

Consortium Driven Efforts To Enhance IIS Funding and Sustainability



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HISTORY BEHIND THE FIRST SUSTAINABILITY SUMMIT & TOOLKIT

THE CONSORTIUM UNITES

- For the past several years, **Immunization Programs have experienced a reduction of key funding sources.**
- These resource reductions are occurring during a time when the **demand for access to Immunization Program resources and data are at an all-time high.**
■ ■ ■ ■ ■ ■
- **Enhancing interoperability** through queries and bidirectionality with **legacy IIS's** creates additional challenges.
- Washington had successfully procured CMS Match-Funds, but **success by others was scarce and there were numerous questions.**

OBJECTIVES OF THE SUMMIT

What we Aimed to Accomplish

1

DEFINE MATCH FUNDING OPTIONS

Define the different Medicaid match alternatives (90/10, 75/25 and 50/50), the guidelines for applying, and the funding use requirements for each.

2

SHARED EXPERIENCE

Share experiences each state has with securing Medicaid match funding.

3

USES OF FUNDING

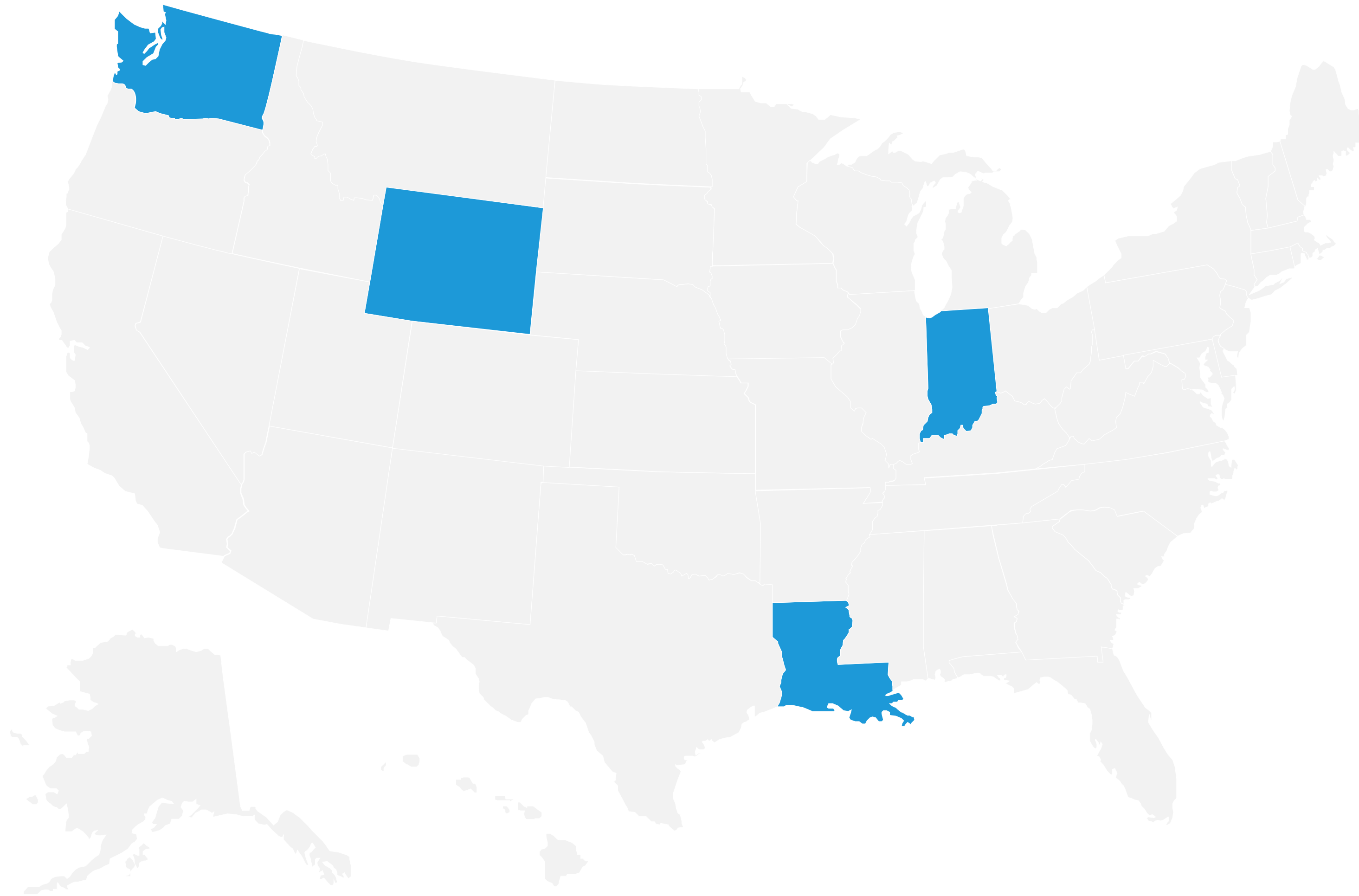
Discuss opportunities for states to collaborate on projects funded through their collective Medicaid match grants.

4

TOOL KIT CREATION

Create a document that captures the content of the Summit for the purposes of sharing with the participating states, as well as with other state Immunization Programs across the country.

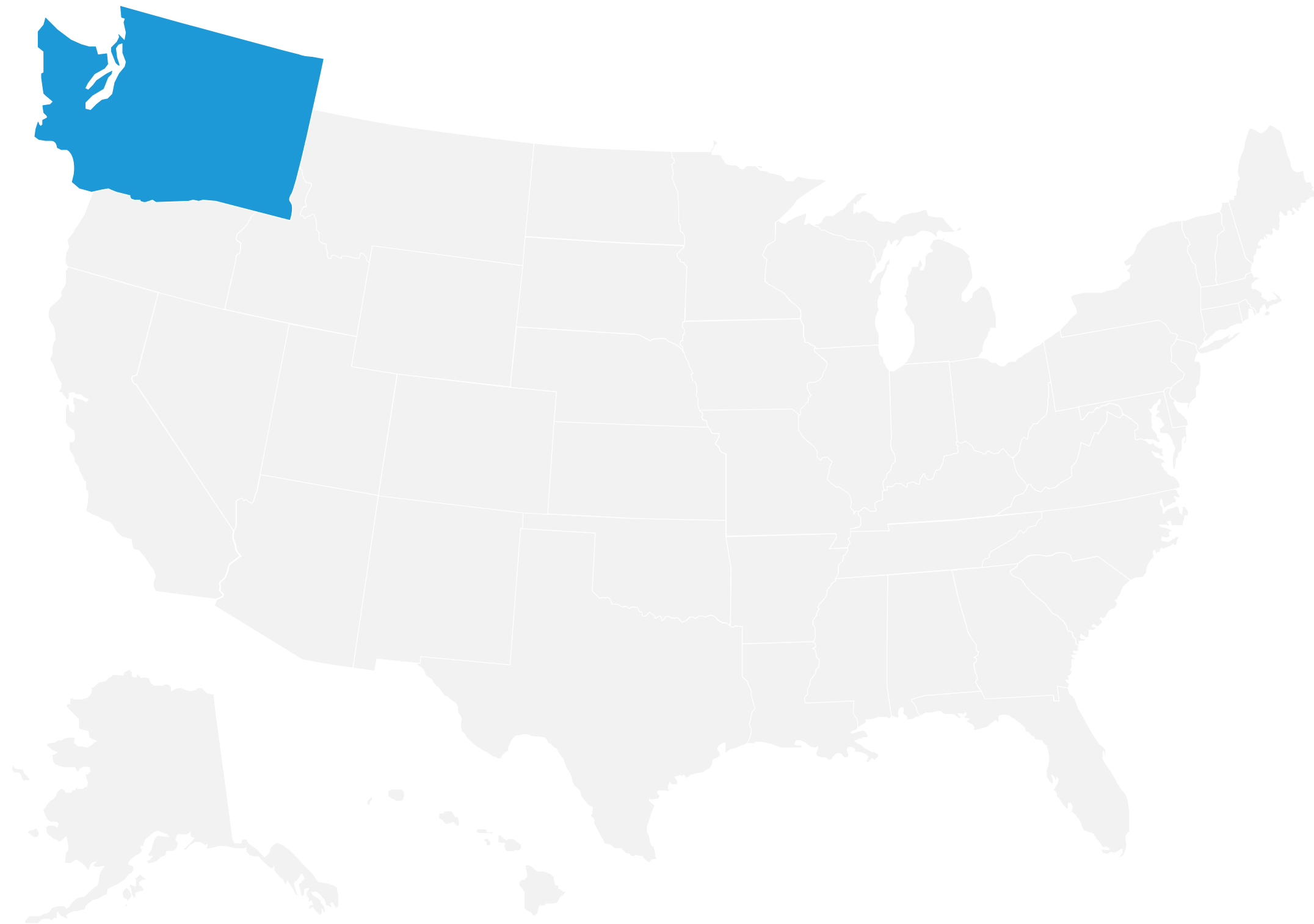
Who Participated in the Summit



March 20 – 22, 2018

STC states came together for a collaborative effort in order to provide the consortium a road-map of how to successfully obtain Medicaid Match Funds.

