Manage Applicant and Member Communication: Business Capabilities

Member Management: Manage Applicant and Member Communication: Business Capabilities				
Capability Question	**Level 1**	**Level 2**	**Level 3**	**Level 4 & 5**
Business Capability Descriptions **The Section provides general background on the Business Process at Level 1 – 3. It is used to identify the differences between Levels.**				
What is the medium of communication?	Member communications are primarily conducted via paper and phone	Member communications are conducted via paper and phone; some electronic communication is available e.g., fax, scanned documents, uploads from the web portal, email.	Member communications are primarily electronic, with paper used only as needed to reach populations	
VA as is:	Virginia is at a level 1.			
VA to be:	Virginia expects to reach level 3 with the implementation of the citizen centric portal.			
Is there intra-agency collaboration for communication?	Member and applicant communication is likely uncoordinated among multiple, siloed programs and not systematically triggered by agency-wide processes; lacks data to appropriately target populations; of inconsistent quality; not always linguistically, culturally or competency appropriate.	States begin using Websites to provide member information on providers and health plans, and responses to inquires that can be responded to online or by phone General program information is available to applicants via websites.	Member and applicant communication is organized around the no wrong door concept, which ensures that regardless of point of entry, current and prospective members will be able to access information about all programs	
VA as is:	Virginia is at level 1 with some aspects of levels 2			

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	& 3. Delivery obstacles may be encountered, e.g. incorrect or lack of information. Virginia's "no-wrong door" initiative has been completed.			
VA to be:	Virginia will continue to work toward levels 2 & 3. The citizen centric portal will help considerably.			
Are standards used in communications?	No. Requests are received from members and applicants in non-standard formats	Member communications are linguistically, culturally, and competency appropriate, but require considerable manual intervention for paper communications	Yes. Standards ensure coordination and greater ability to measure the efficacy of member communications	
VA as is:	Requests are received from members in non-standard formats. Most requests are sent via telephone, fax, or USPS. Research is performed manually. Responses are inconsistent and manual.			
VA to be:	Virginia will work toward level 2.			

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How timely are the responses?	Most requests are sent via telephone, fax, or USPS; standard response within 2 days	Routine requests from members are standardized and automated within the agency via AVRS, Web portal	Agencies support deployment of internet access points, such as kiosks and low cost telecommunication devices such as cell phones for distribution to mobile communities, to alleviate communications barriers	
VA as is:	There may be delays in responses. Complies with agency goals and expectations. Requires signification labor force.			
VA to be:	Virginia will work toward level 2.			
Are responses timely, accurate?	Research is performed manually and responses are often inconsistent; delays are common	Research and response for these standardized communications are immediate or within batch response parameters; Responses are consistent and timely	Use of electronic communications makes provision of linguistically, culturally, and competency appropriate member communications more feasible and cost-effective Member Registries use standardized contact data, including USPS address standards, to alleviate postal delivery failures MITA standard interfaces	

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			(trigger event and results; messages to external entities), are used by Medicaid agency and collaborating sister agencies	
Va. As Is:		Virginia is mostly level 2 with some aspects of levels 1 & 3. A number of level 2 automation elements exist. Virginia's "no-wrong door" initiative is complete.		
Va. To Be:		Virginia wants to fully implement level 2 and expand its level 3 capabilities.		
Business Capability Quality: Timeliness of Process				
What is the timeliness of the response?	Manual and semi-automated steps may require some days to complete response.	Member requests and responses are automated via Web, AVRS with date stamp and audit trail. Responses available on the average within 2 days	Member information is accessed via either a single Member Registry or federated Member Registries; Response is immediate; Inquiries can be made to multiple agencies via collaboration	
Va. As Is:	Manual and semi-automated steps may require some days to complete response. Some elements of level 2 exist (for providers only).			

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Va. To Be:	Virginia wants to expand access to recipients to achieve level 2. The citizen centric portal will help considerably.			
Business Capability Quality: Data Access and Accuracy				
What is accuracy of response?	Responses are made manually and there may be inconsistency and inaccuracy (within agency tolerance level).	Access is via Web portal; Automated responses increase accuracy	Requests and responses are standardized among Medicaids, improving accuracy	
Va. As Is:	Responses are made manually and there may be inconsistency and inaccuracy (within agency tolerance level). Some automation of Level Two exist.			
Va. To Be:	Virginia wants to expand automated access to recipients to achieve level 2.			
Business Capability Quality: Cost-Effectiveness				
Do the benefits of the operation justify the costs?	Requires numerous staff and high cost to meet demands of member communication	Improvements in member services and automation result in higher cost effectiveness than level 1.	Use of standards and collaboration and shared services further increases cost effectiveness.	
Va. As Is:	Requires research staff.			
Va. To Be:	Virginia wants to expand automated access to recipients to achieve level 2.			

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Business Capability Quality: Effort to Perform; Efficiency				
What level of effort is required to manage member communications?	Staff research and respond to requests manually.	Some responses to member requests are automated.	Collaboration among agencies achieves a one-stop shop for member inquiries; Information requested by member is continuously refreshed.	
Va. As Is:	Staff research and respond to requests manually.			
Va. To Be:	Virginia hopes to work toward level 3 with the citizen centric portal.			
Business Capability Quality: Accuracy of Process Results				
How accurate are the results of communications?	Responses are manually validated, e.g., via call center audits; member satisfaction survey.	Automation improves accuracy of responses.	MITA standard interfaces improve requests and responses nationally.	
Va. As Is:	Responses are manually validated, e.g., call center audits; member satisfaction survey. Process complies with agency requirements.			
Va. To Be:	Virginia wants to expand automated access to recipients (AVRS and web) to achieve Level Two.			
Business Capability Quality: Utility or Value to Stakeholders				
Are stakeholders satisfied with responses?	Stakeholders receive information but there may be delays and	Stakeholders have no delay in obtaining responses and information	Stakeholders have a one stop shop to access collaborating agencies to	

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	inconsistent results.	is accurate.	obtain information.	
Va. As Is:	Members receive the information they need with some response delay.			
Va. To Be:	Virginia wants to work towards level 2.			