of platform operations, including initiating MoUs to establish long-term support agreements, clearly defined roles, and responsibilities. This ensures sustainable platform growth, enhanced collaboration, and operational resilience over time.
8	Infra - Shared Service Implementation	 The implementation of additional shared services is pivotal in enhancing platform monitoring, observability, and automation in DevOps, while strengthening our security posture to ensure robust disaster recovery across the enterprise. Unified Solution for Metrics, Logs, and Traces: A common solution will be deployed to collect and centralize metrics, logs, and traces across all DHS, MDH, and MHBE applications on the MD Think enterprise. This integrated approach supports infrastructure, DevOps, and security functions, providing comprehensive visibility into application performance, resource utilization, and security compliance. Platform Automation for Agency Initiatives: Automation will be employed to streamline platform operations, aligning with the initiatives of DHS, MDH, and MHBE. By automating key processes, the platform can efficiently scale to meet the evolving needs of these agencies, ensuring a responsive and adaptive infrastructure. Multi-Region Disaster Recovery Implementation: The implementation of multi-region disaster recovery for DHS applications will ensure that critical services remain resilient and available in the event of regional disruptions. This will enhance operational continuity and mitigate risks associated with potential downtime, safeguarding both data and applications.
9	Infra - Core-Support Services	Ongoing platform monitoring, health checks, reporting, patching, upgrades and maintenance activities are critical to ensuring the reliability, security, and performance of the Shared Services Platform. • Proactive identification and resolution of potential system issues, timely application of platform patches to mitigate vulnerabilities, and continuous operational support to maintain service availability. • Jira queue monitoring for DHS application incidents and service requests enables efficient issue tracking and resolution, reducing downtime and improving user experience. These activities directly support business continuity, regulatory compliance, and the seamless operation of mission-critical services.

10	Security Governance - Governance, Risk & Compliance	 Effective security governance requires robust support for key Governance, Risk, and Compliance (GRC) functions to ensure regulatory adherence, risk mitigation, and operational efficiency. This includes: Change Management Function: Ensuring security and compliance controls are maintained during system modifications. Policy Management Function: Developing, updating, and enforcing security policies in alignment with industry standards. Quality Management Function: Implementing best practices to enhance security program effectiveness. MDTHINK Tenant Partners Customer Service Function: Providing security-related support and guidance to platform stakeholders. Assessment & Authorization Function: Managing security assessments and system authorizations to maintain compliance. Reporting Management Function: Delivering security reports to track risks, compliance status, and mitigation efforts. Program Management Function: Overseeing security initiatives to align with organizational goals. Contract Management Function: Managing MOUs and Data Sharing Agreements to ensure secure collaboration. POA&M Management Function: Tracking and remediating security vulnerabilities to maintain risk governance. Procurement Management Function: Ensuring security considerations are integrated into technology acquisitions. These functions collectively strengthen security governance, enhance risk management, and
11	Security Governance - Security Engineering	 support compliance with federal and state regulations. Enhancing security governance through engineering support for critical cybersecurity tools is essential to strengthening the organization's security posture and regulatory compliance. Managing and optimizing the Veracode tool for continuous web application security scanning, ensuring vulnerabilities are identified and remediated in alignment with secure coding practices. Tanium supports the automation of Linux patching, reducing manual effort and improving compliance with patch management policies. Splunk Enterprise Security optimization enhances real-time threat detection and incident response capabilities.