Washington – Match Funding Overview

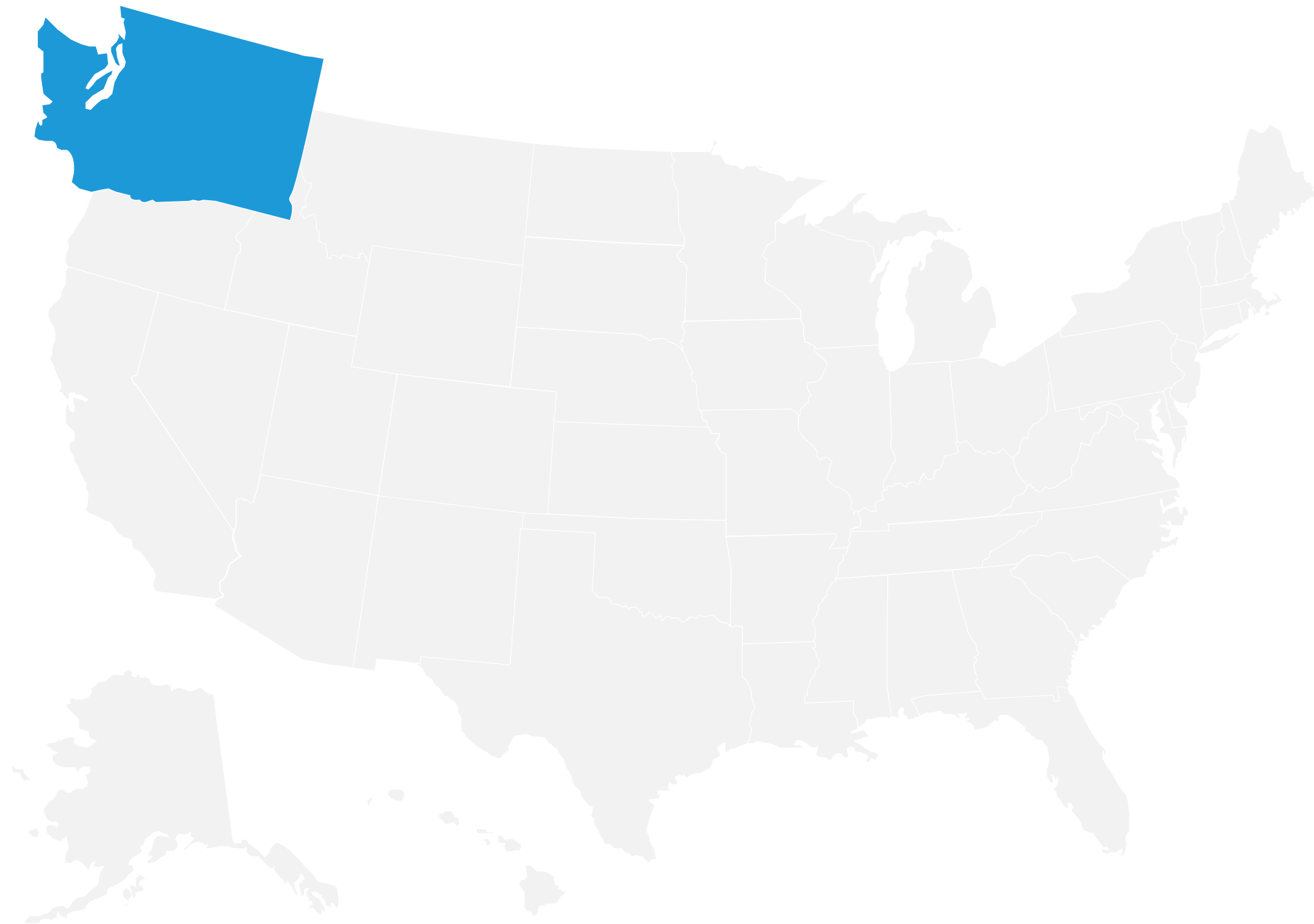


Had Obtained 90/10 & 50/50

Washington was awarded 90/10 match funding and has a project underway to onboard all the state's providers to their IIS via the state's HIE. Washington had also been receiving 50/50

Medicaid match funding for several years to supplement their IIS budget.

Washington – Match Funding Overview



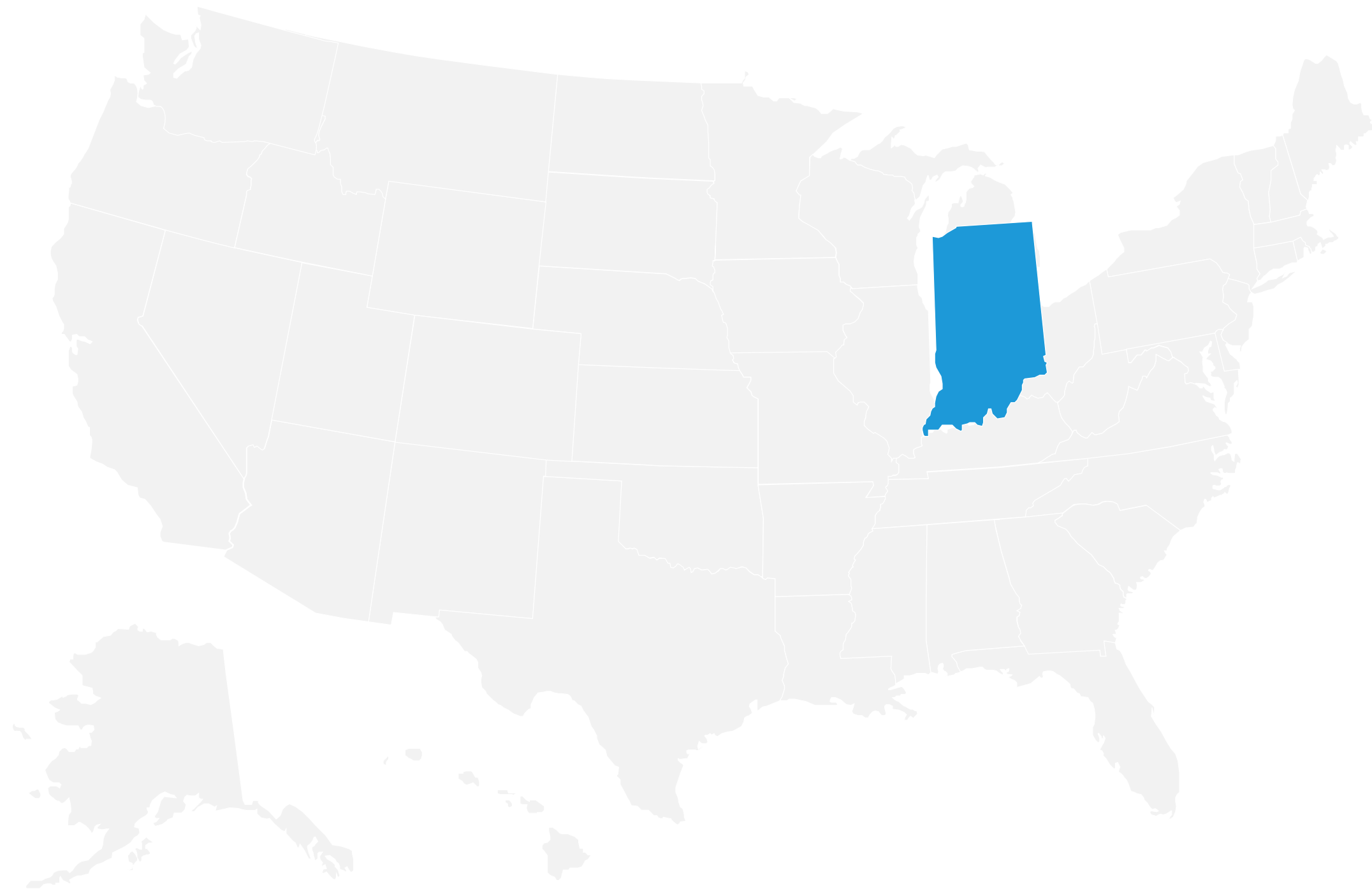
Use of 90/10 Funding

Onboarding Provider HL7
Interfaces through the WA HIE

Uses 50/50 Funding

- Software Licensing
- Help Desk Contracting
- Provider Education
- IWeb Modules (Health Promotions)

