

New Mexico HHS 2020 MITA Technical Management Strategy (TMS)

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1 ABOUT THIS DOCUMENT

The HHS 2020 MITA Technical Management Strategy (TMS) document is intended to demonstrate how New Mexico's selected Enterprise Architecture addresses the mandatory considerations listed in the CMS publication "MITA Technical Management Strategy 3.0 Part III Chapter 2". The considerations have been grouped into 3 categories:

- 9 Principles
- 8 Goals
- 29 Objectives

The TMS follows the EA organization into Business, Data, and Technology domains. This document first describes the approach to governance applied to work products produced in each of the three domains. Governance elements are sub-divided into Standards, adherence to Requirements, and Traceability of work products across the SDLC disciplines of the HHS 2020 enterprise. This document then transitions to strategy discussions applicable to Business, and Data domains. Since the Technology domain is comprised of Software and Infrastructure portions, each receives a separate set of strategy considerations.

The document makes use of both structured and free-form diagrams to convey various topics. Proficiency with Unified Modeling Language in general and with Static Structure diagrams in particular is assumed of the reader. SDLC discipline metamodel diagrams found in the governance section use class elements (rectangle shape with compartments for attributes and operations hidden) to represent concepts. Concepts are related through a combination of stereotyped dependencies and directed associations. Conceptual Solution Architecture diagrams use component elements with implemented Interfaces and dependencies. Related components may be grouped into component packages.

Appendix B contains a listing of all TMS considerations mapped to relevant document sections. It serves as a coverage checklist, ensuring that every salient point has been adequately covered in the document's narrative.

1.1 RELATIONSHIPS TO OTHER DOCUMENTS

This MITA TMS document is influenced by and, in-turn, influences numerous other HHS 2020 documents. The table below lists the most significant cross-document dependencies.

Table 1: MITA TMS Relationships to Other HHS 2020 Documents

| Document | Relationship to MITA TMS |
|--|---|
| MITA State Self-Assessment (SS-A) | The current SS-A to-be vision is at a very high level to comply with MITA level 4. As NM continues to further define the to-be vision in the MITA SS-A, the TMS and updated MITA SS-A will be used to confirm alignment to MITA Maturity level 4. |
| MITA Concept of Operations (ConOps) | The ConOps details how NM will own, operate and benefit from the HHS 2020 EA. The TMS provides an end-to-end SDLC perspective tying together the HHS 2020 design and run-time capabilities. |
| Reference Technical Architecture (RTA) | The RTA details design-time governance applied to the Software Architecture elements and documents the HHS 2020 EA solution architecture approach aligned with the TMS vision. |
| <TBD> | |

2 GOVERNANCE

Every aspect of the HHS 2020 enterprise architecture must converge on the singular strategic goal of creating a person-centric service ecosystem for the State of New Mexico. The purpose of governance is to provide standards, guidelines, checklists, auditing and quality assurance mechanisms applicable to every enterprise architecture activity and work product, including Business Architecture, Information Architecture and Technical Architecture.

The HHS 2020 lays out an architecture for a modular enterprise that can be applied repeatedly to new functionalities as they become available, both within the NM Medicaid enterprise but also within the larger NM health and human services enterprise.

Governance considers every phase of solution development from envisioning the future-state business processes, to design and implementation of new solutions, to solution operation in production, to accommodation of ongoing changes and enhancements. The HHS 2020 EA strives to make governance elements understandable, practical and applicable to ensure their adoption by all HHS 2020 stakeholders.

2.1 STANDARDS-BASED

NM HSD's adherence to standards aligns with the State's philosophy of buying and configuring COTS products, rather than building custom solutions. Standards compliance ensures interoperability. Adherence to standards increases solution modularity, allowing for a best-of-breed mix of implementation options owned by the State and brought in from BPO modules (e.g., Financial Services, Quality Assurance, Benefit Management Services).

2.1.1 Government and Regulatory

The following table lists applicable government and regulatory standards and ways in which they affect the HHS 2020 enterprise architecture.