		 Jira/VI integration streamlines security operations and governance workflows. Procurement of the Forensic Toolkit strengthens investigative capabilities for incident analysis. Deployment of the Picus penetration testing tool ensures proactive assessment of infrastructure security, mitigating risks before exploitation can occur. Migrate to the G5 suite. This includes: Purview (Data Governance, GRC, eDiscovery) Defender for Cloud Apps PowerBI EntraID Intune Data Loss Prevention (DLP) These efforts collectively support a comprehensive security governance framework that aligns with industry best practices and state and federal regulatory requirements.
12	Security Governance - Security Operations	 Security operations are fundamental to ensuring robust defense mechanisms, compliance, and proactive risk management. This includes: Security Operational Support for IT Helpdesk: Providing essential security assistance to the helpdesk, ensuring timely resolution of security-related incidents and facilitating ongoing support for secure operations. Review, Support, and Approval of Architecture Review Board Requests: Ensuring that proposed changes and new architecture designs align with security best practices and regulatory requirements, and reviewing their impact on the organization's security posture. Review, Support, and Approval of Jira tickets such as, Change Requests (CR), Long Term Services and Supports (LTSS), Platform Support (PS), etc. Enterprise Security and Vulnerability Management: Overseeing security measures to identify, assess, and mitigate vulnerabilities across the enterprise, ensuring compliance with security policies and standards. DLP Alerts and Administrative Monitoring: Proactively managing and responding to Data Loss Prevention (DLP) alerts to safeguard sensitive information and prevent data breaches. Compliance to applicable Federal, State, Agency and Departmental regulations and policies through Assessments and Audits. Vulnerability and Patch management. Cyber incident response. Cyber risk analysis and mitigation/remediation. Conducting cyber risk assessments and penetration testing.

		Together, these functions enhance the organization's ability to detect, manage, and respond to security threats while maintaining a strong compliance posture.
13	Infra - IT-Core Enhancements	 Enhancing IT-Core infrastructure through the design and implementation of an on-premise domain is critical for improving security and managing developer-assigned devices effectively. Strengthens data protection by enforcing centralized identity and access management, reducing the risk of unauthorized access to sensitive applications and information. Enhances endpoint security, streamlines policy enforcement, and provides greater administrative control over device configurations, ensuring compliance with security standards while supporting a more secure and efficient development environment.
14	Infra - IT-Core-Support Services	 IT-Core support services are integral to maintaining a secure, compliant, and efficient IT environment for state employees. This includes: IT Service Operational Support and Incident Management: Ensuring prompt and effective resolution of IT service issues, minimizing downtime, and maintaining business continuity. Salesforce Support and Administration: Facilitating smooth onboarding and offboarding processes, ensuring secure and efficient user access management. Hardware Infrastructure Upgrades for State Employees: Enhancing system performance and ensuring that state employees have reliable and up-to-date technology to support their work. Support for OTH: Providing ongoing operational support for other technical systems and platforms, ensuring consistent performance. EMC Support, Monitoring, and Compliance: Utilizing tools like Tanium, BitLocker, Zscaler, and DLP for continuous monitoring and compliance to protect sensitive data, mitigate threats, and meet regulatory requirements. Onboarding/Offboarding Account Monitoring and Management: Ensuring secure and compliant user access to systems, reducing risk by properly managing account lifecycles. These services collectively reinforce operational resilience, enhance security controls, and support the seamless delivery of critical services to state employees.

Appendix B - CMS Communication on Certification of E&E (June 24, 2024)

MD E&E No Wrong Door Certification Meeting to Discuss CMS Expectations

Haire, Peggy (CMS/CMCS) <PEGGY.HAIRE@cms.hhs.gov> Wed, Jun 5, 2024 at 12:29 PM To: "Johnson, Alejandra (CMS/CMCS)" <Alejandra.Johnson@cms.hhs.gov>, Phuong Ngo <pngo@mitre.org>, Tammy Tober <TTOBER@mitre.org>, Ernest Mensah <emensah@mitre.org>, Aliza Monique Auces <aauces@mitre.org>, "Gabriyelov, Eugene (CMS/CMCS)" <eugene.gabriyelov@cms.hhs.gov>, "Lew, Terry (CMS/CMCS)" <Terrence.Lew@cms.hhs.gov>, Tamara Cannida-Gunter -MHBE- <tamara.cannida-gunter@maryland.gov>, Feyella Toney -MDH- <feyella.toney@maryland.gov>, "Terry A. Fahey -MDH-" <terry.fahey@maryland.gov>, Venkat Koshanam -MHBE- <venkat.koshanam@maryland.gov>, Michele Eberle <michele.eberle@maryland.gov>, "wonda.oliver@maryland.gov" <wonda.oliver@maryland.gov>, Pat Mcloughlin -GOV- <pat.mcloughlin@maryland.gov>, Vivek Chandroth -DHS- MDTHINK <vivek.chandroth@maryland.gov>, Patrick O'Malley -DHS- SSC <patrick.omalley1@maryland.gov>, Suresh Nair -DHS- MDTHINK <suresh.nair1@maryland.gov>, "jennifer.walczyk@maryland.gov>, "Ryan B. Moran -MDH-" <ryan.moran@maryland.gov>, Clint Hackett -MDH- <cli>clint.hackett@maryland.gov>, "debbie.ruppert@maryland.gov" <debbie.ruppert@maryland.gov>, Amy Adams -MDH- <amy.adams@maryland.gov>