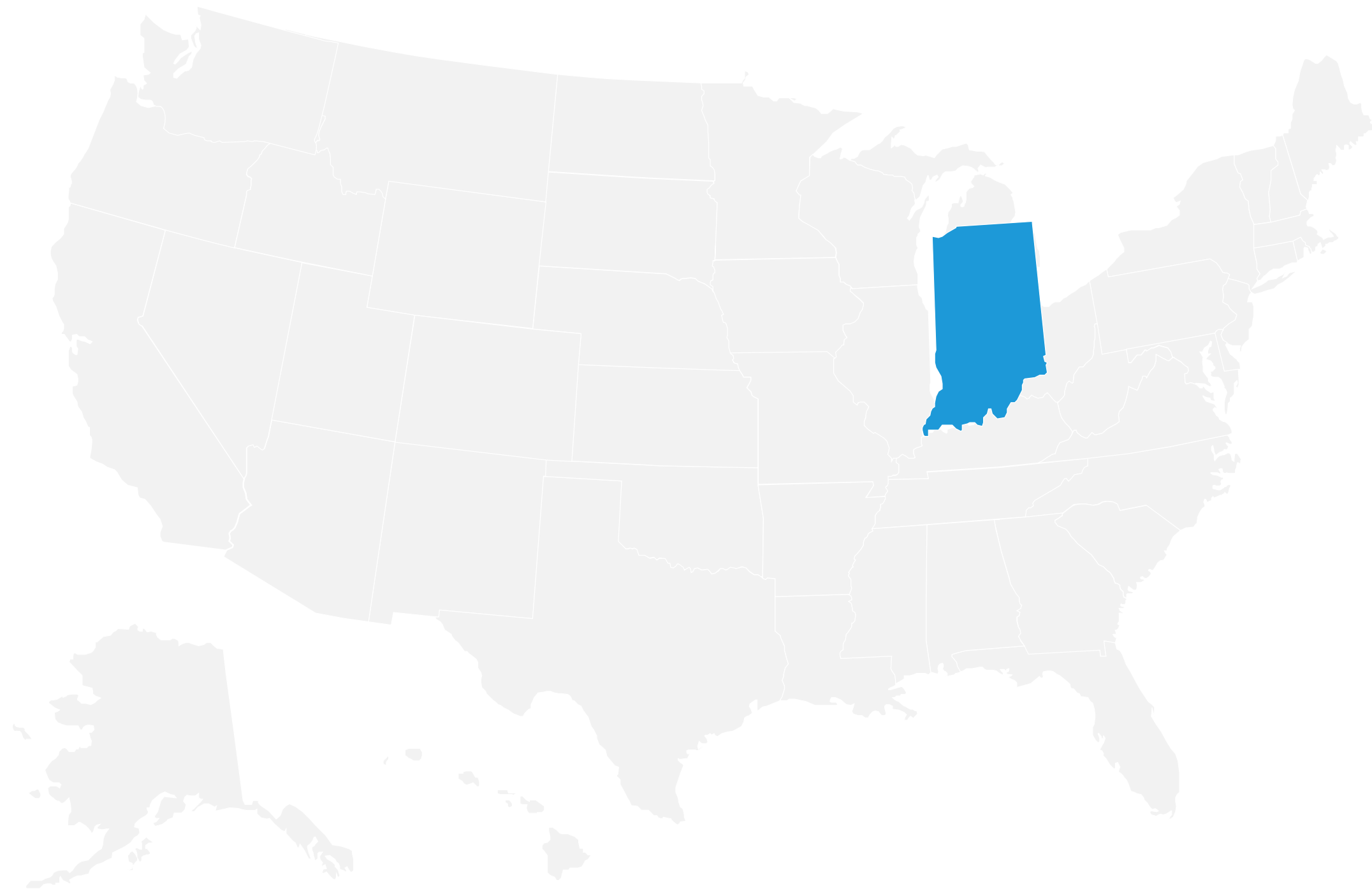
Indiana – Match Funding Overview



At the time of the Summit, Indiana had Been Notified of their 90/10 Award, but was Waiting to Receive the Actual Funds

This was Indiana's first year to obtain Medicaid match funding. They do not currently receive 75/25 or 50/50 funds.

