

## eHHR Vision

The vision behind this effort is to promote and manage Health Information Technology (HIT)/ Medicaid Information Technology Architecture (MITA) Enterprise projects in close coordination with Federal and State direction in ways that collectively improve healthcare and human services to Virginians by providing access to the right services for the right people at the right time and for the right cost. The Commonwealth views HIT/MITA as a way to not only avoid cost but also to increase the value of our services through increased quality and decreased waste. More specifically Virginia's HIT/MITA efforts will have the following benefits:

- *Self-directed service model* –will allow Virginians to direct their own services via the web without having to go to the local social services office. When the automation can verify information directly against source systems, an eligibility worker would not need to be involved.
- *Assisted service model* – will allow disadvantaged Virginians who need human assistance/intervention to obtain services by going to their local social services offices. A variant of this model can include using the self-directed service model with a centralized help desk function to provide assistance via the web or by phone as deemed necessary by the user. This model is often used in Health Benefit Exchanges (HBE) and commercial web sites.
- *Efficiency and Integration*- a radical increase in the efficiency of Medicaid eligibility workers is necessary. Currently, most of the Medicaid eligibility workers also support other programs; addressing only the Medicaid program will not improve overall efficiency sufficiently; all programs must be addressed in an integrated solution.
- *Accuracy* – to increase accuracy of enrollments and reduce rework and the potential for fraud, the eligibility workers need an accurate method to identify a person quickly. An enterprise data management (EDM) product is necessary to merge data and create a “golden record” for the person or organization. Once there is a “golden record” Further, more of the processes can be automated as the machines will be able to match information with greater precision and less intervention by eligibility staff.
- *Security* – to support an assisted service model as well as HIE requirements, an authentication service is necessary for the public facing portals in order to ensure the person accessing services is who they claim to be. A Commonwealth Authentication Service (CAS) that is integrated with the EDM product will be constructed by the Virginia Department of Motor Vehicles.
- *Enterprise* – the MITA technical architecture standard requires a Service Oriented Architecture (SOA) environment. Using a shared SOA environment will drive down long-term technology costs as well as provide the opportunity to leverage a much wider array of services that may be available on the Enterprise Service Bus (ESB) that may not have been otherwise available.
- *Interoperability* – One of the most challenging aspects to interoperability are the standards and implementation guides. MITA formally adopted Health Level 7 (HL7) and there are many other standards in the marketplace. Virginia has an existing organization, HITSAC, to harmonize existing national/international standards as well as emerging standards and Federal direction. HITSAC advises Virginia on which standards and implementation guides should be used.

The eHHR Program Office will be responsible for coordinating HIT/MITA projects while keeping the focus on achieving goals and objectives, ensuring business value; prioritizing groups of projects; and providing an environment where enterprise projects can be run successfully in a cost-effective manner.