Table 2: Government and Regulatory Standards

| Standard | Relationship to HHS 2020 |
|---|---|
| MECT | The latest CMS-approved version of the Medicaid Enterprise Certification Toolkit was used to ensure the HHS 2020 EA and RA follow the applicable guidelines and standards as set forth in the MECT checklist SRC's . |
| Health-IT.gov HIE | The Health Information Exchange (HIE) has a high-level set of initiatives that provide electronic health information exchange networks to enable providers and patients to securely share a patient's vital medical information electronically, thereby improving the quality and cost of care. |
| FICAM | Federal Identity, Credential and Access Management is the Federal adaptation of ICAM and is quite useful in raising the bar of expectations and interoperability between federal and State agencies in managing users' Identities, credentials and accesses. |
| Clinger-Cohen Act | Enterprise Architecture became a recognized strategic and management best practice of the federal government with the passage of the Clinger-Cohen Act in 1996. |
| Federal Information Security Management Act (FISMA) of 2002 | Requirements for all federal agencies to develop, document and implement agency-wide information security programs. |

2.1.2 Visual Modeling

The HHS 2020 EA adopts a model-driven architecture approach linking together visual depictions of Business, Data and Technical Architecture elements.

The EA's visual modeling standards are listed in the following table.

Table 3: Visual Modeling Standards for Architectural Domains

| Domain | Domain Element | Modeling Notation | Modeling Artifact | Tool |
|--------------------------|-------------------------------------|--|----------------------------------|---------------------------------|
| Business Architecture | Business Process | BPMN | Business Process Model | Oracle BPM Studio |
| Information Architecture | Conceptual Data Model | UML with data modeling extension exportable to ERD via XMI | Conceptual Data Model | Sparx Enterprise Architect (EA) |
| Information Architecture | Logical Data Model | UML with data modeling extension exportable to ERD via XMI | Logical Data Model | Sparx EA |
| Information Architecture | Physical Data Model | UML with data modeling extension exportable to ERD via XMI | Physical Data Model | Sparx EA |
| Information Architecture | Data Warehouse and Data Mart Models | Entity Relationship | DW/DM Design Model | Computer Associates (CA) ERwin |
| Technical Architecture | Infrastructure Architecture | Infrastructure Modeling Notation | Infrastructure Architecture | MS Visio |
| Technical Architecture | Software Architecture | UML | Reference Technical Architecture | Sparx EA |
| Technical Architecture | Software Architecture | UML | Requirement Realization | Sparx EA |
| Technical Architecture | Software Architecture | BPEL | Orchestration Design | Oracle BPM Studio |

2.1.3 Enterprise Architecture

The Enterprise Architecture standards are listed in the following table.

Table 4: Enterprise Architecture Standards

| Standard | Relationship to HHS 2020 |
|---|--|
| DoDAF | The U.S. Department of Defense has a widely-used, strongly enforced architecture framework. Version 2.02 was published in 2010 and was used as a checklist for HHS 2020 since it is an advanced, practical architectural framework and favors shared information standards. |
| National Institute of Standards and Technology (NIST) | <p>The National Institute of Standards and Technology (NIST) created and published the Federal Enterprise Architecture Model in the late 1980's. It was then promoted in September 1999 by the Federal CIO Council as the Federal Enterprise Architecture Framework (FEAF). It has been a foundational architectural standard for federal agencies (including CMS) that were developing enterprise architectures for systems that operated across agency boundaries.</p> <p>NIST also has a Cloud Computing Reference Architecture. Published in September 2011, it presents thoughts and guidance on standards for leveraging cloud computing in federal systems.</p> |
| NHSIA | <p>www.acf.hhs.gov</p> <p>Published by the Administration for Children and Families (ACF) in 2012, the National Human Services Interoperability Architecture (NHSIA) provides an enterprise architecture framework for the ACF to guide development of systems that work together across organizational silos and boundaries to accomplish ACF mission and goals. Its goals and objectives are very similar to CMS goals and contain common drivers to those of HHS 2020 including Interoperability across organizational and system boundaries, "no wrong door" for clients, and improved data sharing and other similarities.</p> |
| TOGAF | <p>The Open Group created their architecture framework in the early 1990's and released the first TOGAF in the mid 1990's. It is the most complete EA framework, but many criticize it as too complex and difficult to apply. Many organizations have adopted and adapted it to their organization; therefore, no two are the same. Some organizations complain that it is lacking how-to recommendations.</p> <p>The HHS 2020 EA will follow the CMS MITA architecture. MITA is easier to navigate and apply than TOGAF and is much more practical in its implementation.</p> |
| The Zachman Framework | <p>First defined back in the 1980's by John Zachman, the current framework is an ontology for enterprise architecture. It defines six dimensions of architectural specifications/interrogatives (who, what, when, where, why and how) and five levels of abstraction (from the most conceptual "owners" view to the most detailed "implementation" view).</p> <p>This is the most rigorous of all architectural frameworks but is not a methodology. Like TOGAF and others, it has never been fully implemented.</p> |

