

Accountability Management (AM)

AM: Conduct Routine Fiscal and Clinical Monitoring Process							
Item	Details						
Description	The Conduct Routine Fiscal and Clinical Monitoring business process monitors services, outcomes, and expenditures required to meet state and Federal reporting requirements. The process regularly examines the most current client, service, and provider/contractor data on service delivery and costs, service coverage and improvement, client outcomes, expenditures and other factors as required.						
MITA Reference	Source Process Name: <i>Conduct Routine Fiscal and Clinical Monitoring</i> Source Process Business Area: <i>Accountability Management</i> References: Part 1 Appendix C, Business Process Model Details Part 1 Appendix D, Business Process Capability Matrix Details http://www.cms.hhs.gov/MedicaidInfoTechArch/04_MITAFramework.asp						
Sample Data	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Client Information</td> <td style="width: 50%;">Services information</td> </tr> <tr> <td>Outcomes and performance measures</td> <td>Provider/contractor history</td> </tr> <tr> <td>Budget and expenditure history</td> <td>Conceivably, all enterprise data</td> </tr> </table>	Client Information	Services information	Outcomes and performance measures	Provider/contractor history	Budget and expenditure history	Conceivably, all enterprise data
Client Information	Services information						
Outcomes and performance measures	Provider/contractor history						
Budget and expenditure history	Conceivably, all enterprise data						

AM: Conduct Routine Fiscal and Clinical Monitoring: Maturity Levels

Level 1	Level 2	Level 3	Level 4	Level 5
The process is done with a mix of tape, CD and some proprietary internal systems, using nonstandard formats and data. The process is inconsistent in the application of the rules, reporting, and response timing. Programs are siloed and multiple reviews may be conducted by different programs. Most data used is administrative and reporting data; analysis use is costly and resource intensive. This Level complies with agency requirements.	The process is increasingly automated, incorporating Web interfaces with providers/contractors, basic business rules, and enhanced consistency of responses and timing. Formats and data are standardized within the state. The process is informed by a set of agency standardized data on clients, services and outcomes. This Level includes additional data and quality edits.	The process uses networks or virtual connections to both internal and external data and stakeholders. Coordination cross agency improves coordination of monitoring activities. The process is informed by nationally standardized, cross agency data accessible via interfaces that use BH-MITA standards compatible with Medicaid MITA. At this Level data is standardized against HL7 RIM.	Client, service, and provider/contractor information is accessible to any authorized party through HIEs statewide for monitoring purposes. This Level adds clinical data.	Client, service, and provider/contractor information is accessible to any authorized party through HIEs nationwide for monitoring purposes. This Level adds nationwide technical interoperability.
VA As Is: Virginia is mostly a 1 with some 2.				
VA To Be: Virginia hopes to continue moving toward a full 2.				

Automation

Level 1	Level 2	Level 3	Level 4	Level 5
All/mostly paper	Internal processes	Internal agency	External agency	Non-state entity

	mostly automated	processes/interfaces mostly automated	processes/interfaces mostly automated	processes/interfaces mostly automated
VA As Is	Virginia ranges from a 1-3. CSBs with EHRs are at a level 3.			
VA To Be	Virginia will continue to work toward the next level.			
Standards				
Level 1	Level 2	Level 3	Level 4	Level 5
Use few or no national standards	Internal processes use national standards	Internal agency processes/interfaces mostly use national standards	External agency processes/interfaces mostly use national standards	Non-state entity processes/interfaces mostly use national standards
VA As Is: Virginia is a level 1 with some aspects of 2.				
VA To Be: Virginia will continue working toward becoming a full level 2.				
Cross Coordination				
Level 1	Level 2	Level 3	Level 4	Level 5
Little/no coordination across processes or with other programs	Internal agency operational processes coordinated	Internal agency program processes coordinated	External agency program and operational processes coordinated	Non-state entity program and operational processes coordinated
VA As Is: Virginia is a level 1 with some aspects of 2.	Some facilities are between a level 2 & 3.	CSBs with EHRs are at a level 3.		
VA To Be: Virginia will continue working toward becoming a full level 2.				
Client Data				
Level 1	Level 2	Level 3	Level 4	Level 5
Little/no access to client specific data	Internal processes have access to client specific data	Internal agency processes have access to client specific data	External agency processes have access to client specific data	Non-state entity processes have access to client specific data
VA As Is:	Facilities range between levels 1-4.	DMAS and DBHDS are between a level 3 & 4.	CSBs are at level 4 with CCS.	
VA To Be:	Virginia will continue to work toward the next level.			
Interoperability				
Level 1	Level 2	Level 3	Level 4	Level 5
None	Limited interoperability internally or limited to claims processing	Interoperability with internal agency systems other than claims processing	Interoperability with external agency systems other than claims processing	Interoperability with non-state entity systems

	systems			
VA As Is:	Facilities range between levels 1-3.	Central Office is at level 3. DMAS is between a level 3 & 4.	CSBs are at level 4 with CCS.	
VA To Be:	Virginia will continue to work toward the next level.			