# Issues

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| # | Description | Assigned To | Status |
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# Option Notes

## Question

1. In the options where a data conversion occurs, do any MMIS records that are inactive need to be converted? Do inactive records get activated or do new records get created? Depends on the inactive reason and how long. I’d have to come up with the requirements for this.

## No data conversion

* Description
  + Convert no data
  + Provider enroller starts with a new provider profile and enters all information
  + Service agent tasks during review process:
    - Queries MMIS to determine the existing MMIS records
    - Manually enters "Stub" legacy records so that interface knows what MMIS records to update
    - Confirm all required historical information was entered correctly by provider enroller and add missing information and correct errors
      * The "required historical information" needs more analysis but consists of records with effective dates such as credentials, categories of service, major programs, affiliated individuals/organizations, third party billers, owners/authorized persons, etc.
* Pros
  + Eliminates data conversion
* Cons
  + Reentry of historical information will be time consuming and error prone
  + The current MPSE user interface and business rules often don't allow the end date of a record to be entered until the record is in MMIS. The workaround is to enter the record, send to MMIS, then enter the end date, then send to MMIS again. This is not good…
  + System of record is not clear until all provider have updated or revalidated

## Convert maximum data

* Description
  + Convert all MMIS data for provider types supported in the portal
  + The goal would be that after data conversion all in-scope MMIS records can be recreated from MPSE (clear all MMIS data owned by portal, execute interface, all data is re-populated)
* Pros
  + Minimized the data entry required by the provider enroller
  + System of record for certain provider types and certain information is MPSE
* Cons
  + Not all MPSE required data is in MMIS so after the data conversion, not all MPSE validation rules will be satisfied
    - For example, credentialing contact, credential image, services, etc.
    - If allowances are not made, will end up in situation where user interface does not allow a data field to be edited because the record is in MMIS, but the business rules are throwing an error because the information is not correct
  + Selecting the proper organization and facility location information will be difficult
    - There will be many MMIS records for the same organization, each with the potential to have different spelling of the name, different owner information, etc.
    - All facility locations may use the same mailing address, however, if spelled differently conversion will create many addresses
  + To get a "clean" conversion, service agents may need to perform a data cleanup prior to conversion. However, Angie has attempted and the results were not positive (picked 25 orgs to cleanup 30,000 records and when complete, they were still not clean)
  + Data fields such as first, middle, and last name are separate fields in MPSE but a single field in MMIS, may need to be dealt with during conversion
  + MMIS addresses may have contact or practice in first line, may need to be dealt with
  + Extensive effort required

## Convert minimum data

* Description
  + Convert minimum data to provide the information necessary for the provider enroller to recognize the record along with the information necessary for MMIS integration (which MMIS records are updated from the MPSE provider record)
  + Convert effective dated records so years of history does not need to be reentered
  + Don't convert non-effective dated information that can easily be entered
    - Mailing addresses, what else?
  + Don't bother with (accurate) name or address parsing
* Pros
  + Minimizes data conversion effort
  + Does not require provider enroller or service agent to type in years of historical data
* Cons
  + Like other options, must address business rules and historical records
  + System of record not clear until all providers through revalidation or update

## Dual Conversion

* Description
  + MPSE has two data "areas"
    - MPSE
    - MPSE Legacy
  + All provider enrollment entered data goes to MPSE
  + MPSE Legacy is used in the provider review flow
  + MPSE Legacy is a staging area for MMIS integration and storage for historical MMIS information
  + Convert current information to MPSE – user must make it conform to business rules
  + Convert history to the MPSE legacy – no need to conform to business rules
  + After service agent completes review, a combination of service agent entry and business rules create the MPSE Legacy data. The service agent can review the MPSE legacy record (and make corrections? In theory, correction made in MPSE then flow to MPSE Legacy)
  + MPSE Legacy would contain the MMIS record, identified by a legacy id (provider type, facility location, NPI/UMPI) and:
    - All licenses and specialties (the more current licenses and specialties are linked to MPSE credentials, those without links are for historical purposes and cannot be updated)
    - Etc.
  + MPSE Legacy data would be input to MMIS interface
* Pros
  + Solves the issues of what to do with history for providers enrolled since the 1980s – does not require old data to conform to current business rules
  + Data in MPSE cleaner – all data will conform to current business rules
  + Makes MPSE the system of record from day 1
  + Exposes more of the logic required to created MPSE Legacy records to provider enroller (rather than having it occur behind the scenes)
  + Once modernization is complete and the historical information is no longer required, the MPSE Legacy tables can be dropped
  + Don’t need to modify business rules to ignore historical records
  + UI does not need to be immediately able to deal with large numbers of historical records
* Cons
  + Data conversion more complex – some licenses/specialties go to MPSE, other to MPSE Legacy
  + Will need to "relax" the rules related to editing records in MMIS so they can be updated to be compliant with business rules (this is likely a con of all options)
  + Specialist has two views of licenses
  + Requires more pages to view data (hopefully simple pages)
* Questions
  + Provider\_RBS?

## Miscellaneous Notes

* Convert the MMIS upper case information into proper case
* Some providers have been enrolled since the 1980s. How many years of historical data must be converted or entered into the portal for each effective dated record? (All years, x years, all years with claims history, or ???) one thought: convert all current data (data without end dates) and maybe 5 years of historical data (data with an end date equal to or less than ()TODAY-5 years), but add a disclaimer that we may have data going back further depending on how long the provider has been enrolled. This may need to be kicked back and forth to iron out.
* In any scenario, the historical records may not conform to the business rules. May need a strategy that business rules only validate effective dated records with end date within prior x months (maybe 12 months?)
  + Will an image of a credential that expired in 1991 be required? What happens if a managing employee from 1991 does not have a SSN? This is where we’d have to relax the rules. No data with an end date would need to have an image attached. Nor would we need them to correct missing data on anything historical.

# Description

# Primary actor(s)

# Main flow: Manage application fee

## Precondition(s)

## Steps

## Alternate flow:

# Change control

| Version | Date Revised | Revised By | Revisions |
| --- | --- | --- | --- |
| 1 | 5/18/2015 | David Marsh | Initial draft |