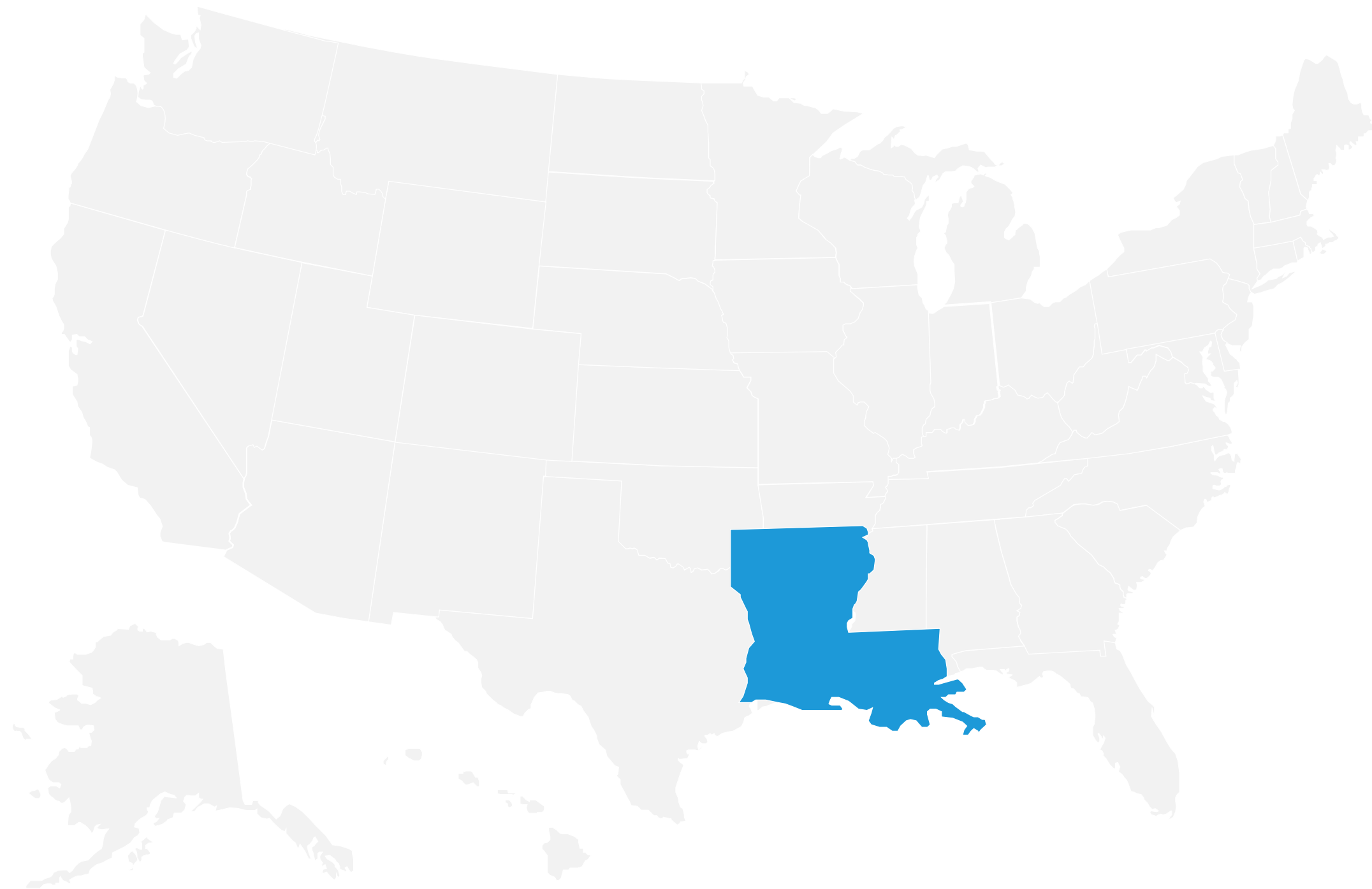
Indiana – Match Funding Overview



Uses of 90/10 Funding

- Interoperability Improvements for Providers
- Provider Education

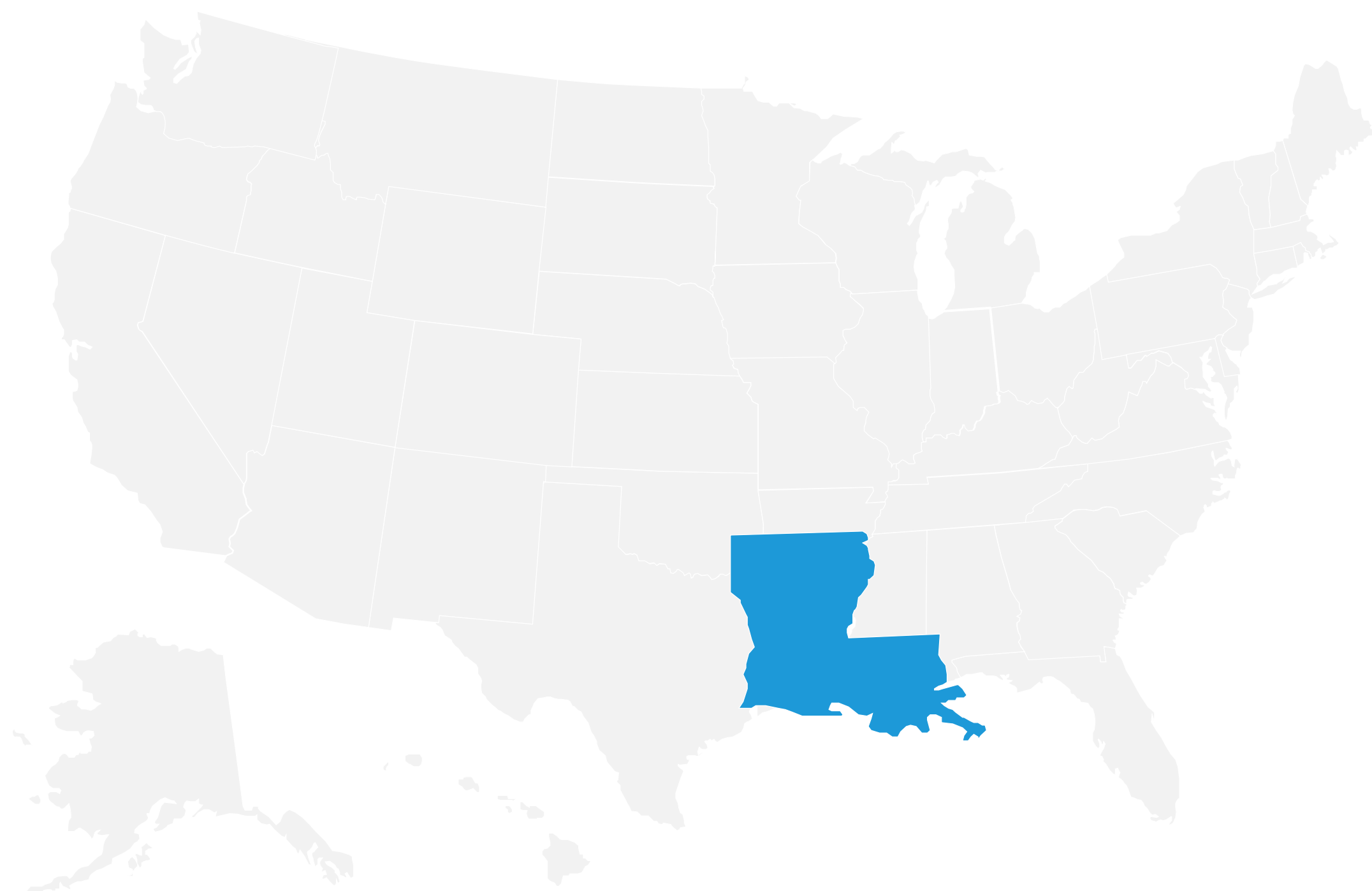
Louisiana – Match Funding Overview



At the time of the Summit, LA's Application was in Progress. They were notified of their 90/10 Award in April 2018.

This was Louisiana's first year to obtain Medicaid match funding. They do not receive 75/25 or 50/50 funds in their initial year but plan to pursue these funding types in years to come.

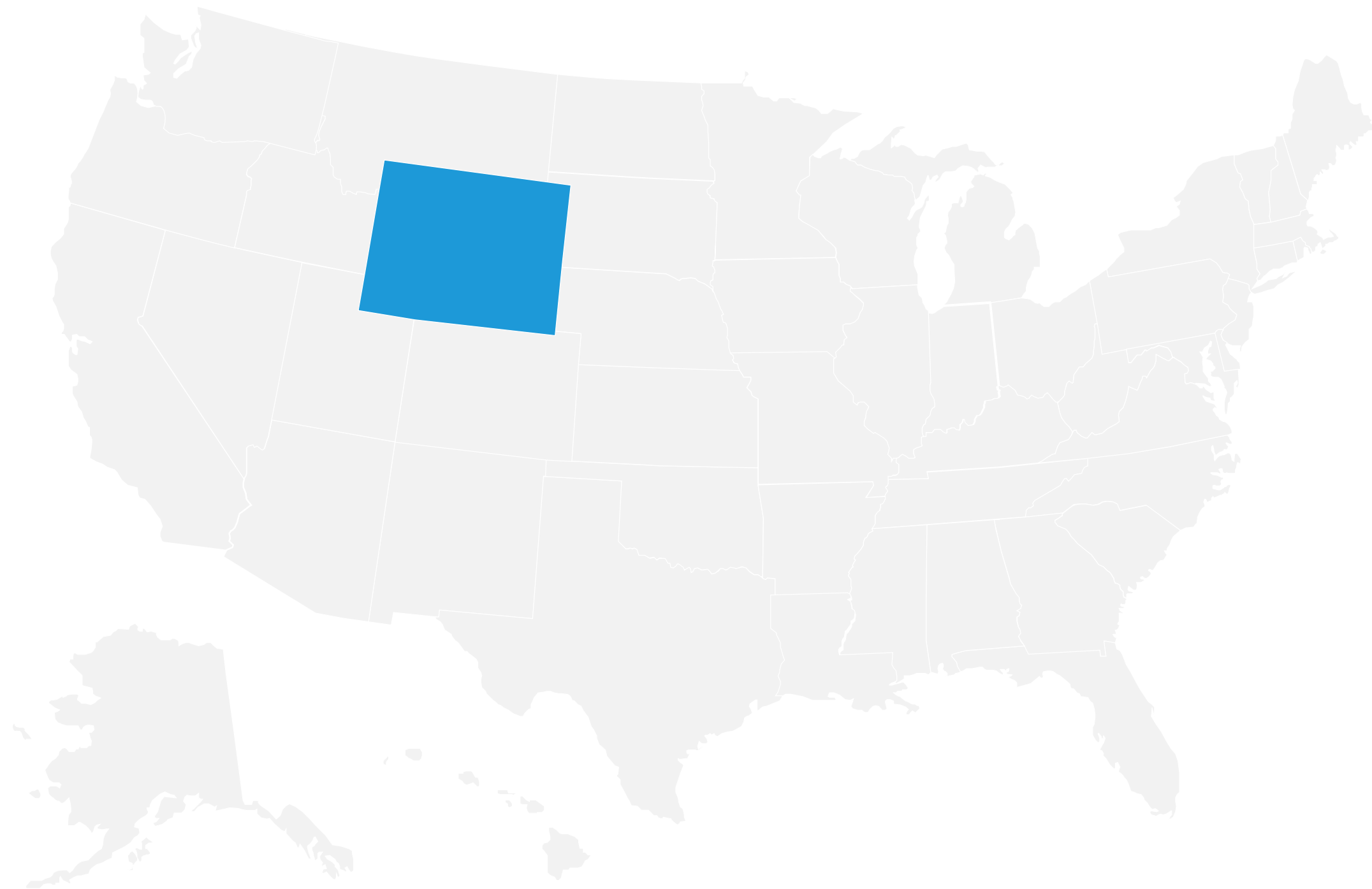
Louisiana – Match Funding Overview



Uses of 90/10 Funding

- Provider HL7 Interface Onboarding
- Registry Data Quality Improvement
- Provider Education
- Help Desk Services

