

**Testimony before the HIT Policy Committee  
Enrollment Workgroup  
Presented by  
Dave McCurley, Accenture  
Global Managing Director for Human Services  
November 10, 2010**

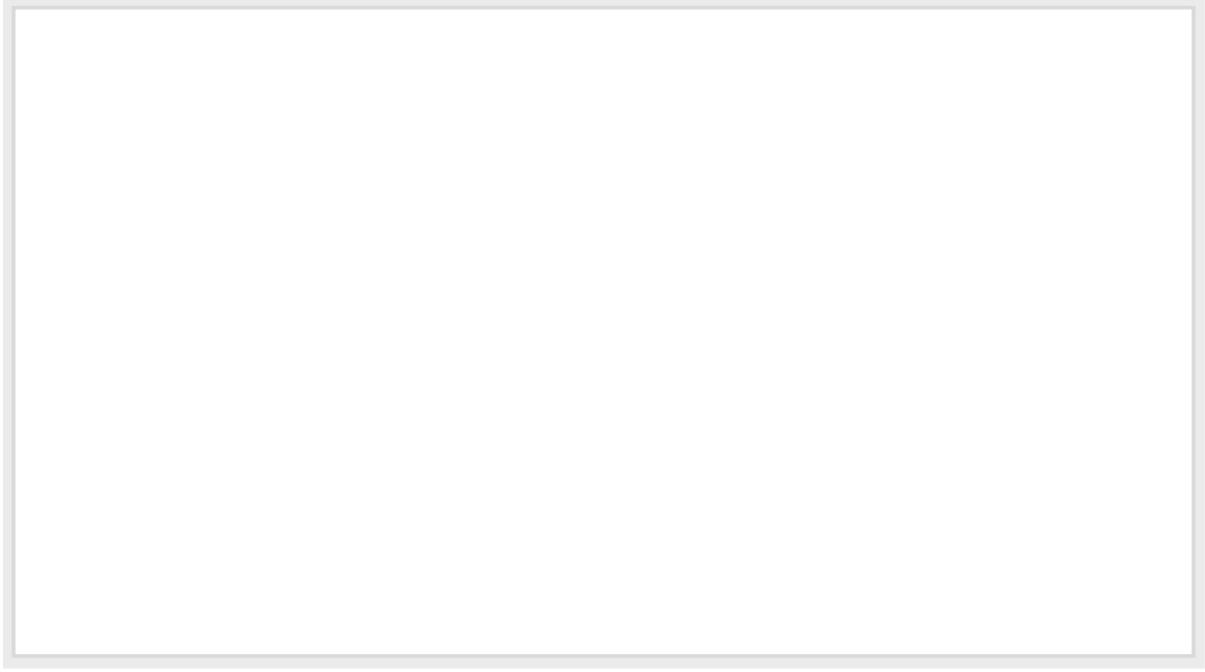
**Background**

Good morning, my name is Dave McCurley and I am the Global Managing Director for Human Services at Accenture. I want to thank the workgroup for the opportunity to testify today. I have more than 26 years of experience at Accenture, and have spent virtually all of that time serving government clients, primarily in the US state and local market. I have led some of the company's largest human services system implementation projects in Texas, Kansas, Wyoming, and Missouri.

It is with this experience and Accenture's commitment to developing innovative applications in the area of health and human services that I look forward to sharing the lessons we have learned and provide our perspective on rules and standards moving forward. We have provided answers to your specific questions as an attachment to this testimony.

**About Accenture**

Accenture is a global management consulting and technology services company with fiscal year 2010 revenues over \$21 billion. We have offices and operations in more than 200 cities in 53 countries and serve clients in more than 120 countries. Our clients include 94 of the *Fortune* Global 100 and more than three-quarters of the *Fortune* Global 500. We serve our clients in five key industry sectors: Products, Resources, Communications and High Tech, Financial Services, and Health and Public Services.



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### **Accenture Health and Human Services Perspective**

For more than 25 years, Accenture has provided health and human services clients in the United States and around the world with innovative, mission critical solutions. We have helped social services agencies complete system integration projects and other large-scale change initiatives that are citizen-focused, outcome-oriented, and cost effective. We help social services administrators apply proven technology to critical operations and service challenges, and we develop innovative strategies to align people and business processes with the demands of a constantly changing environment.