| Standard | Relationship to HHS 2020 |
|--|---|
| NASCIO | <p>The National Association of State Chief Information Officers is an active organization of State CIOs and industry leaders that advance the state of data management, architecture and governance for State CIOs. They have several operating committees that align with HHS 2020 efforts (https://www.nascio.org/Committees), including:</p> <ul style="list-style-type: none"> • data management Working Group • Enterprise Architecture and Governance Committee • Cybersecurity Committee • Privacy and Data Protection Working Group |
| Capability Maturity Model Integration (CMMI) Maturity Level 4 for Development (Product and Process Quality Assurance (PPQA)) | Organizational process maturity framework. |

2.1.4 Business Architecture

The following table lists standards applicable to HHS 2020 Business Architecture definition

Table 5: Business Architecture Standards

| Standard | Relationship to HHS 2020 |
|--------------------------------|--|
| MITA 3.0 | CMS Medicaid Information Technology Architecture (MITA), version 3.0. It presents the concepts, principles, contents, deliverables and expectations of CMS-compliant systems. MITA 3.0 is the basis of the HHS 2020 EA. |
| Seven Conditions and Standards | The Seven Conditions and Standards for Advanced Funding were incorporated into HHS 2020 EA. |
| MITA Maturity Model | The MITA Maturity Model was consulted in constructing HHS 2020 EA. |
| SAMHSA BA-MITA | The Substance Abuse and Mental Health Services Administration (SAMHSA) worked with CMS to create the Behavioral Health (BH) BH-MITA project, which was compared to HHS 2020 to ensure consistency and mapping between HHS 2020 assets and SAMHSA guidelines (for non-MMIS organizations) |

| Standard | Relationship to HHS 2020 |
|---|---|
| Business Process Modeling Notation (BPMN) | Governs Business process definitions within business architecture domain. |
| Eriksson-Penker Extensions | UML extensions for modeling of business architecture elements such as rules, goals, constraints, resources,, etc. |

2.1.5 Information Architecture

The following table lists standards applicable to the HHS 2020 Information Architecture definition.

Table 6: Information Architecture Standards

| Standard | Relationship to HHS 2020 |
|---|--|
| National Information Exchange Model (NIEM) | For elements not found in FHIM and FHIR, canonical model element naming for HHS 2020 data entities and attributes. |
| Federal Health Information Model (FHIM) | For elements not found in NIEM and FHIR, canonical model element naming for HHS 2020 data entities and attributes. |
| Fast Healthcare Interoperability Resources (FHIR) | For elements not found in NIEM and FHIM, canonical model element naming for HHS 2020 data entities and attributes. |
| ASC X12 | See entry for Accredited Standards Committee in Table 8, below. |
| XML Metadata Interchange (XMI) | Custom-defined canonical data model element naming standards to ensure understanding and interoperability with external systems. |

2.1.6 Technical Architecture

Technical Architecture elements are governed by a combination of standards applicable to Infrastructure Architecture and Software Architecture sub-domains.

The following table lists the EA Infrastructure standards.

