



**State of Connecticut  
Department of Social Services  
Office of the Commissioner**

**Memorandum**

**DATE:** May 10, 2018

**TO:** HIT IAPDu Stakeholders

**FROM:** Roderick L. Bremby, Commissioner  
Department of Social Services

**RE:** HIT IAPDu Status Update

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In an effort to be more transparent, I am writing to provide an update on the status of the request for HIT funding sought by the Office of Health Care Strategies. Last month, at the Healthcare Innovation Steering Committee meeting I shared that a portion of the original funding request had been submitted. The funding request in support of the Immunization Registry was submitted 4/6/2018. Today, I can report that we are on track to submit the balance of the funding request by 5/15/2018.

It is important for context to share how we arrived at this juncture. In retrospect, more communication and broader transparency might have eliminated negative assumptions about the actions or motives of many people working to process this request as expeditiously as possible.

Last November, after receiving previous round of HIT funding, primarily for planning but also containing implementation funding for ongoing DSS HIT initiatives, CMS instructed the State not to submit additional HIT funding requests for anything not already contained in the Connecticut State Medicaid HIT Plan (SMHP). CMS required that the plan, be updated prior to the request for new initiatives. Updating the SMHP requires that the 300+ page document be revised to incorporate all subsequently approved funding requests from the date of last approval.

In early January receipt of the HIT IAPDu funding request, DSS secured resources to begin the process to update the SMHP. It was estimated that updating our SMHP would take 4-6 months, significantly less time than the last update. Perhaps at that point, communication from DSS could have helped reset expectations about the likelihood of receiving funding by early Summer.

On February 27<sup>th</sup>, a meeting was held to review and address remaining outstanding issues. After the 2/27/18 meeting, I sought and secured approval from CMS on 3/12/18 to pursue an iterative process for the submittal of the funding request. We were authorized to update only the portion of the plan supporting the funding being sought, rather than needing to update the entire SMHP. I believe that communication from CMS was provided at the March Meeting of the Steering Committee.

In light of the new CMS guidance, the work group met on March 26<sup>th</sup> to consider a project plan with a three-phase (iterative) process for submitting the IAPDu to expedite CMS review and funding approval. The work group consensus was to pursue a two-phase approach with the goal of submitting the OHS HIT funding request by the middle of May.

It was learned after the meeting that a key assumption driving the consensus for a two-phase approach was incorrect. Upon that basis and an understanding of the timely resolution of Immunization Registry funding support, I directed the submittal of the Immunization Registry portion of the funding request. Submitting the first portion of the request meant that the second portion could not be submitted prior to completion of the CMS review. This generally takes about 60 days. The registry, being an uncomplicated request, should take far less than 60 days. However, this placed us on track for a 6/10/18 submittal of the balance of the OHS funding request.

On 4/30/18 CMS advised that we could submit the second portion of the request for funding prior to the approval of the Immunization Registry as long as we provided a 2-4 page document outlining our direction (in lieu of updated portions of the SMHP).

Yesterday, DSS submitted a draft version of the 2-4 page document for CMS review to ensure that it meets their expectations. Pending a prompt response by CMS and a final review by the work team next week, we expect to submit the balance of the OHS HIT IAPDu funding request by next Friday.

Please do not hesitate to let me know if you would like additional information. It is my intent to update you upon completion of each successive milestone of the IAPDu submittal and review.