### **Accenture Health**

In our health care consulting practice, we have more than 6,000 professionals, including 4,600 professionals in our North America practice. Our clients include key organizations across the health ecosystem such as Medicaid, Medicare, healthcare providers, health insurers, managed care organizations, public health organizations, pharmaceutical companies, biotechnology companies, and medical products companies. Accenture has assisted more than 800 different healthcare clients within the last five years with more than 200 of those clients located in North America.

Accenture's health client base includes:

- 23 out of 25 health companies in the *Fortune* Global 500
- 9 of the 10 largest Blue Cross Blue Shield plans
- 9 of the 10 largest non-Blues health plans
- 7 of the 10 largest health providers
- 100% of the *Fortune* Global 500 pharmaceutical companies

We recently signed a contract with Stanford Hospital & Clinics to help implement connected health technology. Under the agreement, Accenture will work with Stanford to enhance clinical processes and deploy new capabilities, including business intelligence, health analytics tools, and patient-centered technology.

We also do work for clients globally. For example, Accenture was awarded a contract by the Singapore Ministry of Health to implement their National Electronic Health Record (NEHR) system. Under the NEHR, key medical information such as patient demographics, allergies, clinical diagnoses, medication history, radiology reports, laboratory investigations, and discharge summaries will be exchangeable among healthcare providers.

### **Accenture Human Services**

Accenture has successfully tested and implemented social service solutions in 30 states and 25 countries with more than 8,000 social services practitioners, many of whom are former public servants themselves. As a result, we understand firsthand the challenges human services organizations face and have a proven track record of working with our clients to overcome those challenges. In fact, government organizations, industry analysts and technology publications recognize many of our human services clients for innovative social services system implementations that improve productivity, increase flexibility, and enable better citizen service (Attached is a list of awards received).

Based on these and other experiences in the health and human services arena, we have developed a perspective on the attributes for successful implementation of innovative solutions for the governments we serve and the beneficiaries of their social services programs. This is especially relevant in today's world of unprecedented demand for public services amid growing constraints on revenue budgets and staff to deal with the increasing workload. Key attributes for success include:

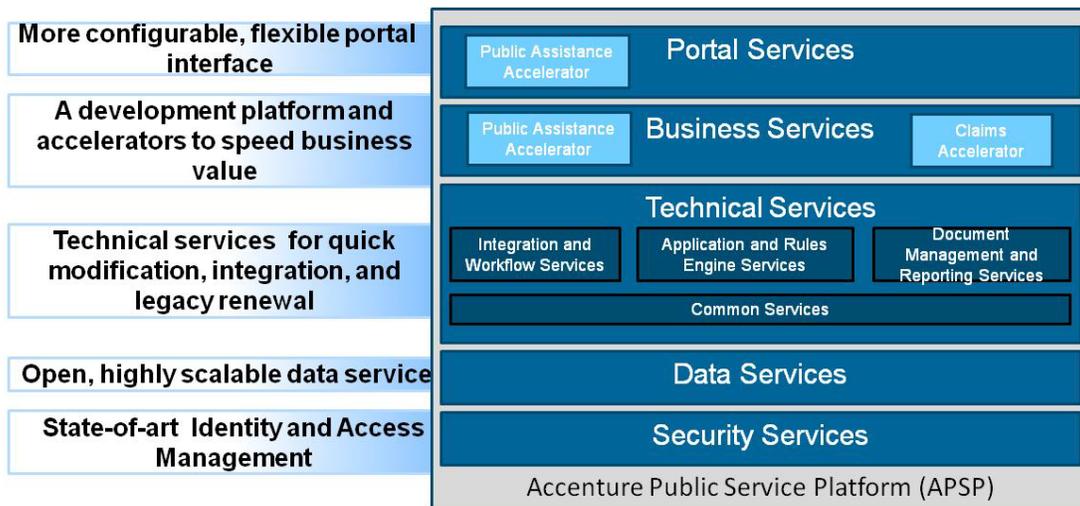
- **Interoperability** is a fundamental enabler of health system transformation. The federal government should support this transformation by establishing standards and policies that enable states and municipalities to innovate and develop systems and procedures that maximize data sharing and system integration. As an example, Accenture is partnering with New York City to use advances in technology to improve access to information, facilitate data sharing between agencies and transform the delivery of health and human services to New York City residents. The vision behind this program called "HHS-Connect" is to breakdown information silos with modernized technology and coordinated agency practices. The city implemented several initiatives to help achieve this vision, including a consumer portal (ACCESS NYC), a worker portal, a common client index, and a document management system.
- Use of **web-based** solutions enabled with enterprise-wide architectures based on Service Oriented Architecture (SOA) principles is important. These solutions should incorporate externalized business rules and workflow content separate from application logic with reusable web services, facilitating ease of maintenance and lower costs to implement and change. In our work with the California Statewide Automated Welfare System (SAWS) Consortium IV (C-IV), this approach resulted in a system that is **significantly easier and less expensive** to maintain than comparable systems for the other two California consortia. In one situation, a specific change to eligibility rules had to be implemented in all three systems. The other two consortia in California, with more traditional legacy systems with complex logic directly in the applications, required \$6 million and \$8 million, respectively, to accomplish the change, and both were significantly behind schedule when completed. The C-IV changes, supported with an external rules engine and separate workflow, were completed ahead of schedule for approximately \$800,000 - a **75-90% savings**.
- Interoperability and system/data integration around a citizen or family-centered business model, which we call "Family First," yield **significant gains in service delivery, cost-effectiveness and customer service**. Automated, cross-system eligibility verification at the Ontario Ministry of Community and Social Services was one of the key components of a \$265 million automated eligibility system that has achieved savings of \$692 million over 5 years by improving error rates, reducing fraud, and delivering legitimate benefits more quickly to the families in need. Cross-program integration holds the promise of reducing overall benefits spend and improving outcomes by

