nc department of health and human services

CASE STUDY

NC-MMIS
State of North Carolina Medicaid

The NC Department of Health and Human Services (DHHS) has nearly 18,000 employees. DHHS' operating budget for the 2012-2013 fiscal year is $18.3 billion. Medicaid, as well as old-age prenatal programs, child development programs, and rest home regulations, are all part of DHHS charge.

The Client's Challenge

The NC DHHS faces several challenges on a day-to-day basis as they constantly pursue their goals. Their goal with the new MMIS system, called NCTracks, is for providers to accurately input information and interact, without issue, with the platform.

The department wanted to have a Medicaid platform which was fully functional by its scheduled launch date. This means that all providers should be able to successfully manages changes, update records, check recipient eligibility, obtain prior approvals, submit claims, participate in tutorials, register for seminars, and request site visits.

PLANIT Group's Solution

By having a stable of qualified talent, the PLANIT Healthcare Solutions team supplemented a full time staff - allowing the client the ability to bring the system in on time and within budget.

Our team has adhered to the management principles of the site and we review the performance of our contractors. This is bundled under a replicable quality control and assurance plan and process that are strictly enforced from the Enterprise Solutions division leadership level.

PLANIT Group provided three main resource types for this solution. First, we supplied Borland CaliberRM Architects – who specialize in the creation of Business Process and Business Rule requirements. Screens, reports and other solution artifacts are tracked with this tool and traceability relationships are maintained to support creation of Requirements and Design documents.

The second main resources provided were Document Imaging Architects, who were responsible for producing key design work products as well as the coordination of the implementation of system components. They created the design of all incoming paper / fax health claims, email transactions and provider correspondence, provider and member letter generation, and provider enrollments.

The third category of sourced resources was Mainframe Team Leads – who worked with state personnel and lead developers to design Change Log specifications for Contracts Management and Managed Care subsystems. They participated in the User Acceptance Testing (UAT) for Claims and Encounter, Contracts Manage/Managed Care and Eligibility and Enrollment subsystems. They also lead CCB meetings with state and development team leads to determine defects and enhancements for the Eligibility and Enrollment subsystem.

The Benefits

Simply put, our resources delivered proven results for the NC DHHS. We pride our organization in never having to train our staff except in the particular instances of new and proprietary systems.

This solution has proven to provide cost saving to the customer, increase agility, create a more speed to market approach with very little down time, and allows PLANIT to control the attrition, mitigate risk, and control the HR burdens associated with those dedicated resources.

> " Just days after award of the contract, PLANIT staff hit the ground running, establishing Best Practices and Procedures early to ensure that project goals were met."
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> Stephen Goetz
> Senior Enterprise Solutions Architect