



BUILDING A CHILD WELFARE INFORMATION SYSTEM OF THE FUTURE

Abstract

Rethinking systems planning and funding approaches to take advantage of proposed regulations



Overview

On August 11, 2015, the US Department of Health and Human Services (HHS) requested inputs on proposed regulations impacting child welfare information systems.

The Comprehensive Child Welfare Information System (CCWIS) proposed regulations modify 45 CFR 1355 and 1356 as well as other funding-related regulations in 45 CFR 95.625 and the approval-process-related regulations 45 CFR 95.610 (Federal Register Vol. 80, No. 154). The previous guidance from HHS in this domain was from December

22, 1993, as codified in 45 CFR 1355. The opportunity to comment on the proposed regulation ended on October 13, 2015, and the feedback received is under consideration.

While it is unclear when the final regulations will be issued, and what those final regulations will include, States can use this interim period to take advantage of existing regulations and funding options to make child welfare information technology improvements. States can use enhanced federal funding (since the provisions on the

Affordable Care Act IT investments have been extended and continue to provide 90/10 until 2018) and use pilot and waiver guidance to provide additional flexibility in funding and planning a child welfare information system solution that meets their needs. In combination with investments in new eligibility solutions and other related social service programs, States can propose information system solutions that may assist in child welfare service delivery too.

Funding options for IT investments

HHS continues to provide technical assistance and guidance to States as they consider their information technology investments. Requests for federal funding must follow the Advance Planning Document (APD) process. In October 2015, HHS updated its description of the process for child welfare agencies.

For States wanting to make information technology investments that can support Medicaid, CHIP, and other social services, including child welfare, child care, child support, TANF, SNAP, LIHEAP, etc., the July 20, 2015, federal letter provides a three-year continuation of the specific exception to the cost allocation requirements set forth in the Office of Management and Budget (OMB) Circular A-87. The letter also continued the current 90/10 funding for Medicaid Eligibility and Enrollment Systems until December 2018. Given this three-year extension, States can plan modernization of eligibility systems for all health and human service programs. Multi-program IT projects follow an APD process and have particular tools for addressing the allocation of costs across the various federal sources.



Two pieces of guidance have been issued over the past five years that can be used to test out options for consideration and then to move forward on the choice.

The pilot process guidance, issued April 8, 2010, clarifies the activities HHS expects when a State chooses to test out a new



technology. The pilot would follow some of the same actions as a demonstration grant-type activity, with a clear business case, project plan, measurement plan for success, and stated plan of action upon the completion of the pilot – whether full adoption or decommissioning. Pilot activities could include automation support for new risk assessments or mobile tools to complete a home study, for a potential foster or adoptive home.



On June 11, 2013, HHS issued an instruction that allows States to use a waiver process to support new technology along with their current SACWIS. The waiver could address COTS software that has been designed specifically to address a need within social services. The waiver process provides a logical next step after a successful pilot. The District of Columbia used the pilot and waiver process to provide a specific mobile solution.

Implications and operationalizing

Given the current information technology investments and project activities occurring within related government agencies and services, the State agency administering child welfare services may use this time to maximize their own information system supports.

Actively engage in the IT governance process for health exchange and integrated eligibility modernization efforts to understand:

- The population served
- The data models and data-sharing opportunities

- The IT components being purchased and installed to address particular needs that may also support child welfare needs

Review current child welfare information systems to understand:

- Technology that is reaching its maximum life and will need replacement or upgrades
- Unmet needs in current child welfare service supports
- Data connections where the families involved in child welfare services overlap with the population served by other agencies

Use the current pilot and waiver process to approach the Administration for Children and Families with proposals to address current unmet needs or present an alternative way to provide more efficient and effective services. For IT components being used by the health exchange project that can benefit child welfare, present revised APD materials to maximize that investment.

Technology considerations

Aligning system capabilities, design, and implementation to maximize funding potential will require adherence to existing and emerging standards. Centers for Medicare and Medicaid Services (CMS) requires compliance with MITA and NHSIA standards. Such standards require a flexible technology stack which enables service-oriented architecture, externalized business rules, and well-defined business processes. Monolithic systems which do not consume or provide well-defined web services will not meet standards and result in noncompliant systems. All HHS systems are meant to exist in a mutually beneficial technology environment that promotes sharing and resource reuse. Technology considerations

extend beyond simply choosing a technology vendor or implementing an SOA stack; there is a need for comprehensive enterprise architecture and system planning across division boundaries.

New possibilities and emphasis is demonstrated by the proposed regulations on the Comprehensive Child Welfare Information System (CCWIS). Along with requirements for cost effectiveness, required data, and reporting, there is a focus on data quality, data exchanges, and interoperability standards. These requirements build on SOA architecture, but include technology needs for tools to maintain, monitor, and remediate data quality issues. Technology choices need

to be both standards-compliant today, and also have the potential to maintain that compliance as standards evolve over time.

As a State develops its strategy for maximizing functionality and funding opportunities for its child welfare information technology, it needs to consider both existing regulations (MITA, NHSIA) as well as future directions (CCWIS) along with trends to promote interoperability and data quality, moving beyond systems that simply enable operations and reporting. Technology needs to inform and enable planning that builds the most cost-effective foundation to enable a multi-division Health and Human Services technology enterprise.

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