Table 7: Infrastructure Architecture Standards

| Standard | Relationship to HHS 2020 |
|--|--|
| Minimum Acceptable Risk Standards for Exchanges (MARS-E) 2.0 | MARS-E control families applicable to hardware and software infrastructure, as well as physical access controls. |
| IRS Publication 1075 | Tax Information Security Guidelines for Federal, State and Local Agencies |
| International Organization for Standardization (ISO) 9001:2015 | Quality Management. |
| Information Technology Infrastructure Library (ITIL) V3 | Infrastructure and Operations framework. |
| FedRAMP (Federal Risk and Authorization Program) | Security for access of cloud-based computing environments. |
| Federal Information Processing Standards (FIPS) 140-2 | Hardware architecture-applicable provisions for use of cryptographic modules. |
| IEEE 802 family | Local and Metropolitan Area networking standards. |

The following table lists the EA Software standards.

Table 8: Software Architecture Standards

| Standard | Relationship to HHS 2020 |
|---|--|
| IEEE Std. 730- 1998. | Standards for Software Quality Assurance Plan. |
| Section 508 Amendment to the Rehabilitation Act of 1973 | Information Technology Accessibility to individuals with disabilities. |
| Web Service Dynamic Discovery (WS-Discovery) | Service programmatic interface documentation for discovery and client technology specific proxy generation purposes. |
| Universal Description Discovery and Integration (UDDI) | Published service listing. |

| Standard | Relationship to HHS 2020 |
|---|--|
| Hypertext Transfer Protocol (HTTP) | Primary means for service endpoint invocation and information exchanges using SOAP and ReST protocols. |
| Transport Layer Security (TLS) | Formerly known as Secure Socket Layer (SSL) used to create secure HTTP (HTTPS) communication channels ensuring in-transit data privacy and integrity. |
| Simple Object Access Protocol (SOAP) | A protocol for HTTP-based service invocation with information exchanged in XML format. |
| Extensible Markup Language (XML) | Request and response information encoding for SOAP exchanges. |
| Representational State Transfer (REST) | A protocol restricting endpoint invocations with HTTP verbs (e.g., GET, POST) exchanging information in JSON encoding format. |
| Java Script Object Notation (JSON) | Information encoding format for REST-based communications offering smaller bandwidth footprint compared to XML. |
| Business Process Execution Language (BPEL) | Configuration of both long-running (e.g., end-to-end business process) and short-running (e.g., service implementation using Enterprise Application Integration (EAI) adapters) orchestrations. |
| JSR 362 (aka Portlet Specification 3.0) | Standard for information exchanges across portlets within the web UI layer of HHS 2020 Enterprise. |
| Web Services for Remote Portlets (WSRP v2.0) | Standard for consumption of portlet output as presentation layer services across HHS 2020 and BPO module web applications. |
| Accredited Standards Committee (ASC) | In 1979 the ASC formed the X12 Committee, which defined the electronic data interchange (EDI) standards for business-to-business eCommerce at the national and international level. It is useful in that numerous X12 transactions must flow into and out of the HHS 2020 ecosystem. |
| Federal Information Processing Standards (FIPS) 140-2 | Software architecture-applicable provisions for use of cryptographic modules. |
| Coding Accuracy Support System (CASS™) | Enables the United States Postal Service (USPS) to evaluate the accuracy of software that corrects and matches street addresses. |
| Java Message Service (JMS) 2.0a | A standard for message-oriented middleware implemented on Java platform. |

| Standard | Relationship to HHS 2020 |
|--|--|
| SSH File Transfer Protocol, aka Secure File Transfer Protocol (SFTP) v.6 | Network protocol for file access, transfer and management over any reliable data stream. |

2.1.7 Standards Body Participation

The HHS 2020 enterprise participates in various standards bodies. Participation includes HSD leadership membership in the National Association of State Chief Information Officers (NASCIO), an active organization of state CIOs and industry leaders that advance the state of data management, architecture and governance for state CIOs. NASCIO has several operating committees that align with HHS 2020, including a data management Working Group, an Enterprise Architecture and Governance Committee, a Cybersecurity Committee and a Privacy and Data Protection Working Group. To shape the upcoming MITA releases and to impart New Mexico’s experience, New Mexico HSD maintains a seat on the MITA Advisory Board with regular event participation and collateral contribution.