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The Maryland Department of Health (MDH), the Maryland Health Benefit Exchange (MHBE), the Maryland Department of Human Services (DHS) has been successful in establishing the "No Wrong Door" approach for eligibility and enrollment (E&E) for Medicaid services throughout the state. The state established a new platform on which to host the new E&E system, MD THINK.

The completion of these efforts occurred in October of 2022. At this time, CMS needs to certify this new E&E system.

Please review the attached sub-regulatory guidelines provided regarding certification of Medicaid Enterprise Systems (MES)-State Medicaid Director letter 22-001.

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DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12



SMD # 22-001

RE: Updated Medicaid Information Technology Systems Guidance: Streamlined Modular Certification for Medicaid Enterprise Systems

April 14, 2022

Dear State Medicaid Director:

This State Medicaid Director Letter (SMDL) provides updated Medicaid Information Technology (IT) project guidance and discusses requirements for states as the Centers for Medicare & Medicaid Services (CMS) continues to streamline the certification approach and move toward Outcomes-Based Certification (OBC) for Medicaid Enterprise Systems (MES). This SMDL introduces a Streamlined Modular Certification (SMC) process and, effective immediately, sunsets the existing processes known as the Medicaid Enterprise Certification Toolkit (MECT) and the Medicaid Eligibility and Enrollment Toolkit (MEET).

Pursuant to 42 CFR § 433.116, Federal Financial Participation (FFP) is available at 75 percent of expenditures for operation of a Mechanized Claims Processing and Information Retrieval Systems (MCPIRS) approved by CMS. To obtain approval for any MES or MES component going forward, states should follow the guidance for the streamlined modular certification process described herein, including the supporting Streamlined Modular Certification (SMC) for MES Guidance (Certification Guidance) document. The Certification Guidance document provides a detailed description of the certification process and the regulatory citations for all certification requirements. States should not use MECT and MEET, which are discussed in the State Medicaid Director Letter released August 16, 2016, ¹ for MES IT projects initiated after the publication date of this SMDL.

CMS has been working with states to test and refine proposed processes and tools while incrementally expanding the use of OBC across the entire MES. CMS views Streamlined Modular Certification as the next interim step in that evolutionary process that will promote effective stewardship of Medicaid funding, well into the future.

Overview

In an effort to provide consistency and accountability in CMS's certification processes, this SMDL establishes a MES certification process for each modular component system of the MES. In general, each MES module is an integral component of a state's mechanized claims processing and information retrieval system (MCPIRS) (as defined at 42 C.F.R. § 433.111(b)). The MES represents a system composed of the sum total of MES modules, which are the discrete Medicaid IT systems or services used by the Medicaid agency to manage, monitor, and administer the state's Medicaid program. The MES modules that support a state's Medicaid operations typically include the modules described in Table 1 and their general functions (non-exhaustive list):

¹ https://www.medicaid.gov/federal-policy-guidance/downloads/smd16010.pdf.

Table 1: Examples of MES Modules

Module (Typical Function)

Eligibility and Enrollment (including online application, verification, and renewal processing)

Claims Processing (including validations, prior authorizations, and submission status)

Financial Management (including provider payments, capitation payments, value-based payments, and drug rebates)

Decision Support/Data Warehouse (including data analytics and reporting)

Encounter Processing (including encounter data reporting, and calculation of capitation rates)

Long-term Services and Supports (including home and community-based services (HCBS) waiver enrollment, person-centered plans, and grievance tracking)

Member Management (including managed care enrollment, enrollee information)

Prescription Drug Monitoring Program (including prescribing history, and provider workflow integration)

Pharmacy Benefit Management (including pharmacy claims, manufacturer rebates, and prior authorization)

Provider Management (including provider screening and enrollment, provider communications, and network adequacy)

Third-party Liability (including collection of information, electronic data exchanges, and avoidance and recovery)

Program Integrity (including claims validation, recoupments, improper payment recoveries)