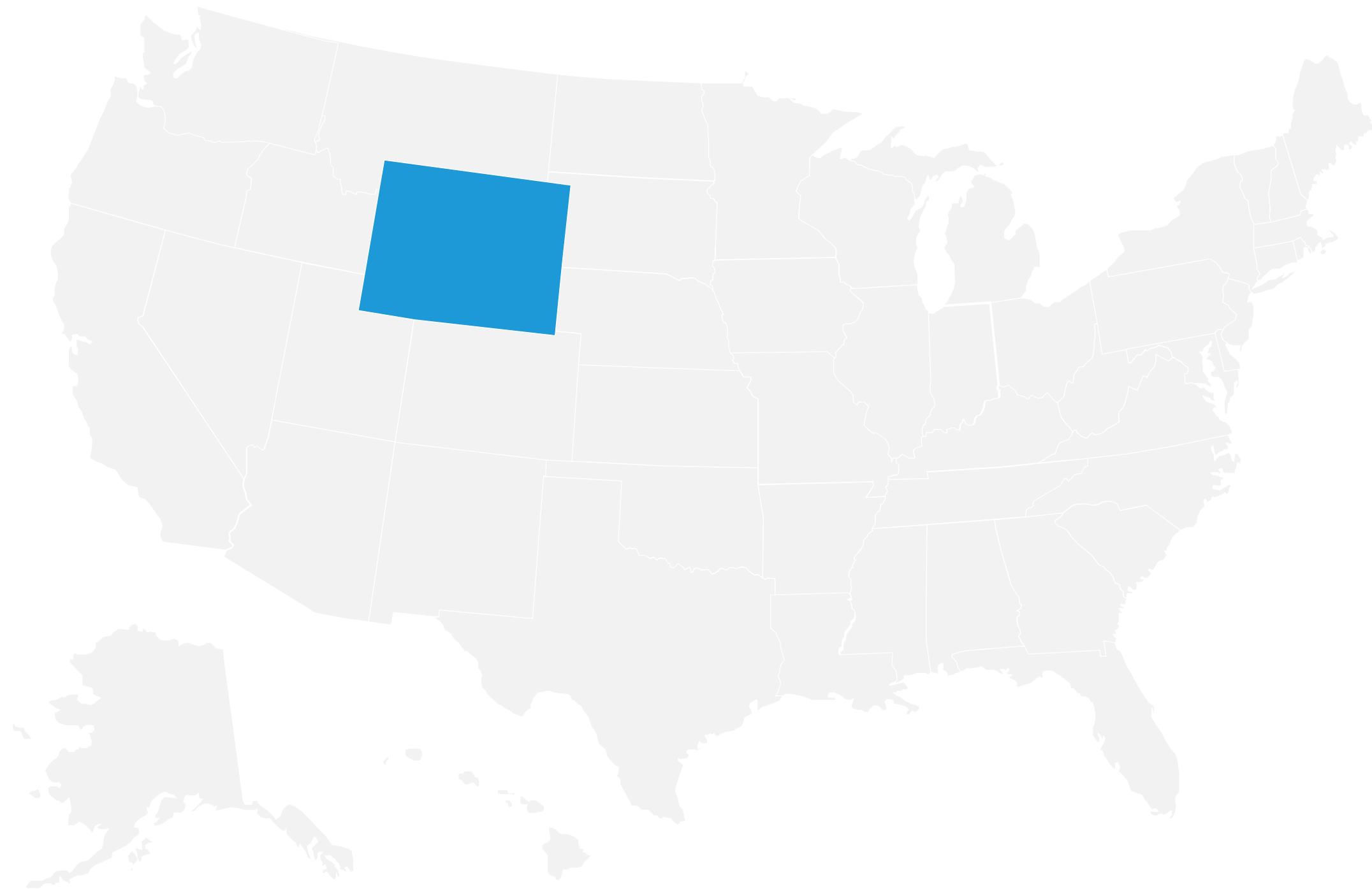
Wyoming – Match Funding Overview



Wyoming attended for information regarding best application practices:

Wyoming has not yet applied for any Match Funding types; however, they are interested in possibly doing so.

Wyoming – Match Funding Overview



Desired Uses of Future Match Funds:

- Help Desk Services
- Provider Education
- New Staff Training
- Data Analytics

The Toolkit That Resulted

PURPOSE OF THIS TOOL KIT



- Define the different Medicaid match alternatives (90/10, 75/25 and 50/50), the guidelines for applying, and the funding use requirements for each.
- Create a document that captured the content of the Summit for the purposes of sharing with the participating states, as well as with other state Immunization Programs across the country.



Contents of the Match Fund Tool-Kit

90/10	75/25 Information for 75/25 is our Understanding of the Structure for this option, but Unconfirmed	50/50	16 Differences in the Details of the Various Funding Types
<p>PURPOSE</p> <p>Design, Development & Implementation of Interoperability Projects</p> <p>TIMELINE</p> <p>Deadline: 2021</p> <p>MATCH REQUIREMENT</p> <p>10% Non-Federal Funds</p> <p>ELIGIBLE ACTIVITES</p> <ul style="list-style-type: none">Onboarding activities through the HIE or PHC-HubTransitioning providers from IWeb HL7 functionality to PHC-HubTier 1 ServicesLearning Management System (LMS) <p>STC IDEAS START HERE</p>	<p>PURPOSE</p> <p>Maintenance & Operations</p> <p>TIMELINE</p> <p>Ongoing</p> <p>MATCH REQUIREMENT</p> <p>25% Non-Federal Funds</p> <ul style="list-style-type: none">This is believed to be the case, but not confirmed <p>POTENTIAL ELIGIBLE ACTIVITES</p> <ul style="list-style-type: none">StaffIIS system maintenance and operations (including enhancements for modernization)Cloud Hosting CostsOnboarding activitiesData Quality ActivitiesTier 1 Help Desk ServicesTraining and Testing activities	<p>PURPOSE</p> <p>Any IIS Activities that will Benefit the Medicaid Population</p> <p>TIMELINE</p> <p>Ongoing</p> <p>MATCH REQUIREMENT</p> <p>Program Match:</p> <ul style="list-style-type: none">50% Non-Federal Funds25% State General Fund <p>Administrative Match:</p> <p>50% Non-Federal Funds</p> <ul style="list-style-type: none">25% State General Fund x % of the Medicaid PopulationAward: is multiplied (reduced) by the % of Non-Medicaid Population <p>ELIGIBLE ACTIVITES</p> <p>Any Medicaid-Based IIS Activities</p>	

Program Match Examples:

50% “Any Funds” (non-VFC, non-CMS)			25% SGF	25% Federal Funds (CMS)
Ex: 317	Ex: “Any”	Ex: SGF		
\$10,000	\$20,000	\$20,000		
				
	\$50,000		\$25,000	\$25,000 (Award)
	50%		25%	25%
Program Match Example #2				
Ex: 317	Ex: “Any”	Ex: SGF		
\$50,000	\$30,000	\$20,000		
				
	\$100,000		\$50,000	\$50,000 (Award)
	50%		25%	25%

Administrative Match Example #1:

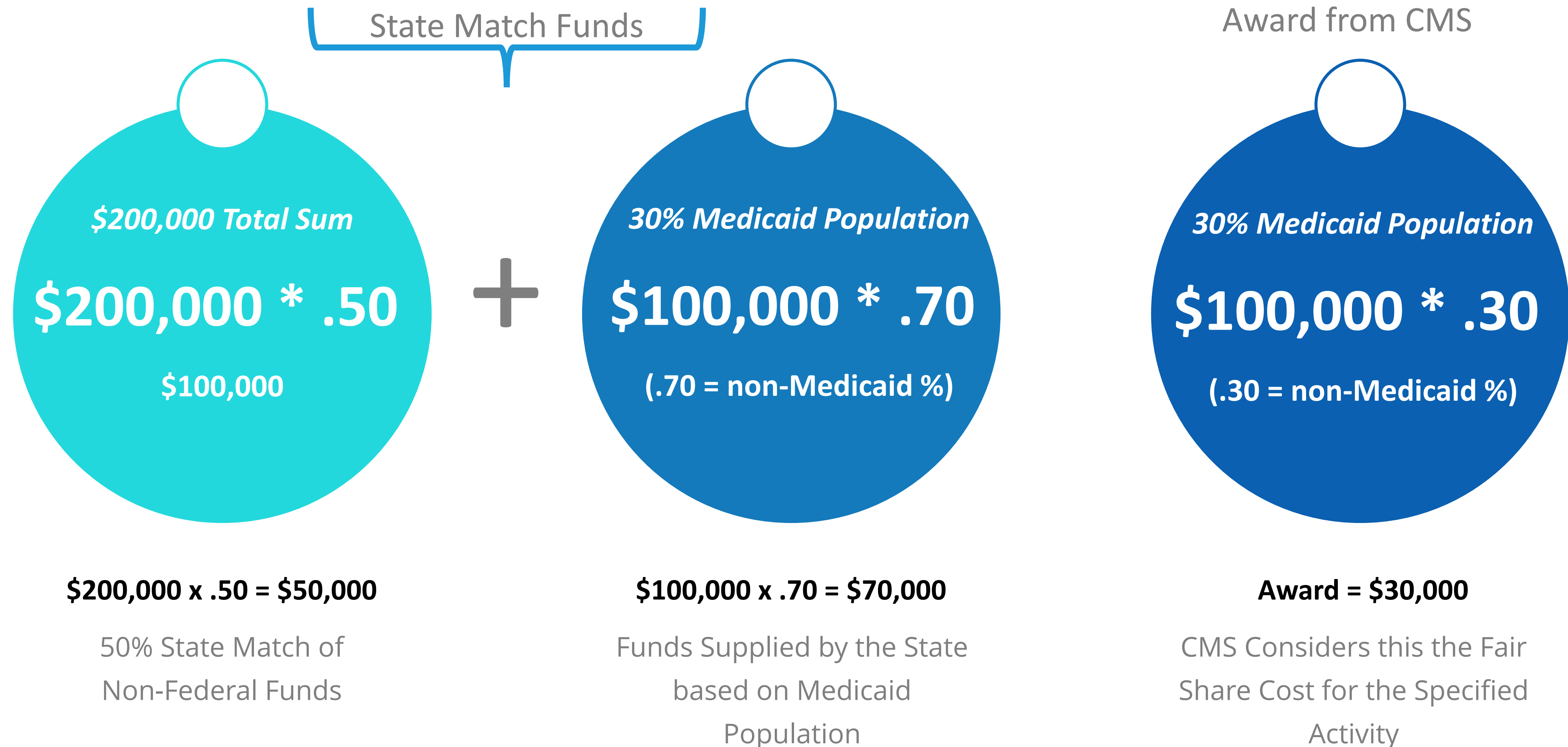
50% “Any Funds” (non-VFC, non-CMS)			25% SGF x non-Medicaid Population % for the State	25% Federal Funds (CMS) x Medicaid Population % for the State
Ex: 317	Ex: “Any”	Ex: SGF	Ex. Medicaid Pop. % = 30%	
\$10,000	\$20,000	\$20,000		
<div></div>			X * .70 (non-Medicaid %)	Award * .30 (Medicaid %)
	\$50,000		\$35,000	\$15,000 (Award)
	50%		25% * non-Medicaid %	25% * Medicaid %

Administrative Match Example #2:

50% “Any Funds” (non-VFC, non-CMS)			25% SGF x non-Medicaid Population % for the State	25% Federal Funds (CMS) x Medicaid Population % for the State
Ex: 317	Ex: “Any”	Ex: SGF	Ex. Medicaid Pop. % = 30%	
\$50,000	\$30,000	\$20,000		
<div></div>			X * .70 (non-Medicaid %)	Award * .30 (Medicaid %)
	\$100,000		\$70,000	\$30,000 (Award)
	50%		25% * non-Medicaid %	25% * Medicaid %