Whenever applicable industry standards fall short of the prescribed minimum model quality levels, NM invokes reactive standards body participation mechanisms. For example, the HHS 2020 canonical data model is based on three major data modeling standards:

- National Information Exchange Model (NIEM)
- Federal Health Information Model (FHIM)
- Fast Healthcare Interoperability Resources (FHIR)

Should modelled entities fall outside of the specialized standards, the HHS 2020 EA applies XML Metadata Interchange (XMI) standards to all adopted canonical model elements.

HHS 2020 data governance requires continual measurement of the reference data model quality. A higher degree of adherence to elements defined as part of specialized standards (NIEM, FHIM and FHIR), as opposed to inventing new concepts and naming them in accordance with XMI, is a sign of model quality. Spot checks are performed on newly-defined model elements by doing deeper investigative dives into the specialized models to be sufficiently certain that an existing, applicable element has not been overlooked.

HHS 2020 data governance defines a threshold for a maximum number or proportion of permitted new (not specialized standards-based) data elements as well as makes provisions to impart changes when existing standards fail to support NM’s preference for avoidance of custom element definitions. Under these circumstances, the project engages appropriate standards bodies or model custodians (like the NIEM Program Management Office or J P Systems, Inc. for FHIM) in order to improve published standards and to bring the number of custom-defined canonical elements at or below the desired thresholds. As

with any other standards updates, stakeholders within NM's Medicaid Enterprise benefit from the project's efforts.

2.2 REQUIREMENT-CENTRIC, TRACEABLE SOLUTION

Every decision made in the HHS 2020 technical architecture must be based on corresponding requirements in order to be justifiable. Strong traceability among all EA elements is essential in demonstrating the solution's grounding in requirements.

In order to catalogue and visualize traceability relationships amongst various SDLC elements, the HHS 2020 EA adopted concept metamodels covering requirements management, solution architecture and design, and test management disciplines.

2.2.1 Requirements Management Metamodel

The requirements management discipline is a combination of activities and artifacts residing primarily in the Business Architecture domain and spanning traceable elements of Business Architecture and System Requirements.

The diagram below illustrates the Requirements Management metamodel of HHS 2020 EA.

