MITA Governance Charter

Medicaid Information Technology Architecture (MITA) Governance

1. MITA Introduction

The Medicaid Information Technology Architecture (MITA) is an initiative of the Centers for Medicare & Medicaid Services (CMS) that aims to integrate business and information technology (IT) transformation across the Medicaid enterprise to improve the administration of the Medicaid program. The MITA Framework is comprised of a Business Architecture (BA), covering a full set of Medicaid enterprise business processes, an Information Architecture (IA), and a Technical Architecture (TA). This framework encourages States to evolve their Medicaid enterprise into areas such as health information technology adoption and human services integration to provide quality health care to members.

2. Vision

Ensure that the MITA Framework continues to evolve in a manner consistent with the changing needs of the Medicaid program and its program participants and stakeholders.

3. Purpose

This charter establishes the MITA Governance Board (MGB) as the primary collaborative body responsible for providing strategic direction and tactical oversight of the MITA Framework by providing a forum for States, providers, and the IT industry to share their perspectives on the steps needed to achieve the vision.

4. Authority

The MGB is a non-Federal Advisory Committee Act (non-FACA) organization. As such, the Board's authority is limited to being advisory; final authority for making all changes to the MITA Framework rests with the Center for Medicaid and Children Services' (CMCS) Division of State Systems (DSS).

5. Objective and Scope

The objectives of MITA Governance are listed below.

- Identify MITA enhancements opportunities and align those opportunities with MITA strategic goals and objectives.
- Direct the growth and evolution of the MITA Framework.
- Ensure that the MITA baseline guides the implementation, improvements, and certification of Medicaid Enterprise Systems (MES) projects.
- Ensure that the MITA Framework adheres to Medicaid regulations, policies, procedures, guidance, and technical standards.
- Ensure that proposed MITA enhancement opportunities are duly vetted, accepted, and implemented.
- Assess annually the MITA Framework to ensure that it meets the current, as well as projected, needs of the Medicaid enterprise and its program participants and stakeholders.

The scope of MITA Governance encompasses activities intended to perform the following actions:

- Prioritize, raise awareness of, and address MITA Framework opportunities.
- Provide technical approaches to align with MITA architectures, identify improvements, and make individual operational recommendations.
- Review and propose MITA glossaries and vocabularies.
- Review and provide guidance to stakeholders for using the MITA architectures, guidance, technical standards, etc.
- Coordinate MITA with other Medicaid and health IT initiatives and processes.
- Identify evolving health IT standards relevant to Medicaid IT systems.
- Advance MITA guidance to reflect current federal regulations.
- Advance MITA to reflect evolving technology in health IT.

MITA Governance will not develop or issue policies, define policy meanings, or develop standards for the MITA Framework.

6. Membership and Structure

MITA Governance is organized into the following three tiers to support enhancements of the MITA architectural framework:

6.1. CMCS Management

CMCS management will be comprised of designated CMCS DSS personnel who will make final decisions related to priorities, acceptance, implementation, assignments, and resolution of directed actions.

6.2. Federal Advisor

Federal advisors contribute to the Board as thought-leaders, helping the Board make informed strategic decisions related to evolving MITA.

6.3. MITA Governance Board

The Board shall consist of a minimum of 12 members and two alternates—four members representing each of the three communities: The States, CMS and the provider community, and the IT industry. Board members shall include a mix of people with business and technical expertise in federal, state, and community health. The members shall speak on behalf of their respective communities as a whole and not on behalf of an individual State, provider organization, or proprietary firm.

Board members will be asked to serve for two years and to volunteer four to eight hours per month on MGB activities and meetings.

MGB members will be selected through a competitive and transparent process involving a nomination application form in response to a call for members issued by the CMCS management team. The appointments will be voluntary, without compensation, and finalized when the Director of DSS approves the selected candidates recommended by the CMCS management team.

Geographic representation will be considered as well as an appropriate representation of different healthcare stakeholders (providers, payers, CMS, policymakers, and industry). Eligible candidates will be highly qualified individuals who possess established competence, relevant expertise, and extensive professional experience in the field of Medicaid healthcare.

All members are expected to participate fully in the role of their nominated position as outlined in Appendix A – Section A.3. However, if members are unable to participate, it is expected that members will designate someone who can dedicate the time to participate and fulfill their assignment set forth by the Board, their respective area and the mission of CMCS. Members who miss three consecutive meetings will lose their position on the Board, and a new representative will take their place.

