



Medicaid Management Information System — MMIS

Purpose

The Medicaid Management Information Systems (MMIS) is composed of several integrated subsystems. These subsystems process health care claims and payments to providers and managed care capitation payments to the DHS-contracted managed care organizations. MMIS is the system of record for member coverage, provider data, service authorization, third-party liability and payment data.

Significance

In fiscal year 2017, MMIS processed approximately 37 million fee-for-service claims, 50 million encounter claims and 28 million capitation payments to managed care providers. DHS paid almost \$11.7 billion to more than 69,000 providers, counties, tribal governments and managed care organizations. The federal government reimburses DHS at a rate between 75 percent and 90 percent of the cost of MMIS operations, maintenance and development. In its modernization efforts, MMIS will continue to improve alignment with federal and state frameworks, regulations, guidance and industry standards.

Who benefits

- Approximately 1.496 million Medicaid (Medical Assistance) and MinnesotaCare members who receive health care coverage through our Medicaid and state-funded health care programs
- Taxpayers and the Legislature who expect cost-efficient administration of publicly funded health care programs
- Counties and tribal governments that rely on MMIS to reimburse health care services according to client eligibility
- Medicaid-enrolled health care providers who provide services to Medicaid members are reimbursed directly and quickly
- DHS-contracted health plans that manage the care of our Medicaid members receive their capitation payments directly and quickly.

Program area

Minnesota IT (MNIT) Services partners with DHS to support oversight of the following business operations of MMIS:

- Provider enrollment
- Claims processing
- Provider payments
- Third-party liability programs
- Service authorizations
- Managed care capitation payments
- Member, provider, county and tribal government support

Programs supported

MMIS supports all federal and state-funded health care programs, which includes Medical Assistance (MA), MinnesotaCare, Minnesota Family Planning Program, Medicare-related programs, Consolidated Treatment Fund, HIV, home and community-based services waived services programs (Community Alternative Care, Community Alternatives for Disabled Individuals, Developmental Disabilities and Related Conditions, Elderly Waiver and Brain Injured), Essential Community Supports, Housing Supports and the Alternative Care programs.

Design features

MMIS is the largest public health care payment system in Minnesota, storing three years of online billing history and featuring more than 240 online screens. MMIS includes the following:

- Secure front-end web portal for enrolled providers called MN–ITS. Enrolled providers must register for MN–ITS to submit and receive all Health Insurance Portability and Accountability Act (HIPAA)-compliant electronic data interchange (EDI) transactions (270/271, 276/277, 278, 820, 834 and 835) via Direct Data Entry (DDE), Real-Time or in batch mode. MN–ITS also includes a mailbox feature where enrolled providers receive all correspondence electronically.
- Pharmacy point-of-sale system to enable prompt, electronic processing of 99.9 percent of all drug claims.
- Interface with Minnesota Eligibility Technology System (METS), MAXIS, PRISM and the Social Service Information System (SSIS), and feeds nightly into the DHS data warehouse to ensure that claims, eligibility and payment information are incorporated into DHS reports and decision-making.

Successes in FY2017

- Recovered or cost-avoided a total of \$960.7 million by ensuring that liable third-party payers paid for health care before using state and federal funds
- Provider screening regulations and excluded providers data share — automated the review of certain provider files saving staff time for other work
- Successfully managed over 236,000 provider records
- Successfully adjudicated 98 percent of electronic claims in fewer than two days from submission
- Completed the inpatient hospital rate rebasing effort related to ICD-10
- Received approval to begin sending production data to Centers for Medicare & Medicaid Services (CMS) for TMSIS (Transformed Medicaid Statistical System).

Opportunities and challenges

DHS, in coordination with Minnesota IT Services (MNIT), will be working to provide improved technology solutions to serve our clients and customers. The two agencies are collaborating with the Centers for Medicare & Medicaid Services (CMS) and other states on several key technology projects including:

- MMIS Modernization — DHS and MNIT continue to work incrementally to modernize core MMIS business and technical processes through a series of phased projects.
- Minnesota Provider Screening and Enrollment (MPSE) — Minnesota is continuing work to build web-based provider screening and enrollment processes that will be shared with other states.

Future planning

MNIT continues to work with its business partners to further the strategy and implementation for modernizing the existing MMIS. It is undertaking tactical steps forward to address laying the foundation for this effort. MNIT is also working with DHS to ensure compliance with the seven standards and conditions CMS requires.

Contacts

Rachel Peterson, rachel.h.peterson@state.mn.us

Joel Hooker, joel.w.hooker@state.mn.us

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