Health Information Exchange (including patient identification, data standards and security)

For all systems that comprise the MES, the SMC approach is designed to:

- Demonstrate measurable improvements to a state's Medicaid program resulting from the delivery of a new module or enhancement to an existing module;
- Leverage data and testing to inform CMS's assessment of the success of delivered systems and system investments, and inform decisions about future MES investments;
- Enable operational data reporting for system performance, operations monitoring, and functionality to demonstrate the continuous achievement of required outcomes measures;
- Reduce burden on states and CMS during the certification process without compromising CMS's responsibility to ensure that federally supported systems satisfy all applicable statutory and regulatory requirements; and
- Advance incrementally toward a fully realized, OBC process for the entirety of the MES.

Background

Under section 1903(a)(3)(A)(i) of the Social Security Act (the Act) and 42 C.F.R. § 433.112, states are eligible to receive enhanced 90 percent FFP for their expenditures attributable to the design, development, or installation (DDI) of MCPIRS.² For expenditures for DDI activities for an MES module to qualify for this enhanced match, all applicable requirements, including the conditions at

² Section 1903(a)(3)(A)(i) also specifies that such systems are those that "the Secretary determines are likely to provide more efficient, economical, and efficient operation of the plan. . .".

42 C.F.R § 433.112 and 45 C.F.R. part 95, subpart F, must be met. After the system has been in production for at least six months, states may request system certification by CMS in order to be eligible to receive enhanced 75 percent FFP for operations. After a system is certified, states may submit an Operations Advanced Planning Document (OAPD) requesting approval for 75 percent operations funding on the basis of successful certification, as provided under section 1903(a)(3)(B) of the Act and 42 C.F.R. § 433.116, as long as required conditions continue to be met, as described in 42 C.F.R. § 433.119.

Elements of Streamlined Modular Certification

Streamlining the modular certification process depends on an engagement model that a) relies on a close, ongoing partnership between CMS and the state throughout the IT investment lifecycle, and b) involves regular discussions and check-ins on state progress toward achieving shared goals for the project. In piloting this model for Electronic Visit Verification system certification, both states and CMS found tremendous value in ongoing collaboration. CMS will continue working with states to enhance the ongoing partnership model on which OBC depends. States should regularly engage with their CMS State Officers throughout the IT investment lifecycle, especially as states begin to plan their IT investments.

The streamlined modular certification process for MES is structured around the following three elements:

- Conditions for Enhanced Federal Matching As a condition of receiving enhanced federal matching funds for state expenditures on MES as described above, states must ensure that the system complies with all of the conditions for enhanced DDI matching as provided in 42 C.F.R. § 433.112 and that the system remains compliant with federal Medicaid requirements for enhanced operations matching once it is in operation as provided in 42 C.F.R. § 433.116.
- Outcomes Outcomes describe the measurable improvements to a state's Medicaid program that should result from the delivery of a new module or enhancement to an existing module. Outcomes should support Medicaid program priorities, be directly enabled by the state's IT project, and be clearly stated in the Advance Planning Document (APD) as required under 45 C.F.R. part 95, subpart F. CMS will work closely with the state to identify and ensure that intended project outcomes are achieved. CMS encourages states to develop measurable, achievable outcomes that reflect the MES project's goals.

The SMC process identifies two types of outcomes, CMS-Required and State-Specific:

- CMS-required outcomes are based on statutory or regulatory requirements and provide a baseline for what is required of an MES, including its contribution to the efficient, economical, and effective administration of the state's Medicaid program.
- o State-specific outcomes reflect the unique circumstances or characteristics of the state or territory and its Medicaid program and focus on improvements to the

program and its administration that are not specifically addressed by the CMS-required outcomes.

• Metrics – Metrics provide evidence about whether the intended outcomes are achieved through the delivery of a new module or enhancement to an existing module. States must submit operational reports to CMS containing metrics annually in support of a state's Operational Advanced Planning Documents (OAPD) request. CMS may determine the need for some metrics requiring states to report more frequently; this will be coordinated with the state through the State Officer. In accordance with 42 C.F.R. §§ 433.112(b)(15) and 433.116(b), (c), and (i), states must be capable of producing data, reports, and performance information from and about their MES modules to facilitate evaluation, continuous improvement in business operations, and transparency and accountability, as a condition for receiving enhanced federal matching for MES expenditures. Metrics reporting enhances transparency and accountability of IT solutions, to help ensure the MES and its modules are meeting statutory and regulatory requirements, as well as the state's program goals. State reporting also gives states and CMS early and ongoing insight into program evaluation and opportunities for continuous improvement.