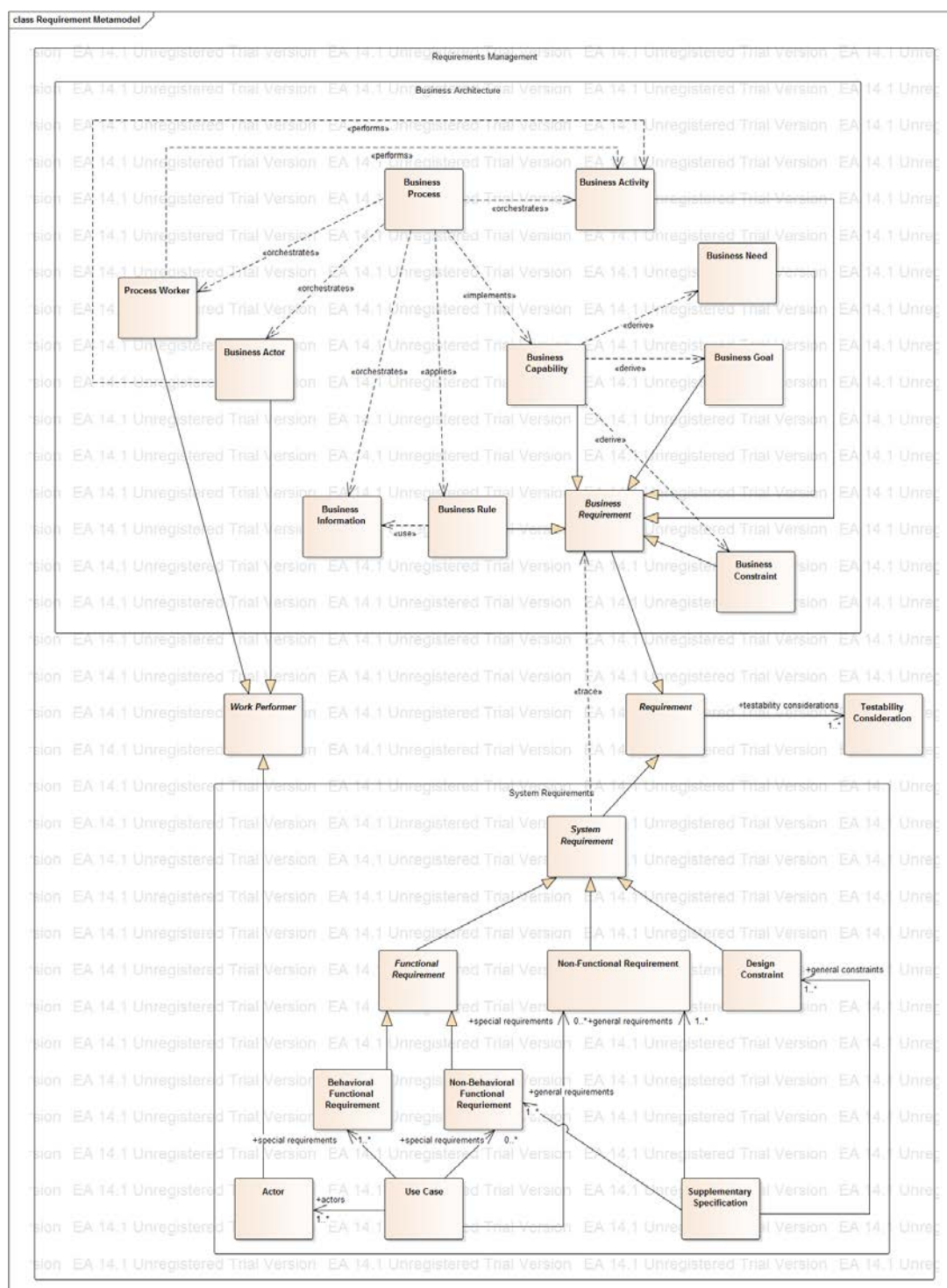


Figure 1: Requirements Management Metamodel

The following table contains explanations for each of the requirements metamodel elements' purpose and relationships to other elements.

Table 9: Requirements Management Metamodel Element Catalogue

| Element Group | Metamodel Element | Description |
|-----------------------|---------------------------|---|
| Foundational | Requirement | An abstract concept representing a statement of capability that is clear and concise, complete, non-conflicting with and distinct from other requirements, as well as achievable, traceable and testable. Requirements contain the pure “what” of the capability, and not the “how” of its accomplishment. A requirement is associated to at least 1 testability consideration. |
| Foundational | Testability Consideration | Testability consideration is a description of a mechanism by which a requirement will be verified for implementation correctness |
| Foundational | Work Performer | An abstract concept representing humans, systems, organizations and departments, both internal and external to the HHS 2020 enterprise, that exercises functionalities within the enterprise. |
| Business Architecture | Business Requirement | A business requirement is an abstract sub-type of system requirements. The specification for a business requirement must be expressed in non-technological (business) terms only. |
| Business Architecture | Business Process | Each of the 80 business processes defined under MITA 3.0 in standard form with New Mexico State-specific variations, plus any additional processes unique to the State of New Mexico. A business process is an implementation of a business capability that orchestrates interactions among business actors and process workers performing business activities, while manipulating business information subject to applied business rules. |
| Business Architecture | Business Capability | A business capability is a concrete sub-type of a business requirement derived from a combination of business needs, business goals and business constraints. |
| Business Architecture | Business Actor | A business actor is a concrete sub-type of a work performer representing an individual or an organization external to the HHS 2020 enterprise that interacts with the enterprise via business processes. |
| Business Architecture | Process Worker | A process worker is a concrete sub-type of a work performer, representing an individual or a system internal to HHS 2020 enterprise, participating in business process execution. |

