

**Commonwealth of Massachusetts**  
Executive Office of Health and Human Services



## **American Public Human Services Association**

IT Solutions Management Conference

Lunch and Learn Session: Lessons from the  
Commonwealth's Virtual Gateway  
August 7, 2007



## Discussion Topics

- Overview of the Executive Office of Health and Human Services (EOHHS) Virtual Gateway
- Health and Human Services (HHS) in the Commonwealth of Massachusetts
- Benefits of the Virtual Gateway
- Reach and Scope of the Virtual Gateway
- User Perspectives
- Key Challenges
- Collaboration in Practice
- Future Vision
- Final Questions & Comments



# Overview of the Virtual Gateway

The Virtual Gateway **simplifies access to critical health and human service programs and information.**

It serves many groups:

- Consumers
- Community Providers
- Commonwealth Citizens



It results from **collaboration across multiple agencies** to meet common goals:

- Make it easier to find information about and enroll in human services
- Promote worker productivity
- Support the relationship between the Commonwealth and its community partners

The mandate for the Virtual Gateway was clear: a **governor-driven effort to reorganize Health and Human Services** and present a unified public-facing Internet presence.



# Health and Human Services in the Commonwealth

## New Administration



**Governor Deval Patrick**



**Secretary JudyAnn Bigby, MD**  
Executive Office of Health  
and Human Services

## Historic Health Reform Law

- Landmark legislation was passed in 2006 to ensure all residents have access to quality, affordable health care.
- Several efforts are underway to position the Virtual Gateway to support this goal.

## EOHHS and the Virtual Gateway



- In 2003 EOHHS underwent a major reorganization effort.
- Core administrative functions were centralized across agencies.
- 16 departments were grouped into 4 primary service “clusters.”
- The Virtual Gateway was established to support cross-system collaboration.

## Restrained Budget Growth

- Smallest rate of growth in 3 years
- \$26.7 B in total Commonwealth spending
- \$12.9 B in Health and Human Services spending

Data Source: Fiscal Year 2008 General Appropriations Act



# Benefits of the Virtual Gateway

Since its launch in 2004, the Virtual Gateway has each year added and/or updated its service offerings.

## Benefits:

- Condensed 18 Health and Human Service programs into one Common Intake form
- Allowed users to determine potential eligibility for 22 EOHHS programs and services
- Enabled citizens and providers to refocus thousands of hours of their time by not completing applications for inappropriate services

**2004:  
Common  
Intake**

(With Screening Tool  
and Catalog of  
Services)





# Benefits of the Virtual Gateway

Services released in 2005 focused on improving referral processing, case management, and data management processes.

## Benefits:

- Expedited filing of 4,900 more requests than FY 04 for interpreter services for deaf and hard of hearing consumers
- Streamlined the check-in process at homeless shelters and better supported federal reporting processes
- Facilitated the more timely relocation of children served by the Department of Social Services to less intense settings
- Provided Purchase-of-Service providers a single place to view, upload, and edit information commonly requested by EOHHS agencies

2004:  
Common  
Intake



## 2005: 7 New Services

- Interpreter Referral Information Service
- Provider Data Management
- Service and Transition Planning
- Statewide Homeless Operations Research Environment
- Electronic Transitional Assistance Gateway
- Enterprise Budgeting System
- Enterprise Reporting





# Benefits of the Virtual Gateway

Services released in 2006 enriched Common Intake and enhanced fiscal management and decision support tools.

## Benefits:

- Enabled citizens in the Fall River, MA area to apply online for Food Stamps Program benefits through Common Intake
- Expedited service delivery by enabling Common Intake to accept online applications for state-aided public housing
- Streamlined processes associated with invoice submission, approval, and payment for Purchase-of-Service providers
- Simplified budgeting for the \$7.5 billion MassHealth budget, previously administered via 1,300 linked Excel spreadsheets