moving families to self-sufficiency and beyond more quickly. A reduction in benefits dependency by an average of only one week in Temporary Assistance for Needy Families (TANF) and Supplemental Nutrition Assistance Program (SNAP), Medicaid, and unemployment would result in a net savings in benefits spend by an astonishing \$45.4 billion per year.

**The Accenture Public Service Platform**

Recognizing the demand for these solutions and the growing body of standards which could be drawn from to support reusability, Accenture has invested in the Accenture Public Service Platform (APSP). APSP is a service oriented framework built on open standards and designed to support flexible new application development, legacy system integration, system transfers, or incorporation of commercial-off-the-shelf (also known as COTS) software solutions. On top of this enterprise architecture “in-a-box,” we have developed the Accenture Public Assistance Software accelerator.

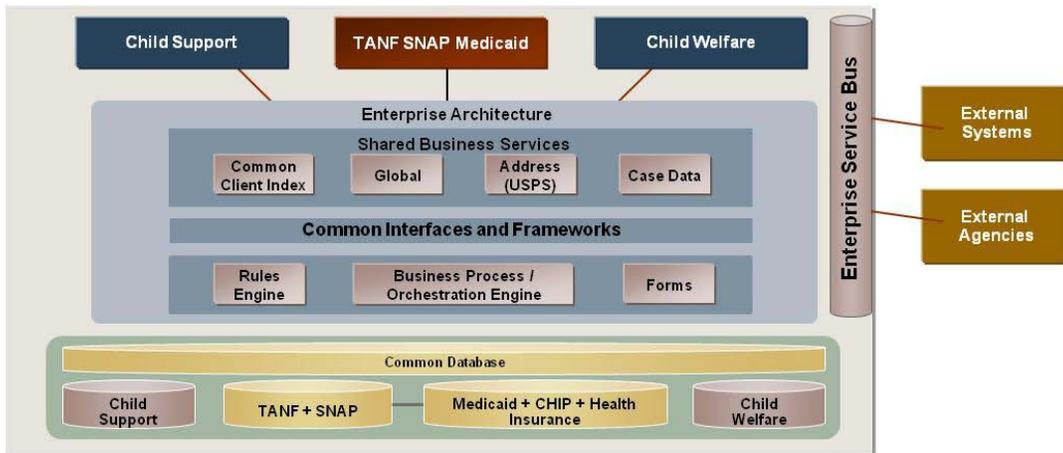
Built on proven components from Accenture’s numerous public service integration and architecture initiatives, the Accenture Public Assistance Software Accelerator comes with industry-specific business services that are pre-configured to meet 50-70% of an agency’s needs out of the box . These business services are designed to be configured to meet client’s current and future needs regarding programs, policies, procedures and processes; launch productivity-enhancing tools for staff; and build new collaborative relationships with speed and accuracy. The APSP is a “best-of-both-worlds” solution for high performance in citizen service delivery. It provides our clients with a **proven repeatable solution to help achieve a lower cost implementation and the technical flexibility to be able to respond to change quickly with low risk.**



