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Capability Question	Level 1	Level 2	Level 3	Level 4	Level 5
Business Capability Descriptions					
Is the process primarily manual or automatic?	The process consists primarily of manual paper-based activity to accomplish tasks. SMA identifies the samples and generates Recipient Explanation of Medical Benefits (REOMB) manually. Distribution is via the mail.	SMA uses a mix of manual and automatic processes to accomplish tasks. SMA uses sampling enhancements to target selected populations.	SMA automates process to the full extent possible within the intrastate. SMA may integrate the REOMB with Personal Health Records (PHR). When SMA uses PHR, it enhances the sampling process to target selected populations. SMA generates EOBs automatically that are available via web portal.	SMA automates process to the full extent possible across the interstate.	SMA automates process to the full extent possible across the nation.
Does the State Medicaid Agency use standards in the process?	SMA focuses on meeting compliance thresholds for state and federal regulations using state-specific	SMA applies a mix of HIPAA and state-specific standards.	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for intrastate exchange of	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for clinical and interstate	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for national exchange of

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Capability Question	**Level 1**	**Level 2**	**Level 3**	**Level 4**	**Level 5**
	standards.		information.	information exchange.	information.
If sampling is used, what sampling algorithm is used?	SMA complies with federal regulations to produce random samples of REOMB monthly.	SMA enhances the sampling process to target selected populations.	In addition to the targeted populations, SMA generates the sampling dynamically based on provider billing patterns and Surveillance Utilization Review System results.	Maturity level is not applicable.	Maturity level is not applicable.
Is communication linguistically, culturally, and competency appropriate?	Functionally, linguistically, culturally, and competency appropriate outreach and education materials are lacking because they are difficult and costly to produce.	Outreach material is functionally, linguistically, culturally, and competency appropriate, but at great expense. SMA limits outreach material by state defined parameters (e.g., only two (2) languages used).	SMA automates process to the full extent possible across the intrastate. Use of electronic communications makes provision of functionally, linguistically, culturally, and competency appropriate outreach material more cost-effective.	SMA automates process to the full extent possible across the interstate.	SMA automates process to the full extent possible across the nation.

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How does the State Medicaid Agency collaborate with other agencies or entities in performing the process?	Very little collaboration occurs with other agencies to standardize information exchange or business tasks.	SMA collaborates with other agencies and entities to adopt HIPAA standards and Electronic Data Interchange (EDI) transactions.	SMA collaborates with other intrastate agencies and entities to adopt national standards, and to develop and share reusable business services.	SMA collaborates with other interstate agencies and entities to adopt national standards, and to develop and share reusable processes including clinical information.	SMA collaborates with agencies and entities for national (and international) interoperability improvements that maximize automation of routine operations.
Business Capability Quality: Timeliness of Process					
How timely is the end-to-end process?	Process meets threshold or mandated requirements for timeliness (i.e., the process achieves results within the time specified by law or regulation).	Process timeliness improves through use of automation. Timeliness exceeds legal requirements.	Timeliness improves via state and federal collaboration, use of information sharing, standards, and regional information exchange hubs. Timeliness exceeds Level 2.	Information is available in near real time. Processes that use clinical information result in immediate action, response, and results. SMA has interstate interoperability, which further improves timeliness over Level 3.	Information is available in real time. Processes improve further through connectivity with other States and with federal agencies. Most processes execute at the point of service. Results are almost immediate.