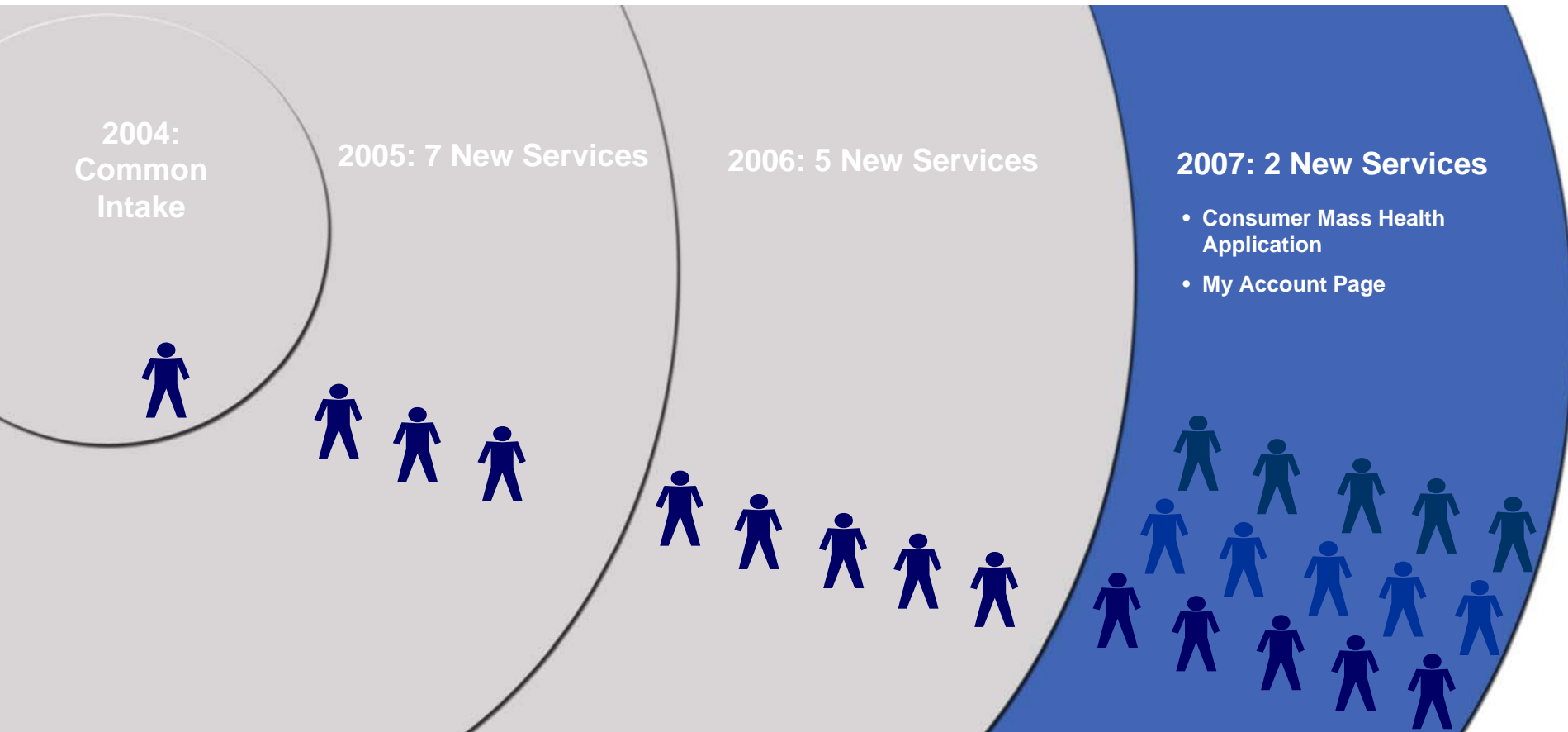


# Benefits of the Virtual Gateway

Initial deployments are underway for our newest services, a **Consumer MassHealth Application** and **My Account Page**.