The functional content of the C-IV (from California) system and its successful transfer and implementation for the state of Idaho is the inspiration for the Accenture Public Assistance Software Accelerator. In 1997, the four counties in California: San Bernardino, Stanislaus, Riverside and Merced, with a total of more than 800,000 benefit recipients, formed Consortium IV (C-IV)—the fourth SAWS consortium within California. The C-IV Consortium selected Accenture to lead the implementation of a new business model to transform current welfare processes into an interactive, outcomes-oriented system. **Accenture currently operates the C-IV System in California and recently completed its successful transfer to the state of Idaho.**

APSP is an example of the value a technically-robust, standards-based framework for cross-system integration can deliver to agencies trying to work more closely together across their stovepipe service delivery systems. From its inception, it was built to facilitate just such interoperability. The following

diagram illustrates potential integration solutions which could be supported.



Implementation of the Affordable Care Act (ACA) presents an opportunity to promote widespread improvements in how we deliver human services benefits. Accenture strongly believes from our experience with eligibility and enrollment programs that:

- **Interoperability is a fundamental enabler** of health system transformation. The federal government can support this transformation by establishing standards and policies that incent states to develop systems and procedures that maximize data sharing and system integration.
- **Utilization of web-based solutions is crucial** and should be reusable in order to facilitate ease of maintenance and lower costs to implement and change.
- **Interoperability and system/data integration yield significant gains** in service delivery, cost-effectiveness and customer service. We have observed considerable innovation at the state and local level when agencies are provided with the freedom to develop local solutions based on national standards and protocols.

<b>Name of the Award</b>	<b>Sponsoring Organization</b>	<b>Engagement/Nominee</b>
Best Fit Integrator Recognition Awards	Center for Digital Government	MyFloridaMarketplace
Computerworld Honors	Computerworld Honors	NYStimulus Tracker, NYC 311 Online, HHS Connect (NY), EOHHS (MA);
Public Technology Institute	PTI Tech Solution Awards	NYC 311 Online, NYStimulus Tracker
Best of New York Awards - Project Best Advancing Service to the Public	Center for Digital Government	311 Online: New Customer Service Web Portal
TechAmerica	American Technology Awards	NYC 311 Online, NYStimulus Tracker
APHSA Award, Application of New Technologies	APHSA (American Public Human Services Association)	HHS Connect/Worker Connect
2009 Best of NIEM Award (National Information Exchange Model)	NIEM (National Information Exchange Model)	HHS-Connect, Information Architecture and Development
Titan Awards	Oracle North America Titan Awards 2010	State of Georgia – HS Business Intelligence
Best Fit Integrator Recognition Awards	Center for Digital Government	NYCStat Stimulus Tracker
Digital Government Achievement Awards	Center for Digital Government	NYCStat Stimulus Tracker
Computerworld Honors Awards	Computerworld Honors	GA SHINES – Child Welfare
Excellence in Technology Award Program (ETAP): Best IT Collaboration Among Agencies	NYC Excellence in Technology Awards Program (ETAP)	NYC Citywide Performance Report
Intergovernmental Solution Awards - State and Local	American Council for Technology (ACT) and the Industry Advisory Council (IAC)	ACCESS NYC
Best of New York - Project Demonstrating Best IT Collaboration among Organizations	Best of New York - Center for Digital Government	NYCAPS – Child Welfare
Infoworld's 100 MOST INNOVATIVE IT SOLUTIONS	International Data Group "InfoWorld 100"	ACCESS NYC
Overall Excellence in Technology Award	NYC Excellence in Technology Awards Program (ETAP)	NYCAPS – Child Welfare
Best IT Collaboration Among Agencies	NYC Excellence in Technology Awards Program (ETAP)	NYCAPS – Child Welfare
Prize for Public Service Innovation Award	Citizens Budget Commission	ACCESS NYC
Best IT Collaboration Among Organizations	NYC Excellence in Technology Awards Program (ETAP)	ACCESS NYC

## **Responses to Questions from HIT Policy Committee Enrollment Workgroup**

### **For what other programs do these systems also enroll individuals and families?**

Accenture Public Service Platform (APSP) can integrate over 20 human services programs, including TANF, SNAP (including Expedited Services and Disaster SNAP), Medicaid, CHIP, Child Care, Foster Care, Refugee Cash Assistance, Homeless Assistance, and Employment Services.