Definition, charge, membership, and oversight will be the responsibility of the Board. A selected member will Chair the MGB meetings. The Chair will provide direction to the Board and carry out the responsibilities outlined in Appendix A – Section A.3. He or she will facilitate communication among Board members and working group participants.

The Board Secretary will be a dedicated resource from CMS who provides support to the Board and makes sure that its business is conducted according to Appendix A – Section A.3.

MGB members will identify MITA enhancement opportunities and make sound and timely individual operational recommendations to facilitate CMCS decision-making, acceptance, and implementation. These members will select working groups to review or complete specific priorities. Alternates may support the Board members anytime, as needed.

6.4. Working Groups

Working groups will play a critical role in the delivery of MITA enhancement projects. Working groups are multidisciplinary groups of people who volunteer to be collectively responsible for delivering defined products or services in support of the MITA Framework. These groups will deliver project outcomes based on CMCS priorities. Priority projects may be organized into working groups according to their architectural type, size, span, scope, prospects, costs, or focus areas.

MITA working groups will have defined start and end dates to deliver agreed-upon projects. Continuance beyond the defined end date will require CMCS management approval. The resources for these groups will be decided after CMCS management provides direction and prioritization for specific project areas.

7. Termination

Board members serve a term of up to two years. CMCS management can extend terms at its discretion.

8. Operating Procedures

Operating procedures for the MGB are outlined in Appendix A. Board members will contribute to the refinement of these procedures and processes, as needed.

9. Meetings

The MGB will meet monthly, or as frequently as needed, at a place and time set by the Chair, as outlined below.

- A quorum of nine (9) Board members must be present to hold a meeting.
- Meetings will be announced with adequate time for arrangements and preparation.
- Background materials, the agenda, and minutes will be circulated.
- An annual face-to-face meeting with CMCS management, open to the public, will be held at the State Healthcare IT Connect Summit.

Organizing an annual face-to-face meeting for the Board allows them to summarize the actions it has taken and recommendations it has made to CMCS over the course of the year, and for CMCS management to report back to the Board on the steps it has taken to address the Board's recommendations previously submitted to CMCS management.

10. Reports

The Board members will report on the MITA enhancement opportunities, backlog of risks, issues, projects, recommendations, decisions made by CMCS management, and resolution of directed actions, as well as on the status of working group activities and projects at each MGB meeting. At the end of each Board meeting, the Chair will decide if the materials from the meeting need to be submitted to CMCS management for review and approval.

11. Duration

The MGB activities will continue, as needed, as long as MES are evolving and MITA is the guiding framework for MES evolution. The duration of MITA Governance activities will influence the need for an updated charter and continuance of the MGB.

12. Record Keeping

The Board will create adequate and proper documentation of the work of the Board and working groups, as determined by the Chair. Records will include, but not be limited to, membership rosters, agendas, meeting minutes, projects, reports, operational recommendations, decisions made by CMCS management, and working papers created and used in the course of the work of the Board and working groups. The Board will carry out the disposition of the governance records in accordance with the CMS records retention policy.

13. Charter Management and Approval

The MGB is responsible for maintaining and updating this Charter as necessary. This MGB charter is approved by CMCS Management.

Appendix A. Operating Procedures

This plan establishes the Medicaid Information Technology Architecture (MITA) Governance structure to support the improvement of MITA planning guidelines for Medicaid information technology (IT) systems development. The MITA Governance Board (MGB) will advise, prepare, and share information on issues related to MITA strategy that involves enterprise challenges, governance projects, framework updates, and compliance with regulations and standards.

The potential project opportunities of the Board may consist of MITA's three architectures (Business Architecture [BA], Information Architecture [IA], and Technical Architecture [TA]), the MITA Maturity Model, MITA's Self-Assessment Guide and Roadmap, those parts of the Advance Planning Document (APD) that relate to MITA, and other areas as agreed upon with Center for Medicaid and Children Services' (CMCS) Division of State Systems (DSS).

A.1 Regulations, Policy, Processes, Procedures, and Guidance

The MGB will ensure that all working groups have appropriately mapped their work to existing regulations, policies, processes, procedures, standards, and guidance, so that identified enhancement opportunities and recommendations are evidence-based and comport with federal requirements. As new or updated rules are adopted, the MGB will track these changes to aid in the evolution of the MITA Framework.