## Benefits:

- Enable citizens to complete a single, online application for MassHealth and Commonwealth Care accessible via the Internet
- Convert current paper applications for MassHealth and Commonwealth Care into more efficiently processed electronic applications
- Create, for service providers, a single view of the information needed to take the most appropriate action to assist a citizen applying for healthcare





# Reach and Scope of the Virtual Gateway

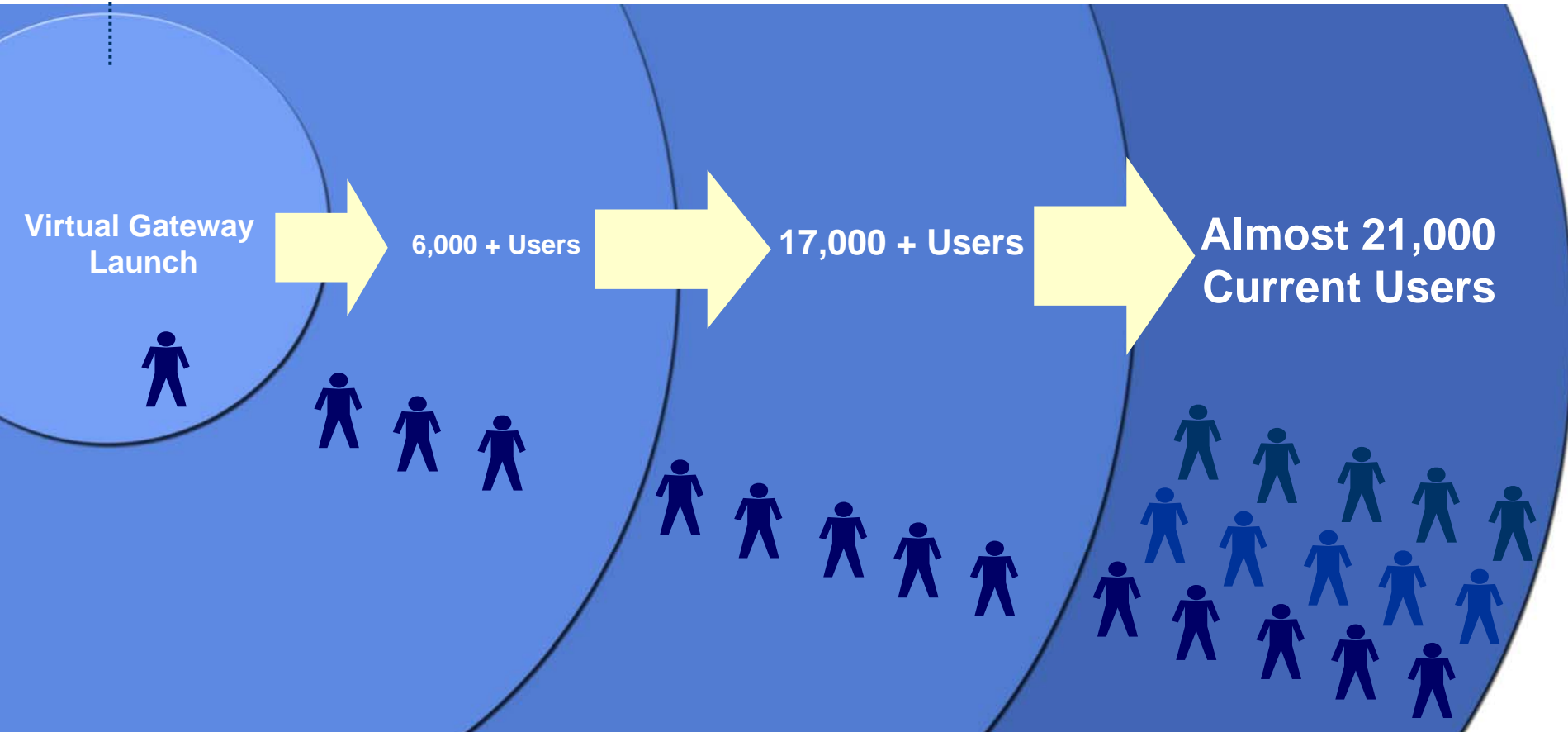
The Virtual Gateway continues to serve an increasing number of provider, government, and consumer users. We've achieved some key milestones as we've matured.