States will be required to provide the following data, reports, and performance information, pursuant to 42 C.F.R. §§ 433.112(b)(15) and 433.116(b), (c), and (i), as applicable. This documentation will help demonstrate whether conditions for enhanced federal matching are met, intended outcomes are being achieved, and metrics are being successfully collected and reported.

- Evidence to support production-ready status and outcome achievement may include, but is not limited to:
 - o Demonstrations of system functionality;
 - o Testing results;
 - o Production reports; and
 - Plans for organizational change management (e.g., managing stakeholders and users, training, help desk).

States should provide the evidence they use to determine their module is production-ready (that is, ready to be put into operation; this could include test results and other data illustrating the module's capability of achieving intended outcomes). States should also demonstrate that their operations staff are implementation-ready (e.g., documentation of trainings and other relevant organizational change management activities that have been conducted and/or are ongoing) to support the successful delivery of the module and ongoing operations. In addition, once the module is in operations, states should provide the evidence that they continue to comply with applicable regulations and meet programmatic outcomes.

• Evidence from the metrics that are collected and reported from the state will be evaluated by CMS to determine whether the system is achieving the identified outcomes. As required by 42 C.F.R. §§ 433.112(b)(15) and 433.116(b), (c), and (i), throughout the IT investment lifecycle, states will continue reporting on metrics to ensure that solutions meet regulatory requirements and are measurably supporting desired program outcomes. CMS State Officers

will collaborate with states to conduct reviews and assessments based on metric reports, helping to ensure continued success and improvement of MES solutions. CMS will coordinate with states to use existing data sources and reporting systems, such as Transformed Medicaid Statistical Information System (T-MSIS) and Medicaid and CHIP Performance Indicators,³ to avoid redundancy and minimize administrative burden whenever possible.

In addition, CMS has found that properly tested systems – and, in particular, those tested by actual users throughout the entire development process – have a better chance of successful implementation. Therefore, CMS is putting an emphasis on testing in the certification process. The *Testing Guidance Framework* document, which accompanies this SMDL within the appendices, offers specific MES testing expectations and recommendations. CMS plans to release additional materials describing updated software development best practices in the future, which CMS anticipates states will incorporate into their future MES development efforts.

Operational Reporting

To efficiently demonstrate ongoing, successful system operations, states must submit operational reports to CMS containing data and/or other evidence that modules are meeting all applicable requirements for the state's claimed federal matching funds. States should submit these reports annually in support of the OAPD request; however, more frequent reporting on key operational metrics may be necessary. CMS may require more frequent reporting for key operational metrics such as timely eligibility determinations or timely claims payment, wherein early detection for problems is critical. This is especially critical for COVID unwinding, when major system changes and eligibility redeterminations are occurring in tandem. State operational reports should include metric data corresponding to the agreed-upon intended outcomes for each applicable MES module. In addition to operational reports, states must submit an OAPD per 45 C.F.R. §§ 95.610(c)(3) and 96.611(c), for enhanced funding authorized through certification at 42 C.F.R. § 433.116 for any module or system for which the state requests enhanced federal matching funds for the state's expenditures on operations of an existing system.

States should coordinate with their CMS State Officers to determine which modules and metrics may need more frequent reporting. The operational reports should include the same level of streamlined information described above, including compliance with the conditions for enhanced funding required under 42 C.F.R. §§ 433.112 and 433.116, outcomes, metrics, and related supporting evidence.

States should look to standardize frequency of reported metrics over time. States should submit all data in table form, with numerators and denominators present, that can be tracked longitudinally with new columns added each reporting period and which explains contextual information about the metric and data used in the calculation. CMS will leverage an online repository through GitHub⁴ to

³ See the CMCS Informational Bulletin dated January 24, 2013, for information on Performance Indicators for Medicaid and CHIP Business Functions, available at: https://www.medicaid.gov/Federal-Policy-Guidance/downloads/CIB-01-24-13.pdf

⁴ GitHub is a hosting platform for version control and collaboration. No coding is necessary; however, users must register for a GitHub.com account in order to access the CMS Certification Repository.