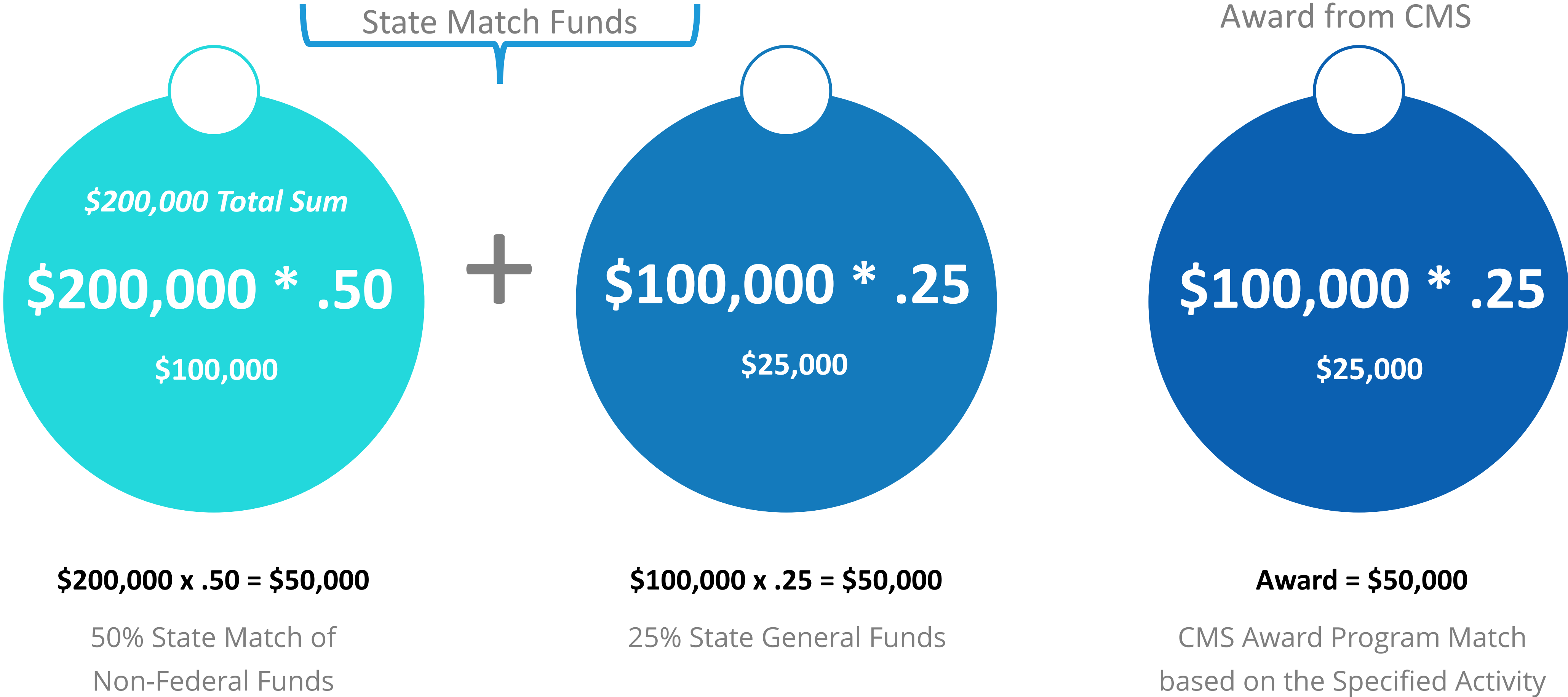
FAIR SHARE COST ALLOCATION

Applied to Administrative 50/50 Match Funds



Advantage of Program Match

Activities Considered Fully Relevant and Aligned to Medicaid’s Priorities are More Likely to be Designated for Program Match – Decision made by Medicaid



THE APPLICATION PROCESS

The Timeline for Applying

REVIEW TOOL KIT INFORMATION

Review information and gain knowledge from Consortium States who have been through the Process

Previously

DRAFT REQUIRED DOCUMENTS

Draft the Interagency Agreement, PAPD, SMHP and IAPD.

A COMBINED IAPD IS SUBMITTED TO CMS

Public Health's requests are combined with all other state agency and one IAPD is submitted to CMS with the cumulative requests.

Allow 2-Years Prior to Planning to Use the Funds Requested

DEVELOP A STRONG WORKING RELATIONSHIP WITH YOUR LOCAL MEDICAID OFFICE

This is especially beneficial when Public Health and Medicaid are in Separate Offices or Under Different State Government Branches

PRESENT TO STATE MEDICAID OFFICE AND ALLOW 60-DAYS FOR REVISIONS

The revision process will continue until the document is finalized. Medicaid has 60-days to respond to each revision.

STRATEGIES

FOR BUILDING YOUR RELATIONSHIP WITH MEDICAID



ENGAGE

Engage in preliminary conversations with the Medicaid office prior to beginning the 90/10 IADP application to discuss roles, processes, goals and desired outcomes.



ASK FOR ADVICE

Ask for advice from the Medicaid office as to any desired wording or information they recommend be included within the IADP.



QUESTIONS

Present questions to your Medicaid representative and encourage them to ask questions of you. Questions answered eliminate those that linger which will delay the process.



CLOSE COLLABORATION

Create a routine that includes close collaboration between your agency and the Medicaid office beginning in the planning stage of creating the IADP and continue this routine throughout.



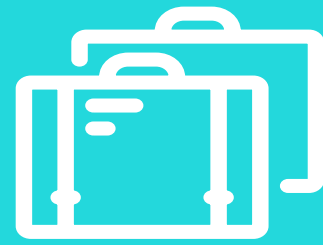
FOLLOW-UP

Follow-up with written communication which outlines the verbal conversations that have occurred and any specific advice, take-aways or next-step items that had been discussed.



DOCUMENTATION NEEDS

PRIOR TO COMPLETING THE IAPD



WRITTEN INTERAGENCY AGREEMENT

If you are a state that is structured in a manner that separates the Public Health Department and Medicaid into separate agencies, you will most likely need some type of interagency agreement before the 90/10 IAPD funding can be spent. The 90/10 funding application (IAPD) must be submitted by your Medicaid office; therefore, the interagency agreement will provide for those funds to be moved between the Medicaid office and sent along to the Public Health Department.