Favorable Boston  
Globe Write Up

Computerworld  
Honors Laureate

Shared Insight Portal Excellence  
Award Finalist

APHSA Recognition  
Award





## Cindy, Financial Services Manager



*“Using Common Intake greatly expedites the application process.”*

### General Description

In the past Cindy’s organization, a community based health delivery system, used Common Intake to submit MassHealth applications on behalf of their clients. Now, by answering just a few more questions, they use Common Intake to initiate applications for programs such as Food Stamps and Women’s Health Network.

Cindy and her colleagues use Common Intake to initiate applications online for multiple programs – up to 13 – with one single form. Clients no longer need to complete multiple forms and work with multiple state agencies to apply for services.

With Common Intake, the process is integrated and simplified. Data is more accurate and complete. And direct care workers gain time to help clients with additional services, such as prescription assistance.

### Bottom Line

**Using Common Intake improves access to critical health and human services.**

### Programs Available via the Common Intake Online Application for Services

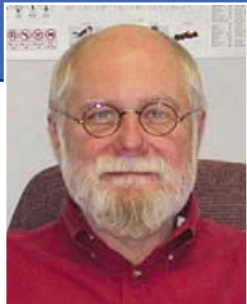
- State-aided Public Housing
- Child Care
- Health Insurance and Health Assistance Programs
- Food Stamps Benefits
- Women’s Health Network
- Women, Infant, and Children’s Services
- Community Services and Long-Term support

### Key Milestones Achieved by Common Intake

- 350,000<sup>th</sup> application received (2007)
- Supported Commonwealth Care Health Care Reform rollout (2007)
- Launched Public-facing Food Stamps Application (2006)
- Completed rollout to all acute hospitals and community health centers (2005)
- Supported Uncompensated Care integration into MassHealth (2004)



## Steve, Clinical Director



*“STARS is a very useful tool for kids, families, and care providers.”*

### General Description

Steve’s organization, a non-profit social services agency, is one of the “early adopters” of STARS. They are providing critical feedback about the service, designed to facilitate the movement of children served by the Department of Social Services from more restricted inpatient placements to community-based settings.

Since starting to use STARS, Steve feels “great relief” regarding the availability of a single, state-wide standard for client service concerns. He has found the service to be a “sophisticated, though user-friendly tool” that integrates well assessments, treatment plans, and case notes.

Peer feedback regarding STARS, according to Steve, has been “universally positive.” Steve also credits the Department of Social Services with solid deployment support.

### Bottom Line

**STARS is making a difference in our efforts to serve children, adolescents, and families throughout the Commonwealth.**

### Benefits Anticipated from Service and Transition Planning (STARS)

- Better information regarding service delivery results
- Reduction of administrative requirements, making many existing paper processes obsolete
- Enhanced collaboration through online assessment, treatment plan, and case notes tools

### Key Milestones Achieved by Service and Transition Planning

- Continued deployment of Release 2.0; 50% of targeted 3,000 user deployment achieved
- Deployed Release 2.0 of STARS service; 600+ users as of 2006
- During the initial rollout of STARS, the number of children and adolescents in inpatient service settings declined by 16%
- Deployed Release 1.0 of STARS to 300+ users (2005)



## Stephanie, Executive Director



*“EIM/ESM has been a significant help to managing cash flow.”*

### General Description

Since her organization, a non-profit behavioral health care agency, implemented EIM/ESM, Stephanie has noticed a substantial reduction in time to payment from invoice submission. Such expedited payments have supported cash management practices.

Stephanie has also found that having EIM/ESM do “some of the calculations for you” saves time and diminishes the previous need for tracking spreadsheets.

She suggests that other provider organizations implementing EIM/ESM “go slow and take lots of notes.” She credits careful attention to setup considerations and making the most of training to her organization’s success with the EIM/ESM service.