MITA
Medicaid Information
Technology Architecture

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Capability Question	*Level 1*	*Level 2*	*Level 3*	*Level 4*	*Level 5*
Business Capability Quality: Data Access and Accuracy					
How accurate is the information in the process?	Use of direct data entry for information collection is manually intensive and susceptible to inconsistent or incorrect information. Stakeholders are unable to rely on information for decision-making.	HIPAA standard transactions improve accuracy of information but the decision-making process may be erroneous or misleading. Accuracy is higher than at Level 1.	Automation of information collection increases the reliability of SMA's internal information. External sources of information use MITA Framework and industry standards for information exchange. Decision-making is automatic using standardized business rules definitions. Members can review data online and report on a questionable service through a web interface Accuracy rating is at 99% or higher.	Automation of information collection increases the reliability of SMA's internal and external sources of information. SMA adopts MITA Framework and industry standards for information exchange with interstate agencies. Decision-making is automatic using regional standardized business rules definitions. Members have direct access to Personal Health Records. Accuracy rating is at 99% or higher.	SMA adopts MITA Framework and industry standards for information exchange with national agencies. Decision-making is automatic using national standardized business rules definitions. Accuracy rating is at 99% or higher.

CMS
CENTERS for MEDICARE & MEDICAID SERVICES

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Capability Question	Level 1	Level 2	Level 3	Level 4	Level 5
Business Capability Quality: Cost-Effectiveness					
What is the cost of the process compared to the benefits of its results?	High relative cost due to low number of automatic, standardized tasks. Effectiveness is 50% or below, associated with responses to the REOMB that lead to program savings.	Automation improves process and allows focus on exception resolution, improving cost effectiveness ratio over Level 1. Flexibility in targeting REOMB over manually identifying the sample improves effectiveness of responses to 75% or better.	SMA adopts MITA Framework, industry standards, and other nationally recognized standards further improving cost effectiveness ratio over Level 2.Integration with Personal Health Record may increase effectiveness to 85% or better.	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for interstate information exchange. SMA increases cost effectiveness ratio over Level 3.	SMA adopts MITA Framework, industry standards, and other nationally recognized standards for national (and international) information exchange. SMA increases cost effectiveness ratio over level 4.
Business Capability Quality: Effort to Perform; Efficiency					
How efficient is the process?	Process is labor intensive. There is wasted effort or expense to accomplish tasks. Process meets minimum state process guidelines and SMA performance	Automation and state standards increase productivity. Efficiency is higher than Level 1.	SMA adopts MITA Framework, industry standards and information exchange with intrastate agencies and entities. The member returns REOMB electronically or responds to REOMB on the web	SMA adopts MITA Framework, industry standards and information exchange with interstate agencies and entities improving efficiency to 98% or higher.	SMA adopts MITA Framework, industry standards and information exchange with national agencies and entities improving efficiency to 98% or higher.

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Capability Question	Level 1	Level 2	Level 3	Level 4	Level 5
	standards. Efficiency is low.		portal improving efficiency to 95% or higher.		
Business Capability Quality: Accuracy of Process Results					
How accurate are the results of the process?	Manual processes result in greater opportunity for human error. Accuracy is low.	Automation and standardized business rules definitions reduce error and improve accuracy above Level 1.	SMA adopts MITA Framework, industry standards and information exchange with intrastate agencies and entities improving accuracy to 99% or higher.	SMA adopts MITA Framework, industry standards and information exchange with interstate agencies and entities improving accuracy to 99% or higher.	SMA adopts MITA Framework, industry standards and information exchange with national agencies and entities improving accuracy to 99% or higher.
Business Capability Quality: Utility or Value to Stakeholders					
Does the business process satisfy stakeholders?	Stakeholders lack confidence in information negatively affecting stakeholder satisfaction with the process.	Automation and standardization provides clear and useful information. Stakeholder satisfaction is greater than Level 1.	SMA adopts MITA Framework, industry standards and information exchange with intrastate agencies and entities improving stakeholder satisfaction to 90% or	SMA adopts MITA Framework, industry standards and information exchange with interstate agencies and entities improving stakeholder	SMA adopts MITA Framework, industry standards and information exchange with national agencies and entities improving stakeholder

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Capability Question	Level 1	Level 2	Level 3	Level 4	Level 5
			higher. SMA uses survey or questionnaire for information collection.	satisfaction to 95% or higher.	satisfaction to 98% or higher.