

# **METS Spring 2017 Release**

The METS Spring 2017 Release successfully deployed over the weekend of April 1, 2017. Below are highlights of the items included in the release, with key benefits noted for each item.

# **Annual/Periodic Work (MA FPL)**

Updating the Medical Assistance (MA) Federal Poverty Level (FPL) Rate Table, to support income eligibility determination limits for Medical Assistance that are effective July 1, 2017.

Benefits: Updating the Medical Assistance FPL information is necessary to ensure that Minnesota is using the most accurate information when making eligibility determinations for Medical Assistance.

## **Assister Portal**

Modifications and improvements to three portal screens, providing additional information to improve efficiency.

- The Citizen Portal page will display the name and organization of the client's Navigator, Assister or Broker, and their plan name.
- Navigators, Assisters and Broker page will display additional consumer/citizen data to help better identify clients
- The addition of 3 reason suspension options to the Provider/Resource Manager page

Benefits: Providing this information will help improve efficiency and allow for improved responses to customer questions and requests.

#### **Cost Sharing**

The Spring Release address existing defects concerning cost sharing and AI/AN status.

- Incorporating the American Indian/Alaskan Native (AI/AN) status question to the 'Add a Person Wizard' and capturing responses in the Evidence system.
- Correcting a defect in the Demographic Evidence system in Cúram so that evidence is captured when a person responds 'yes' to the AI/AN question in the Case Worker & Citizen Portal.

Benefits: Ensuring that cost sharing information is correctly captured improves program integrity.

## **MMIS Interface (Includes Redesign)**

Work towards the full redesign of the METS-MMIS Interface in the Spring Release includes the implementation of a Web Services Cluster. This will improve performance, allowing the interface to more efficiently pass data between systems.

Benefits: Changing to a Web Services Cluster will provide improved interface performance and reduced risk of server outage issues.

### **Notices**

Notices work in the Spring Release includes a number of notice improvements and defect fixes in the following areas:

- Web services enhancements for technical infrastructure
- Notices mailing address alignment and conformance to USPS standards
- Correcting a defect where a renewal eligibility notice is not generated when a completed renewal results in a program change from MinnesotaCare to Medical Assistance.
- Numerous text and formatting improvements on the Need to Renew and Auto Renew Notices.

Benefits: Providing clearer and more accurate information on notices, and ensuring that notices are generated correctly, helps to reduce consumer confusion and related calls to caseworkers. Conforming mailing addresses on notices to USPS standards will reduce the number of notices returned as undeliverable.

# **PRISM**

New functionality includes the restructuring of a METS application question concerning parents living outside of the home. Other PRISM defect fixes in the Spring release include:

- Enabling the METS to PRISM interface for people that have duplicate person records
- Correcting an error that prevented caseworkers from submitting a medical support referral
- A technical improvement concerning end dates of MA eligibility and the interface of this information to PRISM.

Benefits: Ensuring the accurate and timely transfer of information between METS and PRISM Systems improves case management and provides more accurate information for caseworkers and consumers.

### **Defect Fixes**

The Spring Release includes over 25 defect fixes, many of which are part of the project work highlighted above. In addition to those items, there is also a defect fix included in the Spring Release to address an issue where Medical Assistance Cases are incorrectly being selected for renewal.

Benefits: Addressing defects that cause frequent issues for consumers and caseworkers will improve caseworker efficiency and overall program integrity.