### **Please briefly describe the high-level current architecture of the system(s).**

APSP is an enterprise architecture that is loosely coupled, SOA-based, and employs configurable external mechanisms like Rules Engines and BPM workflow systems. All components (e.g., Enterprise Content Management) and frameworks (e.g., Identity Resolution) are designed as services that are available throughout the application and other architectural layers, such as the Batch Architecture. Service identification is performed on all external interfaces to determine their readiness to be included in the overall SOA. Please refer to the diagram above.

### **When was the system(s) procured and when did it become operational?**

The C-IV system was procured in March 2001. Initial system deployment began in March 2004 and was completed in October 2004, rolling out to Merced, Stanislaus, Riverside, and San Bernardino counties which together included 6000 workers and over 1 million customers. In 2007, 35 additional counties joined the C-IV Consortium. These additional counties migrated to C-IV in scheduled releases from 2009 to 2010.

Design and Development on APSP began in March, 2009. The APSP technical architecture blueprint was based upon our knowledge, experiences, and Accenture Human Service initiatives, including the very latest in SOA technologies and concepts. APSP version 1.0 was released in October of 2009.

### **What was the initial total cost of the system implementation, over how many years; what are the total annual maintenance costs?**

The C-IV total cost of services for all phases of system implementation for Design, Build, Test, and Deployment phases was approximately \$160M over 4 years. This included deployment in the four original counties, training of 6000 eligibility workers, and support for 800,000 recipients.

Application Maintenance includes the development costs associated with maintaining the 16 functional programs, integrated eligibility rules engine, centralized document imaging solution, in-bound and out-bound IVR, and data analytics and reporting. The Application Maintenance costs are approximately \$16.5 million per year.

Production and Operations includes maintenance and support of two data centers, a central help desk, central print, and local IT support for 39 counties, 13,000 workers, and 2 million customers. Production and Operations costs are approximately \$16 million per year.

The C-IV transfer to Idaho was accomplished in 2008-9 at a total cost of approximately \$25 million. It is currently maintained for less than \$5 million per year.

For future systems, we anticipate the cost to be significantly lower with APSP because we will reuse components based on the knowledge and experience gained from our global human services systems implementations.

**Do you provide for online enrollment?**

Yes, APSP includes a platform that allows for the acceptance of web-based applications, or online enrollment, for SNAP, TANF and Medicaid programs.

**If so, does the application contain error checks and/or business logic, or require applicants to complete all required questions before applications can be submitted?**

Online enrollment can be submitted via the APSP Public Portal without all information completed. Currently, all requests are reviewed internally by case managers for completeness. Services such as spell check, identity resolution, and address normalization are provided in the Public Portal to limit errors.

Future enhancements in the Public Portal will enable the entity to determine the workflow specific to that entity in a customizable way.

**How is paper documentation handled?**

Paper documentation is submitted via mail by the client. Once received, the documentation is scanned and stored in the enterprise content management system with identifying metadata such as case number, person, document type, etc., and then attached to the electronic case file.

**What percent of applicants apply online? What is the application completion percentage for these applications?**

At C-IV, 10%-15% of the applicants apply online and complete their applications.

**Verification Interfaces:**

**Does your system currently use a real time, Web services approach to obtain verifications from Federal and/or State data sources?**

Accenture makes extensive use of web services provided by third parties for access to verification data and they are at the heart of the Enterprise Service Bus within the APSP.

**If so, what are the benefits?**

We believe using web services for these interfaces is a leading practice due to their re-usability, their utility across multiple technology platforms, and the ease with which they can be modified as requirements change.

Web services also provide a convenient mechanism for sharing eligibility data among and between state health and human service agencies.

**Recommendation 2.2 recommends development of a reference software model for obtaining verification from Federal agencies and other State and National data sources. How difficult would it be to connect your system to such a reference software model? What challenges would you encounter?**

The Federal reference software model contained in Recommendation 2.2 is consistent with the APSP architecture. Connection to such a model represents a leading practice and would present no difficulties for Accenture.