A.2 MITA Governance Guiding Principles

The MGB will operate on the following principles: • Respect different points of view when discussing enhancement opportunities.

- Provide impartial, unbiased recommendations based on Board consensus.
- Make operations recommendations using evidence-based data.
- Share information freely with other Board members.
- Honor the decisions made by CMCS, and advocate for the implementation of those decisions across interest groups.
- Gain consensus after every member present has had an opportunity to comment.

A.3 Key Responsibilities for the MITA Governance Bodies

The key responsibilities for MITA Governance bodies are as follows:

CMCS Management

- Convenes the Board (reconstituted every two years)
- Key decision maker of the Board
- Appoints Board members and assigns roles
- Directs action, defines MITA goals and priorities, and assigns resources
- Reviews and approves enhancements, projects, and recommendations from the MGB
- Provides guidance related to BA, IA, and TA within the MITA Framework

• Releases future versions of MITA guidance

Chair/Facilitator

- Leads the Board and topics for discussions
- Provides leadership and critical thinking
- Requests MGB representation from key stakeholders to support working groups, etc.
- Ensures the MGB Charter is updated and signed
- Manages the proceedings of the Board
- Facilitates discussions among Board members and working groups
- Sets the Board agenda

Vice Chair

- Co-leads the Board and topics for discussions
- Provides leadership and critical thinking
- Requests MGB representation from key stakeholders to support working groups, etc.
- Facilitates discussions among Board members and working groups
- Contributes to the Board agenda

Secretary

- Coordinates meetings, communications, reports, and other interactions with and among the Board, working groups, and stakeholders
- Schedules recurring monthly Board meetings
- Ensures that all members understand their roles, responsibilities and MGB operating procedures
- Provides sound principles of meeting management are consistently applied
- Ensures that MGB performance goals are performed
- Maintains and manages Board distribution lists and other records
- Manages CMS zONE and MMIS mailbox
- Perform ad hoc activities for the Board

Assistant Secretary

- Participates in weekly board planning sessions
- Works with Chair and Secretary to plan for board meetings
- Prepares and distributes the agenda, presentations, notifications or pre-read materials within 24 hours of Board meetings
- Assist Secretary with tracking action items and agenda items submitted to the Board for consideration
- Takes notes and prepares supplemental materials for managing Board meetings
- Prepares and monitors schedule and status of Boards activities and tasks
- Takes attendance and document key ideas, decisions, recommendations and action items.
- Prepares and distributes meeting minutes to the Board 72 hours after Board meetings
- Documents board proceedings, post to board CMS zONE site
- Exchanges emails and other communications with board members as needed

- Receives, reviews, records, and tracks all action and agenda items submitted to the Board for consideration
- Supports Working Groups as needed

Board Members

- Builds strong communications with stakeholders and other entities
- Identifies improvements and makes individual operational recommendations to CMCS management on MITA enhancements
- Gathers enhancements opportunities from outside sources and compile them for review and approval
- Establishes operating procedures
- Defines the project(s) scope and requirements in the draft plan and charter template
- Formulates working groups and identifies potential leaders for working groups
- Tasks and coordinates work across working groups that is consistent with CMCS management priorities, regulations, emerging technologies and states' requirements
- Reviews, tracks, monitors, submits, and reports on enhancement opportunities, gaps, risks, schedules, plans, and project performance to CMCS management
- Formally accepts the results of working groups for inclusion into official MITA guidance
- Maintains and periodically updates the governance Charter

Working Groups

- Reviews the draft plans and charter template, requirements and assigns responsibilities
- Hosts kick-off meeting
- Finalizes the scope and plan for the assigned enhancement project
- Plans, performs, and delivers MITA enhancement projects
- Identify solution approaches
- Recommend an approach to the MGB
- Transition the approved approach to implementation
- Develops project schedule
- Report progress on working group activities
- Provide performance reports to the MGB by established procedures
- Develops work products, as needed for the project deliverables
- Establishes project page and uploads work papers to CMS zONE community site
- Schedules project meetings, prepares agendas, and briefings
- Tracks, monitors, and reports on the progress of project activities
- Escalates issues to the MGB as needed.