Page 6 – State Medicaid Director

provide an example template for operational reporting, along with additional certification materials. More information on use of GitHub is provide in this letter below.

For previously certified systems, those operating as a system of record, and/or those for which the state is claiming enhanced federal matching funds for DDI or operations, states should coordinate with their respective CMS State Officers to agree upon an approach and timeline to begin operational reporting.

Regulations at 42 C.F.R. § 433.119 indicate that CMS may periodically review and reapprove each system initially approved under 42 C.F.R.§ 433.114 for 75 percent enhanced federal matching for state expenditures on the system's ongoing operations. CMS may review an entire system's or module's operation or focus the review on the operation of limited parts of the system or module. However, at a minimum, CMS reviews under 42 C.F.R. § 433.119 will look to validate that the system is operating in alignment with all applicable regulatory requirements, and may give particular attention to regulatory reapproval conditions on which the system or module demonstrated weakness in previous reviews. In general, the reapproval process will be consistent with the streamlined modular certification process outlined in this SMDL.

Transition

Replacing the MECT and MEET

The MECT was first implemented in 2007 through CMS guidance, which was updated in 2016⁵ and contains business areas relevant to the Medicaid Management Information System (MMIS) functions to process claims for services furnished to beneficiaries and to perform other functions necessary for the Medicaid program's economic and efficient operations, management, monitoring, and administration. CMS guidance on MECT was also designed to assist states as they plan, develop, test, and implement their MMIS. In 2017, CMS issued the MEET to assist states in streamlining and modernizing their Eligibility and Enrollment (E&E) systems.⁶

Since the release of the MECT and MEET, feedback to CMS provided by states through system reviews, certifications, and other channels have indicated that the MECT and MEET have been overly burdensome for states. CMS learned that MECT and MEET lack the flexibility states need to best implement systems to support program priorities, and are not adequately focused on how the projects will improve a state's Medicaid program. As a result of this state feedback, as well as lessons learned from the OBC experience (which significantly reduced burden for states and CMS), similar lessons learned from state pilots, and other CMS experience, CMS will no longer be relying on the MECT and MEET frameworks for system certification.⁷

With the release of the updated Certification Guidance accompanying this SMDL replacing the

⁵ https://www.medicaid.gov/medicaid/data-systems/medicaid-enterprise-certification-toolkit/index.html.

⁶ https://www.medicaid.gov/medicaid/data-systems/medicaid-eligibility-enrollment-toolkit/index.html.

⁷ Based on evidence gathered during a pilot test of the initial OBC process, the pilot state saw an 87% burden reduction in terms of staff time for certification. CMS anticipates that the SMC process will see similar levels of burden reduction.

MECT and MEET, CMS and states will begin transitioning to the Streamlined Modular Certification process for current and future MES projects. CMS understands and acknowledges the MES environment is not static. In addition to the activities necessary to support responding to the current public health emergency (PHE), states often having several competing system projects and program priorities. In order to minimize impact, states should work with their CMS State Officers to determine the best path forward and smoothest transition process. States that are significantly far along in their preparations for module certification under the MECT or MEET framework may elect to proceed with certification under the relevant legacy certification toolkit. However, states that elect to do so will also be expected to produce and submit operational reports for their systems, as discussed in this SMDL and outlined in the updated Certification Guidance.

This updated Certification Guidance contains several key elements that were not present in the MECT and MEET. These elements include outcomes, metrics, and operational reporting requirements (including indicators of project health). In addition, milestone reviews under streamlined modular certification differ substantially from those required under the legacy toolkits. As such, states should consider these key elements and differences in transition planning efforts. States should work with their CMS State Officers to coordinate the transition to streamlined modular certification.

Certification Guidance

The Certification Guidance accompanying this SMDL is a critical component in further streamlining and improving the certification process and promoting better outcomes for state and federal investments in each state's MES. It reflects the reduced burden and increased flexibility that CMS seeks to foster in collaboration with states, while ensuring states meet all applicable federal requirements and are best positioned to achieve state-specific intended outcomes for these systems and modules. Adherence to these improved processes will not only help ensure that state and federal investments are worthwhile, but also that Medicaid beneficiaries and other stakeholders benefit from the efficient, economical, and effective administration of the state's Medicaid program through a modern and highly capable MES.