**Would this be a preferred approach or would it be simpler to obtain verifications using existing methods?**

APSP is a SOA/SaaS-based solution that includes streamlined, web-enabled tools for services application, transparent and configurable eligibility rules, and a full suite of case management and benefits delivery components.

APSP enables eligibility and enrollment information to be transmitted using HIPAA standards transaction sets. Accenture works with each client to identify their adopted standards, and then helps them implement solutions that support those standards. APSP provides several mechanisms for supporting privacy, including security auditing, data access auditing, support for encryption of data (at rest and in motion), and the ability to redact personal information within the reporting layer. APSP also provides portability of data in the form of HL7, Continuity of Care Records, and Continuity of Care Documents.

APSP is natively compliant with: NIEM, HIPAA, NIST and other federal and state standards  
APSP is natively capable of supporting standards such as NIEM. As standards emerge, the tools for generating compliant messages are built into the system as services that are available throughout the architecture. Then, applications can call the service to generate and exchange compliant messages with service partners. The services can also be used to un-marshal messages received from service partners. This pattern is currently in use throughout APSP and is readily available to support new and emerging standards.

### **Privacy and Security:**

#### **How, if at all, does the consumer interact with your system?**

The consumer interacts with our system via the APSP Public Portal. The Public Portal is integrated with IVR and call center solution components and the document management service, allowing multi-channel support for customer interaction.

#### **How difficult would it be to modify your system to offer consumer access to and control over eligibility and enrollment information?**

Our Public Portal currently allows the user access to demographic case data, enrollment initiation and even provides some initial eligibility determination. Users can update demographic data or provide supporting information which can impact eligibility and enrollment, but are generally restricted from actually affecting eligibility and enrollment determination. These restrictions are policy-based versus a result of technical solution, so could be enhanced to accommodate user control if policy was adjusted.

#### **What functions/standards do your systems currently contain, if any, to track and monitor third party access? Do your systems currently have the ability to grant separate authentication and/or login for third parties; track third party access and activity in immutable audit logs; and/or provide tools for the applicant to designate and/or revoke or time-limit third party access?**

The APSP security layer provides a user context, for every user, created at login. This context tracks authentication of all internal users. APSP also provides fine-grain access auditing for all users on all tables. APSP can be configured to block access to all controls in the system, and individual auditing can be set for each control as well. Time-limit access is managed within the role provisioning features within the security layer. The security context is available throughout the application and the architecture, including the ESB, the Batch Architecture, etc. This allows the APSP security layer to provide one unified view of security management.

#### **What safeguard systems do your systems currently include?**

##### **Do you currently encrypt data in motion? If not, why not? What are the challenges in doing so?**

As a technical architecture, APSP supports encryption of data in motion. We help our clients determine their specific needs regarding encryption and data protection. APSP is compatible with both hardware- and software-based IP-Sec solutions for providing this capability.

##### **Do your systems currently have the capacity to generate and publish audit logs? If not, why not? What are the challenges in incorporating this function?**

APSP has the ability to audit data access and control access. These audit logs are available via report to authorized system users.

**Do you have access control functions? If not, what are the challenges to incorporating this?**

The APSP security service layer provides a security context to the applications deployed on the APSP architecture. This security context contains an enumeration of all entitlements available to this particular user and the role(s) in which he/she is a member. Fine-grained control is possible at the page, data, and control level.

**Do your systems incorporate automatic log off functionality? If not, what are the challenges to incorporating this?**

Yes. This is configurable by client and application. APSP typically handles automatic log off according to the duration of inactivity. This is an all-for-one type scenario where everyone is subject to the same duration threshold. At the end of the inactivity period, the web server ends the session, thus forcing the user to login again.

APSP also supports variable inactivity durations prior to automatic log off. In this case we include the inactivity period threshold, i.e., 10 minutes for workers, 30 minutes for managers, etc., in that role's security context and the application uses this threshold to determine whether to automatically log off the user.

**Do your systems currently include any standards for ID assurance? If so, at what level? What are the challenges associated with this?**

The APSP security service layer depends on commercial or open-source products to provide the identity and access management information encapsulated in the security context. Modern identity and access management products provide directory services, authentication, credentialing, provisioning, auditing and identity synchronization capabilities. They protect highly sensitive information and support compliance with myriad government regulations. Accenture assists our clients in determining the best overall product(s) to provide these services and incorporates the desired product into the security services.