Are there really any Silver Bullets?
I may have a bridge in Brooklyn...
COTS – Commercial-off-the-Shelf

- **What COTS is...**
  - Packaged software – may be general or specific use
  - May be configurable, extensible or customizable

- **What COTS isn’t...**
  - Custom built software
  - Software that does exactly what you want it to

- **Software as a Service (SaaS) & Shared Services**
  - Service hosted/delivered running on a 3rd party system
  - May be configurable, extendable or customizable
  - May be used through a web page/browser (interactive) or may be used through web services (API)
Mills Lake in Rocky Mountain National Park
“V” for the Valley of Software Death

**Benefits of COTS**
- Meets “many”/“most” needs out-of-box
- Fast time to deploy
- Leverage economies of scale (users, dev, test)
- Regular updates, new features and fixes
- Flexible licensing models

**Benefits of Custom**
- Fits your specific needs
- Immediate fixes, changes or enhancements
- Avoids obsolescence
- Investment in updates and changes are 100% controlled
- May be a competitive advantage
Why COTS for SC Eligibility Solution?

• COTS Products (or Market) Existed
  • Sort of...

• Short-time to Implement
  • Time pressure(s) toward October 2013
  • Other priorities (aka core competencies)

• Future Enterprise Perspective
  • Shift toward enterprise thinking
  • Shift toward greater State ownership, knowledge, and experience with and about the Medicaid Enterprise
  • Defining the roles and use of COTS, services and enterprise tools/technologies
SC Selection Process

- **Recommend “Evaluation” Approach**
  - COTS (or SaaS) must do something out of the box
    - Require providers to let your team get their hands on it
  - Do a “real” evaluation (just ask, RFI/RFQ)
    - 30-day, vendor-hosted environment

- **Consider the Best Contract Structure(s)**
  - Licensing models
    - Initial purchases, maintenance/updates, support, monthly fees
  - Labor and implementation
    - Together, separate or a mix

- **Leverage State Contracts for COTS**
  - Volume still matters
I Bought COTS – I’m Done, Right?

• Need for Champions
• Need for Cultural Transformation
• Need for Enterprise Architecture/Design
• Need for Project Management
• Need for Lifecycle Management
SC Eligibility Implementation

- **SC Eligibility Solution**
  - IBM Cúram Social Program Management Platform
  - Hyland OnBase Enterprise Content Management
  - Mulesoft Enterprise Service Bus (ESB)
  - IBM WebSphere (app server) and Oracle Database

- **Mixed Implementation Team**
  - Existing state staff (program/business)
  - New state staff (technical and “other” experiences)
  - IBM Cúram technical staff

- **New Enterprise Infrastructure**
  - Development of “private” cloud environment
  - Shift from scheduled mainframe to 24/7 web

Healthy Connections
Key Implementation Principles

• **Change Business Processes First**
  - Don’t make COTS do it “your way” – drive a willingness to change processes
  - Challenge assumptions – “we have always done it this way”

• **Use COTS as Intended**
  - Configure and customize the vendor intended
  - Consider COTS as SaaS within your enterprise
  - Implement integration through web services/API

• **Maintain “Upgradability”**
  - If you are unable to upgrade to the next release, you forfeit the benefit of COTS
  - Become an active member of the vendor’s “user” community
How are We Doing?

- **New Applications**
  - 46,466 new applications received online
  - 15% of 316,461 total applications since October 1, 2013
  - As high as 30% in a given week – end of open enrollment

- **Account Transfer**
  - Started receiving in mid-February
  - Have received about 39,000 AT applications
  - Extending solution to “bucket” AT applications
  - “Current” with processing AT as of this week

- **Remote Identity Proofing (RIDP)**
  - Averaging 77% success
  - 15% with no credit; 3% failing; 5% errors
Challenges, Cautions & Consternation

- **Challenges**
  - Learning the solution under tight time pressure
  - Shifting the mindset toward changing processes
  - Unmet expectations in COTS

- **Cautions**
  - Too many changes in the enterprise at the same time

- **Consternation**
  - COTS solution not able to move quickly enough
  - Fixing/mitigating things we shouldn’t have to
  - Failing to leverage multi-state experiences/knowledge
Where are We Headed?

• **Current Status**
  • Closing in on next SC release (2.x)
    • Data migration from existing system for MAGI lives
    • Significantly more difficult than expected
  • Preparations for 2014 open enrollment
  • Focus on review processing

• **Through December 2015**
  • Implementation for Non-MAGI Categories
  • Work toward integration of plan selection

• **Beyond December 2015**
  • Stay current with framework (we are paying for it)
  • Work toward integration with human services (SNAP/TANF)
If silver bullets exist, they still require leadership and vision to effectively use them...