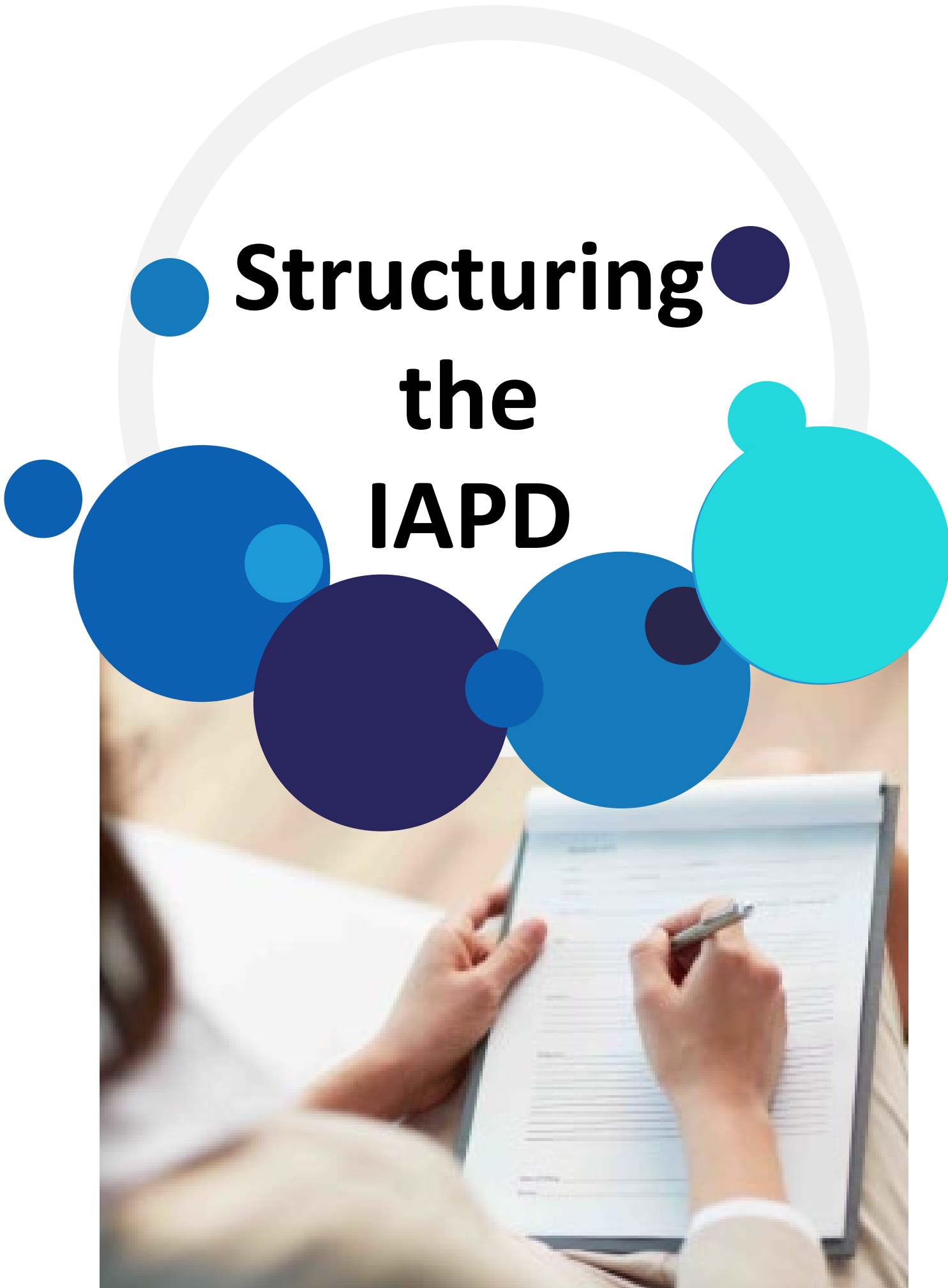


PAPD & SMHP – PLANNING ADVANCE PLANNING DOCUMENT & STATE MEDICAID HEALTH IT PLAN *(Required for 90/10 but not for 50/50 Match Funding)*

The Health Information Technology Planning Advance Planning Document (PAPD) gives states approval from CMS for funding requests. The State Medicaid Health IT Plan (SMHP) provides details on the state's plan for the Medicaid EHR Incentive Program funding. Both of these documents are required to go along with the IAPD but have likely already been developed by the state's Medicaid office, as they need to have these in place to receive their own funding. Confirmation of the establishment of these documents is likely just needed for verification.

IAPD Sections

The 9 Sections of the IAPD

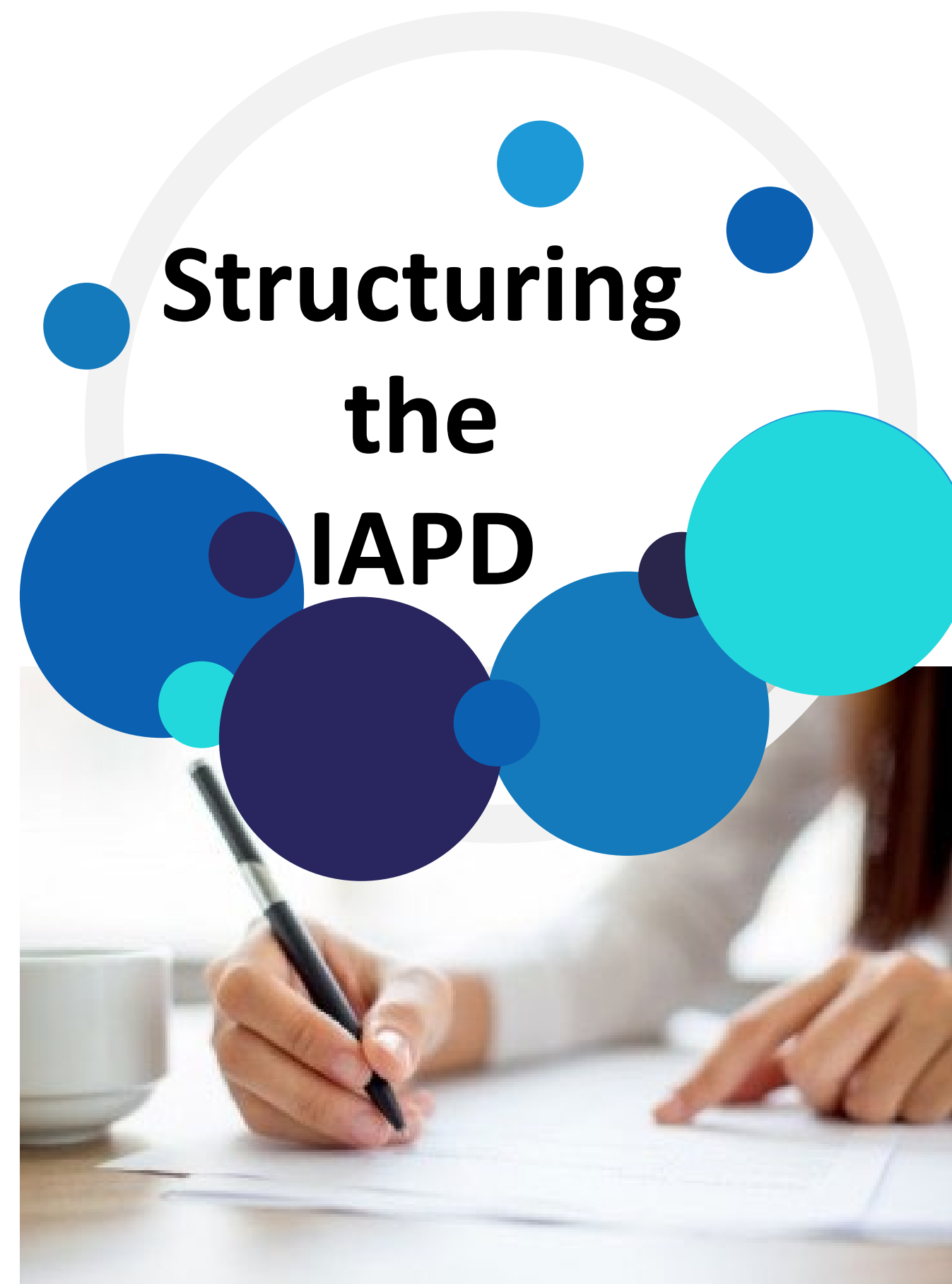


Structuring the IAPD

- **1. Executive summary outlining the intent of the IAPD**
A brief overview of approximately 2 pages in length that includes a chart breaking down the requested funding amounts for activities and implementations in the IAPD. Include a final total of all funds requested.
- **2. Results of Activities Included in the Planning Advanced Planning**
A table outlining the activities in the PAPD, SMHP and any previous IAPDs listed with their current statuses and related funding information. Previous IAPDs would only be applicable if you had successfully received CMS HITECH funding previously.
- **3. Overview of project needs, objectives and expected outcomes**
Include information about the need for the activities and projects, then relate them to goals for the Public Health Program. Also, describe how the success of the activities, projects and goals will be measured.
- **4. Alternative plans regarding implementation of the EHR Incentive Program**
Double check the state's SMHP and see if any changes have been made to the EHR incentives prior to submission to CMS.

IAPD Sections

The 9 Sections of the IAPD



- **5. Personnel Resource Statement**

This Enables for the opportunity to provide an estimate of total staffing needs and the expenses involved. If contractors will be involved, include a table outlining costs, vendor information and description of services. **Avoid:** Including state personnel costs.

- **6. Activity Schedule**

Include a proposed schedule for meeting objectives and the activities that will be involved with each objective. Include PAPD activities information including start & completion dates and all funding information.

- **7. Budget**

The budget should reflect the total costs of activities and overall FFP request amounts. Work with the state Medicaid office to determine funding types. (Ex: Administrative vs. Program Match or 90/10, 75/25, 50/50)