### Bottom Line

**EIM/ESM is making it easier for POS providers to do business with the Commonwealth.**

### Benefits of Enterprise Invoice/Service Management (EIM/ESM)

- Provides a single repository of information on Purchase of Service (POS) spending and service utilization
- Enables EOHHS to track, analyze, and understand spending for 10% of the Commonwealth’s budget
- Grants POS providers a “single front door” for doing business with EOHHS, regardless of agency
- Expedites invoice submission, approval, and payment processes
- Extends intake and application features of the Gateway to include eligibility, enrollment, and service management activities

### Key Milestones Achieved by Enterprise Invoice/Service Management

- Currently deployed to almost 2,000 total users; roughly 30% of target
- Over \$251 M in activated contracts; about 30% of target
- Increased integration of EIM/ESM tools into agency and provider business practices
- Initial plans for a build devoted solely to user-requested updates



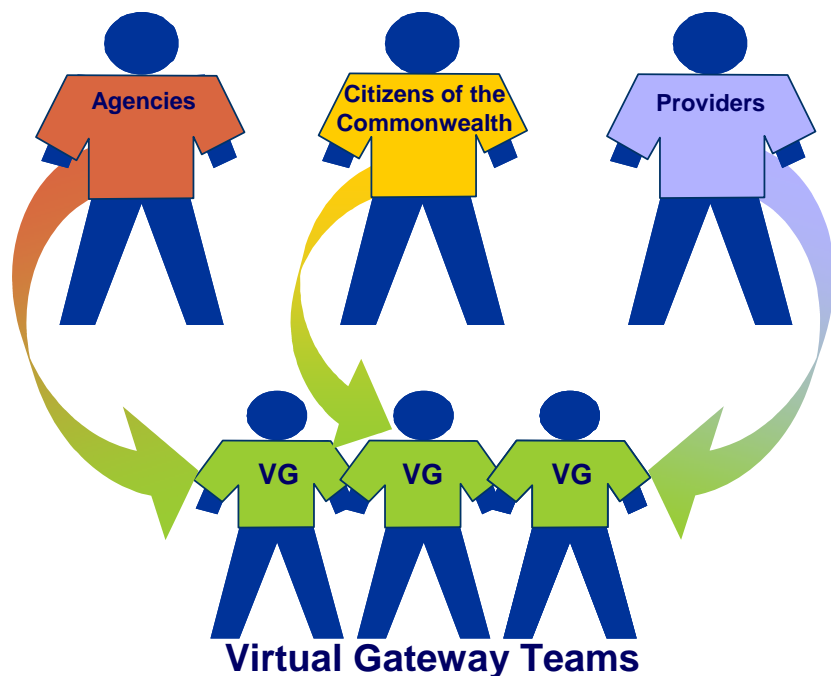
# Key Challenges

The challenges we've addressed in meeting our objectives have shifted as the Virtual Gateway has matured.

Objective	Early Virtual Gateway Challenges	Current Virtual Gateway Challenges
Establishing and Sustaining the Virtual Gateway	<ul style="list-style-type: none"><li>• Create a compelling business case</li><li>• Demonstrate leadership support</li></ul>	<ul style="list-style-type: none"><li>• Sustain visible leadership commitment</li><li>• Develop accurate operational support model</li></ul>
Coordinating Stakeholders	<ul style="list-style-type: none"><li>• Engage core stakeholder groups</li><li>• Create meaningful involvement opportunities</li></ul>	<ul style="list-style-type: none"><li>• Cast a “broader net” to enlist participants</li><li>• Leverage existing change champions</li></ul>
Managing Change	<ul style="list-style-type: none"><li>• Establish early wins</li><li>• Communicate results</li></ul>	<ul style="list-style-type: none"><li>• Maintain momentum</li><li>• Guard against “change fatigue”</li></ul>
Leveraging Technology	<ul style="list-style-type: none"><li>• Anticipate scalability across the enterprise</li><li>• Maximize reuse opportunities</li></ul>	<ul style="list-style-type: none"><li>• Stabilize the managed infrastructure</li><li>• Continue to aggregate and reuse assets</li></ul>
Continuous Improvement	<ul style="list-style-type: none"><li>• Establish historical benchmarks</li><li>• Develop performance targets</li></ul>	<ul style="list-style-type: none"><li>• Monitor progress toward goals</li><li>• Realign resources and/or processes</li></ul>



A dynamic teaming structure has supported our efforts.