| Element Group | Metamodel Element | Description |
|-----------------------|----------------------------|---|
| Business Architecture | Business Activity | A business activity is a concrete sub-type of a business requirement that represents functionalities performed by process workers and business actors as part of a business process. |
| Business Architecture | Business Information | <p>Business Information is a noun or a concept of business vocabulary (e.g., Claim, Payment,, etc.) that flows through business processes and serves as a Fact for application of business rules.</p> <p>Business Information items are documented in plain English text format and give rise to, but are not as formal as, Conceptual Data Model elements.</p> |
| Business Architecture | Business Rule | A Business rule is a concrete sub-type of a business requirement comprised of a logical expression in the form “if <condition>, then <outcome>”. business rules govern the direction of business processes at decision points by using business Information items as facts against which conditions are checked. |
| Business Architecture | Business Need | Business need is a concrete sub-type of business requirement that specifies pain point or area of improvement to be addressed by HHS 2020 solutions. |
| Business Architecture | Business Goal | Business goal is a concrete sub-type of business Requirement representing quantitative, measurable, success criteria for business improvement. |
| Business Architecture | Business Constraint | A business constraint is a concrete sub-type of business requirement that stipulates a prescribed mechanism for accomplishing or preventing a business capability, e.g., regulatory constraints. |
| System Requirements | System Requirement | An abstract sub-type of requirement that is expressed in technical (non-business) terms. |
| System Requirements | Design Constraint | A concrete sub-type of system requirement that stipulates a prescribed implementation approach (e.g., uses of certain approved COTS technologies). |
| System Requirements | Non-Functional Requirement | A concrete sub-type of system requirement applicable to the aspects of system operation (e.g., performance, scalability, reliability,, etc.) and not the functionality carried out by the system. |
| System Requirements | Functional Requirement | An abstract sub-type of system requirement describing what the system is supposed to do. |

| Element Group | Metamodel Element | Description |
|---------------------|---------------------------------------|---|
| System Requirements | Behavioral Functional Requirement | A concrete sub-type of functional requirement that is best expressed as an interaction dialogue between the user and the system. |
| System Requirements | Non-Behavioral Functional Requirement | A concrete sub-type of functional requirement that is best expressed not as an interaction dialogue between the user and the system (e.g., “the system shall encrypt data in transit using a 256-bit asymmetric key”). |
| System Requirements | Use Case | <p>A use case is an aggregate of specific behavioral functional requirements structured into its flows, potentially coupled with specific nonfunctional and non-behavioral functional requirements with limited applicability scope.</p> <p>Use cases are associated to actors involved in the runtime execution of system functionalities.</p> |
| System Requirements | Actor | A concrete sub-type of work performer representing an individual, system or passage of time that triggers and/or participates in use case execution. |
| System Requirements | Supplementary Specification | A container of all globally applicable non-behavioral functional requirements and non-functional requirements as well as design constraints. |

2.2.2 Solution Architecture and Design Metamodel

Solution Architecture and Design discipline is a combination of activities and artifacts residing in a combination of Data and Technical Architecture domains.

The diagram below illustrates the Solution Architecture and Design metamodel of HHS 2020 EA.