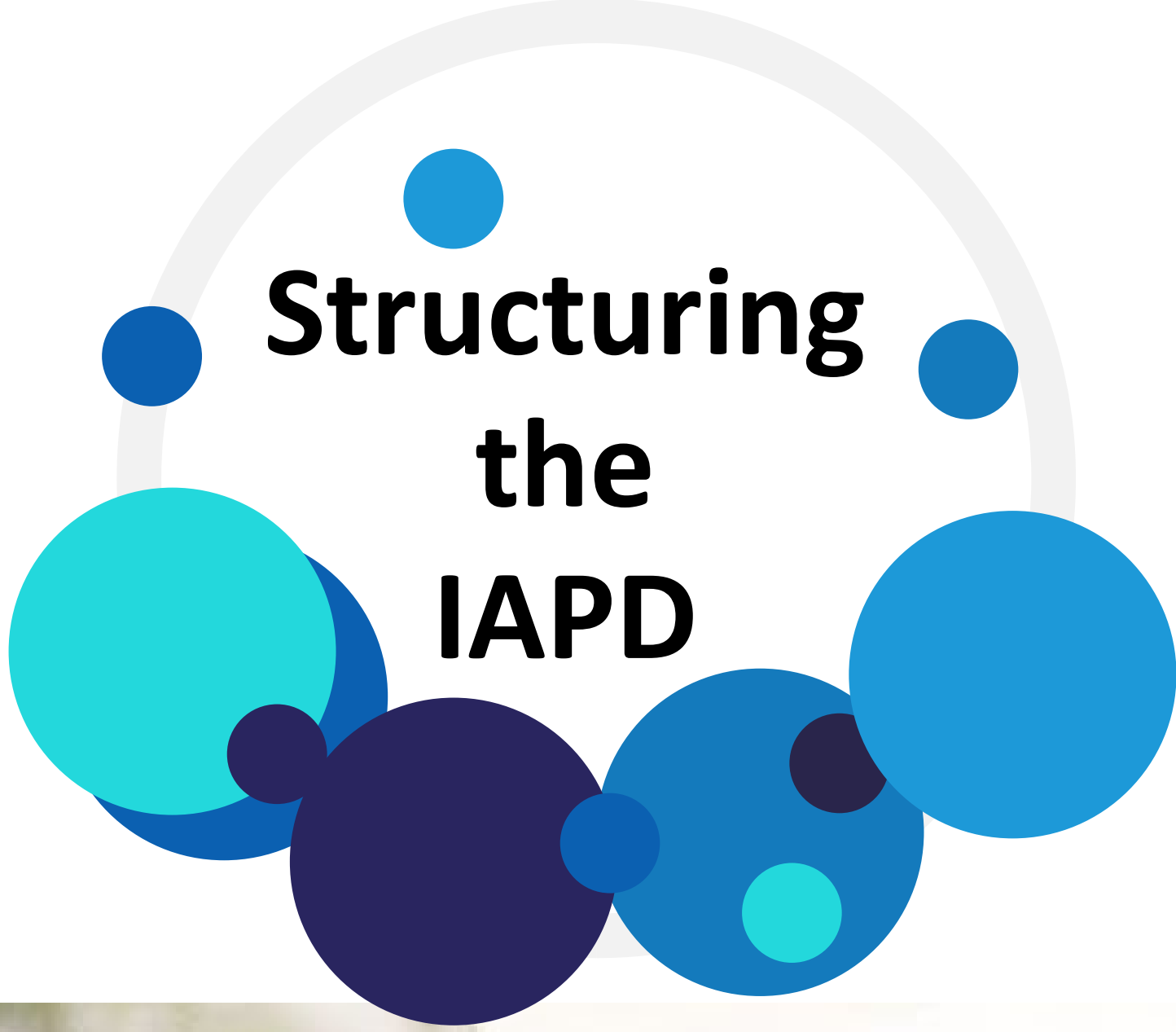
Additional suggestions Include:

- Budget for 2-years of expenses.
- Breakdown project cost by fiscal quarters.
- Include any salaries in personnel costs.
- Itemize all expenses related to contracted project and the contractors or vendors involved.
- Provide an explanation for all project expenditures.

Avoid: Do not include any expenses that will be incurred after the 2021 deadline unless it falls under the 75/25 or 50/50 FFP, which will extend beyond 2021.

IAPD Sections

The 9 Sections of the IAPD



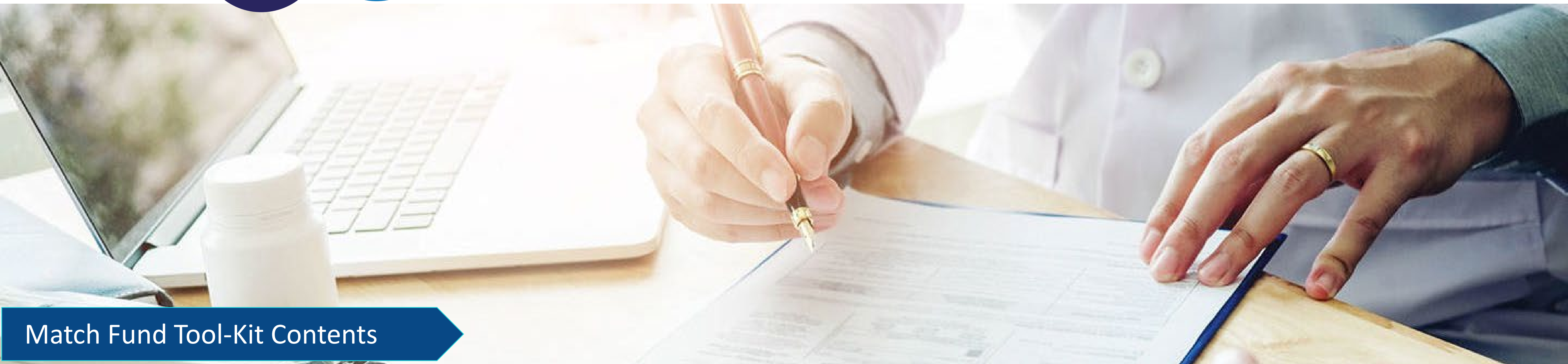
Structuring the IAPD

- **8. Cost Allocation Plan**

Include all the associated costs of all activity participants and all costs involved with the proposal. Project cost allocations should directly benefit the EHR Incentive Program. Remember to keep Fair Share Cost allocation in mind.

- **9. Checklist**

This checklist should display how the state will comply with the relevant Code of Federal Regulations (CFR) and State Medicaid Manual (SMM) in the areas of security, assurances, interface requirements and disaster recovery. If there are any “no” responses on the checklist, explain the reasons why no was selected.



IAPD Appendices

Structuring the IAPD

[See an Example of an IAPD Here](#)
[Submitted by Washington](#)

Appendices Included in the IAPD:

- A. An overview of allowable expenses and how they will be incorporated into the activities.
Recommended: Include written details outlining each activity.
- B. An explanation of incentives that are provided for each of the planned activities.
- C. Funding information incorporating state, local, federal, grants, and any other funding sources that will be serving to contribute funds to the project.
Recommended: Include an “As of” date with your funding information.
- D. A checklist form of requirements around the interoperability nature of the activities, which also includes the financial details of the project.
Recommended: Include narrative information to provide additional details and provide the most the recent benchmarks and milestones your program has achieved in the area of interoperability.
- E. **Activity Schedule** – Submit a chart outlining how the proposed plans in the IAPD are supported and align with the 7 standard and conditions in 42 CFR Part 433.
Recommended: Include a high-level checklist to serve as an overview along with narrative information to provide additional details.

EXAMPLE PROJECTS TO FUND

How They Fit Into Your Match Fund Plans



- Onboarding of Providers**
 Establishing provider connections through the state's Health Information Exchange (HIE). Also HL7 onboarding of providers, allowing the providers to send their HL7 immunization messages directly from their EHR, into the registry.
- Improved Data Quality**
 Assistance in providing improved data quality to providers who are currently going through the onboarding process and for those who have been previously onboarded but need some help in reviewing their messages and improving on the consistency and quality of the messages being sent to the registry.
- Help Desk Services**
 Tier-1 Help Desk services can assist providers in all their IIS related questions including basic IIS functionality, vaccine ordering, HL7 questions, reports, etc.
- Training Materials / Training Assistance**
 Provide a portal for education for all users of the immunization registry and the associated modules and applications, along with vaccination and public health topics. Funds could also be applied towards the creation of training materials or training State staff or providers on application functionality, workflow, process, etc.

EXAMPLE PROJECTS TO FUND

How They Fit Into Your Match Fund Plans



- **Software Licensing & Hosting Fees**
Since 50/50 funds can be applied towards maintenance of the IIS, they can be applied towards software licensing and IIS related hosting fees and supporting applications.
- **Cloud Hosting**
Cloud hosting for your registry and supporting applications provide safer and more efficient environment. Cloud hosting should qualify for 50/50 Match funds, which is especially beneficial seeing as though there is no deadline for 50/50 Match Funds.
- **New Application Implementations**
Make the state registry a complete and fully-defined unit.
- **Consumer Engagement**
Consumer-Level Immunization Patient Portal and Individual Forecast Information

TIPS & ADVICE

Key Points to Keep in Mind When Proceeding with Match Funds



CONTACT VACCINE COMMUNITY MEMBERS FOR HELP

Contact your fellow consortium members who have been through the process and STC for assistance with the application process.



KEEP THE 2021 DEADLINE IN MIND

As plans are developed, keep the 2021 deadline in mind for 90/10 Funding. However, remember that 50/50 funds are indefinite. Establishing the first 90/10 funding and the relationship & Medicaid-related projects that occur are key for future 50/50 funds.



ESTABLISHING THE RELATIONSHIP WITH MEDICAID

Create a Strong and Ongoing Relationship with your State's Medicaid Office and Advisor! This relationship can be beneficial in future years when trying to move from 90/10 to 50/50 funding.



ALIGN PROJECTS WITH MEDICAID PRIORITIES

The more aligned projects are with Medicaid priorities, the more likely they are to be approved and qualify for the most funding possible. (Ex: Program Match vs. Administrative Match)



REMEMBER THE INTEROPERABILITY EMPHASIS FOR 90/10

Emphasize how your requests and projects increase provider interoperability and Meaningful Use Requirements for 90/10 Funding.

Ongoing Efforts to Enhance Sustainability

Versions 2 & 3 Were Released with the Addition of Non-STC Clients

Idaho & Utah joined in the Toolkit Project

Additional States Receive Funding

States use info from the Toolkit to Apply for Match Funding



Charging for HEDIS Data

Louisiana begins to charge for HEDIS data requests

Efforts will Continue at the Next Sustainability Summit

All Awardees are Welcome!




MEDICAID MATCH FUNDING TOOLKIT

Download the Latest Toolkit and

Get More Information:

www.STCHealth.com/Sustainability



ANY QUESTIONS?





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