



Center for Medicaid and CHIP Services

CMCS Informational Bulletin

DATE: November 15, 2011

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Center for Medicaid and CHIP Services (CMCS)

SUBJECT: Medicaid Information Technology Architecture Guidance – Draft Version 3.0

This informational bulletin announces the release of the Medicaid Information Technology Architecture (MITA) Framework, draft Version 3.0, for public comment through December 16.

Background

MITA is an evolving CMS initiative that fosters an integrated business, information and technological approach to building management systems that are client-based and capable of sharing information across organizational silos based upon nationally recognized standards.

MITA provides a common framework for all Medicaid stakeholders to focus on opportunities to build common and shared services by decoupling legacy systems and processes, and liberating data previously stored and contained in inaccessible silos. By providing such a framework for the Medicaid enterprise to plan, architect, engineer, and implement new and changing business requirements, the effort to modernize Medicaid Information Technology (IT) systems and processes becomes more stable, uniform, and lowers the risk of poor implementation.

Major Changes to MITA

This version takes into account the new legislative requirements outlined in the Health Information Technology for Economic and Clinical Health Act, the Children’s Health Insurance Program Reauthorization Act, and the Affordable Care Act, all of which went into effect since MITA 2.0 was published in 2006. In addition, the draft MITA 3.0 reflects the use of newer technologies such as cloud computing and our recent policies described in *IT Guidance 2.0*. A new section to the Framework has been added to assist states in the preparation of the MITA State Self Assessment, as well as Advanced Planning Documents that are used by states to obtain Federal Financial Participation to match state expenditures on eligible Medicaid systems. Lastly, the Framework is consistent with our final rule entitled, *Medicaid Program; Federal Funding for Medicaid Eligibility Determination and Enrollment Activities* (Federal Register Vol. 76, No. 75) effective April 19, 2011, which provides states with the authority to receive

enhanced Federal funding in order to achieve a higher degree of interaction and interoperability across the Medicaid enterprise and the Health Insurance Exchanges.

Because the Final Rule associated with the requirements for Health Insurance Exchanges and Medicaid Eligibility and Enrollment Systems is still under development in response to comments we have received on our Notice of Proposed Rule Making, we are not, at this time, updating MITA 3.0 to include member eligibility and enrollment business processes or capability matrices. We will however, update MITA 3.0 to include this information once final rules are promulgated for the Exchanges and Medicaid eligibility changes.

Request for Comments on the Draft

Individuals who wish to review the draft MITA 3.0 Framework should contact Ms. Leslie Flaherty for an orientation guide detailing how to access the websites and detailing how to submit comments at leslie.flaherty@cms.hhs.gov. Comments will be accepted through December 16.

The final MITA 3.0 will be released in early 2012 following consideration of the comments, and we look forward to continuing our work together to improve systems development across the Medicaid enterprise. We also anticipate holding future orientation conference calls on MITA 3.0 to ensure everyone has a clear understanding of what it is and how it can benefit Medicaid programs across the country.

I hope you find this information helpful. Should you have questions regarding MITA 3.0, or the information contained herein, please feel free to contact Rick Friedman, Director, or Donna Schmidt, Deputy Director, of our Division of State Systems at 410-786-4451 or 410-786-5532, or by email addressed to either richard.friedman@cms.hhs.gov or donna.schmidt@cms.hhs.gov.