- **16 EOHHS Agencies**
- **700 Provider Organizations**
- **6,437,193 citizens** (estimated\*)
- **9 Virtual Gateway Teams**
  - Business Operations
  - Customer Service
  - Deployment
  - Implementation
  - Information Architecture
  - Project Management
  - Quality Management
  - Release Management
  - Training

## Key attributes of this model include:

- All stakeholders, regardless of individual or organizational affiliations, join together to effect better access to health and human services.
- Maximize the contributions of all “players” – consumer, provider, agency, Virtual Gateway staff – by creating meaningful roles.
- “Wins” are not individual, but result from collective accomplishments.

\*Data Source: U.C. Census Bureau, 2006 Population Estimates



# Collaboration in Practice

There are certain characteristics that we've found essential to working together.





# Future Vision

Our Customer Service Team is in the midst of several initiatives that will support future operations.

## Mission

- Support Virtual Gateway users in accessing and using Virtual Gateway business services

## Core Functions

- Respond to customer inquiries regarding all Virtual Gateway business services
- Provision and maintain all user accounts

## Recent Initiatives

- **Call Routing.** Allows call segmentation and more efficient routing to appropriate resource
- **Enhanced and Decentralized Security Administration.** Intended to accommodate more dynamic administration for provider organizations
- **Expanded Reporting.** Supports greater visibility into call trends, supporting overall readiness and communication with end users



# Future Vision

Our Deployment Team continues to refine its approach to “on-boarding” a growing provider community.

## Mission

- Plan, execute, and monitor deployment of enterprise-wide Virtual Gateway business services

## Core Functions

- Develop and direct outbound communications and activities
- Manage inbound communications, records, and activities
- Manage provider support processes and timelines
- Plan and manage rollout schedules and tasks
- Provide integration across EIM/ESM teams

## Recent Initiatives

- **Provider Access Lead Program.** Provides a single point of contact for provider organizations to support “end-to-end” deployment activities
- **Streamlined Forms Processing.** Simplified forms associated with becoming a Virtual Gateway User
- **Workshop & Conference Call Assistance.** Implemented additional measures to help providers understand and fulfill Virtual Gateway information requirements



# Future Vision

Likewise, the Training Team has adapted the tools and techniques it uses to reach an expanding and diverse end-user audience.

## Mission

- Provide Virtual Gateway users with the instruction needed to understand and use Virtual Gateway business services

## Core Functions

- Develop training plan
- Create training materials
- Manage registration activities
- Deliver training content
- Develop related communications

## Recent Initiatives

- **Computer Based Training (CBT) Content for EIM/ESM Service.** Materials created support a “blended” approach which uses traditional, instructor-led courses as well as CBT modules available anytime via the Internet
- **Commonwealth-wide Learning Management System (LMS).** Implementation, registration, and management of Virtual Gateway LMS content supported by the Training Team



# Future Vision

**Our Architecture Team, together with Release Management and Quality Assurance, proactively manages the Virtual Gateway infrastructure.**

## Mission

- Provide for the reliability and stability of the Virtual Gateway infrastructure

## Core Functions

- Infrastructure stability and scalability
- Deployment of releases across the Virtual Gateway's environments

## Recent Initiatives

- **Backup Server “Clusters.”** Balance user load and shift processing from one server to another if performance degrades
- **Enterprise Service Bus (ESB) Update.** Connects software, business applications, and channels throughout HHS and its client organizations
- **Release Management Process.** Sets forth what must occur before a release, establishing a predictable and repeatable deployment approach
- **Training Environment Expansion.** Tenfold expansion of the number of the users that may be logged in at any one time, increasing simultaneous training opportunities



# Future Vision

The Virtual Gateway envisions a future in which our constituents are provided an experience that connects them to the programs and services they need as quickly and efficiently as possible.

Realizing this goal will require a three-pronged perspective:

## Consumers

- Augment and align customer-facing services
- Expand Common Intake program offerings

## Provider Organizations

- Streamline current renewal processes
- Expand integrated view to client's overall EOHHS status
- Create additional time for "value add" client service

## Performance-Driven Focus

- Define, collect, and monitor key operational/delivery metrics
- Promote enterprise-wide policies and procedures
- Further refine project management standards and practices
- Systematize knowledge-sharing across Virtual Gateway teams



# Final Questions and Comments