The full Streamlined Modular Certification (SMC) Guidance can be found on Medicaid.gov at the following URL:

https://www.medicaid.gov/medicaid/data-systems/certification/streamlined-modular-certification/index.html

As shown in Figure 1, engagement during each phase of the IT investment lifecycle might include the following touchpoints:

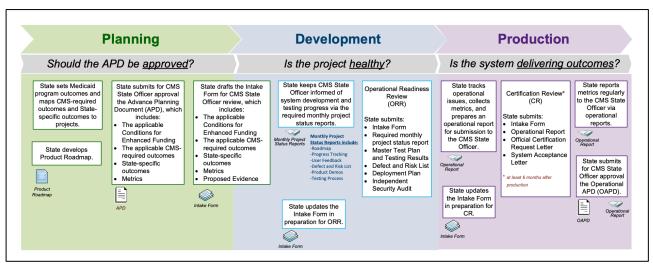


Figure 1. Streamlined Modular Certification Process Timeline

CMS Certification Repository

Because intended outcomes and metrics are likely to evolve over time, CMS will leverage a Certification Repository on GitHub⁸ for additional materials, including identifying the specific outcomes derived from regulatory requirements, state-proposed outcomes, and metrics.

The CMS Certification Repository on GitHub will provide a collaborative space where states can learn, share, and contribute information about the MES Certification process and its related documentation. CMS created this repository for CMS, states, and vendors to:

- Access current information about CMS-required outcomes and recommended metrics;
- Create and contribute to a community of state-specific outcomes and metrics; and
- Access examples of well-defined outcomes and metrics.

States can visit the Certification Repository on GitHub to access resources such as the Certification Guidance, information about the regulatory conditions for enhanced funding, outcomes, metrics, and related supporting evidence/examples to help inform how states approach their IT investment planning, development, operations, and certification.

Please access the CMS Certification Repository on GitHub at: https://cmsgov.github.io/CMCS-DSG-DSS-Certification/

Requesting A Certification Review

To request a Certification Review (CR), states must submit a formal Certification Request Letter. The letter should include:

⁸ GitHub is a hosting platform for version control and collaboration. No coding is necessary; however, users must register for a GitHub.com account in order to access the CMS Certification Repository.

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- Date at which the state formally began operating the system as the system of record,
- Retroactive certification date (date back to which the state is requesting the system be certified), and
- Proposed date for CMS to begin its certification review.

The CR letter should be accompanied by evidence that demonstrates the system is properly prepared for the certification review process to begin. To demonstrate the system is properly prepared, the state should have:

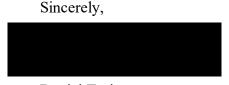
- Established a document repository that has been successfully tested by the CMS State Officer (the default repository is CMS Box),
- Submitted a copy of the System Acceptance Letter (the state's letter to the vendor contractor or state development team accepting the system/modules(s)),
- Submitted all required operational metrics related to the module, beginning from the time
 the system became operational as the system of record and up until the end of the most
 recent quarter, and
- Demonstrated that the system/module for which the state is requesting certification complies with most current T-MSIS requirements, when applicable.

The CR will also focus on system demonstrations, review of testing results, and outcomes and metrics. Outcomes and metrics, along with any underlying data and explanatory or contextual information, should be sent to the CMS State Officer and to MES@cms.hhs.gov. The state and CMS State Officer will agree upon the format for reporting. In the future, CMS may issue a template for reporting on metrics. CMS may send questions about the metrics to the state prior to beginning or completing the CR. If after the review it is determined the States system does not meet certification requirements, CMS will work with the state on remediation of the findings and next steps, and will coordinate with the state to determine any impact to the certification decision. This does not constitute a change from how such instances have been handled under MEET & MECT.

CMS continues to work with states to gain more experience and inform OBC development. States are encouraged to discuss MES plans with their CMS State Officers, who can provide state-specific advice for the SMC process. As this process evolves, CMS will continue to provide guidance and work collaboratively with states.

Additional Information

For additional information about this SMDL, please contact Edward Dolly, Director Division of State Systems at Edward.Dolly@cms.hhs.gov.



Daniel Tsai Deputy Administrator and Director

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