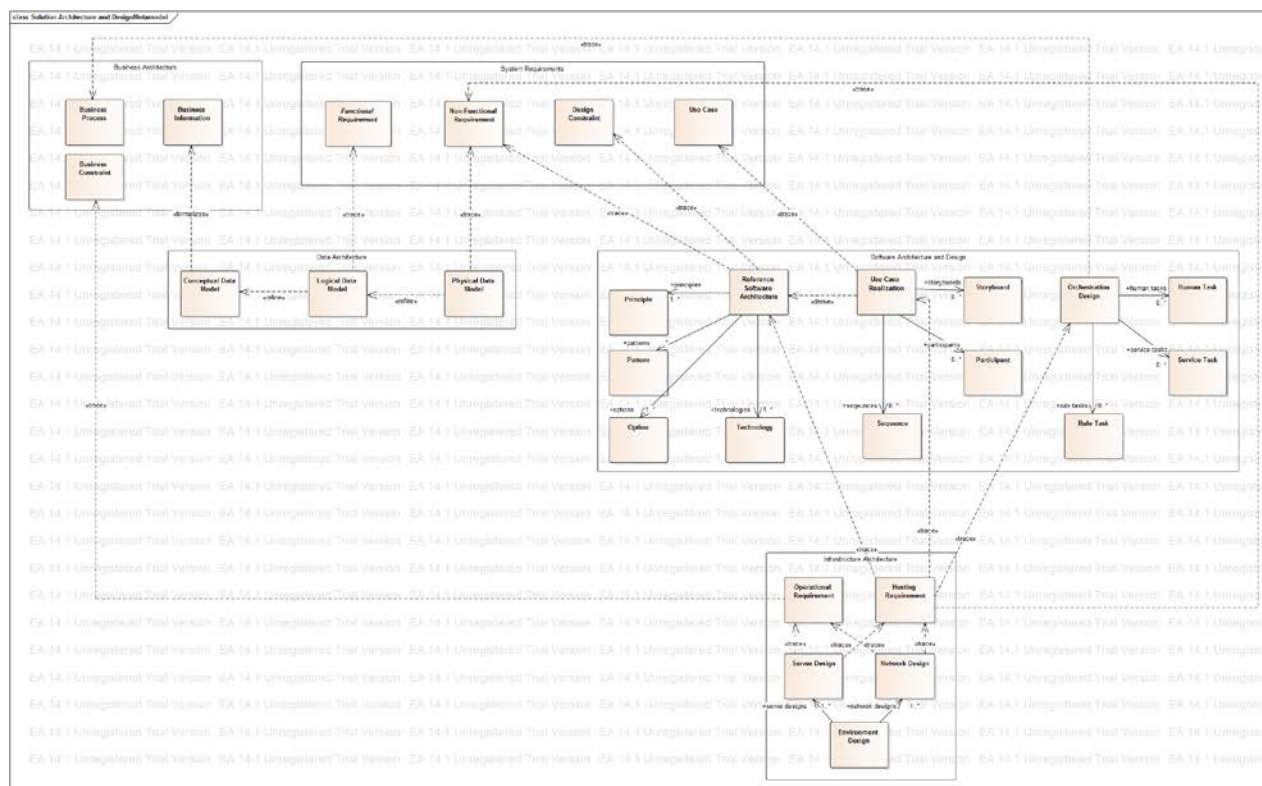


Figure 2: Solution Architecture and Design Metamodel

The following table contains explanations for each of the Solution Architecture and Design metamodel elements' purpose and relationships to other elements.

Table 10: Solution Architecture and Design Metamodel Element Catalogue

| Element Group | Metamodel Element | Description |
|--------------------------|---------------------------|--|
| Information Architecture | Conceptual Data Model | A formalization of text-based descriptions of business information items into visually-modeled entities, attributes and relationships. |
| Information Architecture | Logical Data Model (LDM) | A refinement of the Conceptual Data Model traceable to corresponding functional requirements. The LDM includes additional design elements of referential integrity (e.g., keys and constraints) as well as better-structured attribute data-typing. |
| Information Architecture | Physical Data Model (PDM) | A refinement of Logical Data Model traceable to non-functional requirements. The PDM includes additional design elements of indexing, storage partitioning, etc., intended to serve as a blueprint for database instantiation in the targeted environment. |

| Element Group | Metamodel Element | Description |
|----------------------------------|---------------------------------|--|
| Software Architecture and Design | Reference Software Architecture | The Reference Software Architecture serves dual purposes. First, it's a catalogue of approved patterns and technology selections that address key shared functional and global non-functional requirements (to which all Reference Software Architecture decisions are traced). Second, it provides prescriptive guidance to solution designers tasked with specific functional requirement implementations through a combination of design principles and options ranked by degree of adherence to enterprise preferences, whenever applicable. |
| Software Architecture and Design | Principle | A principle is a governing approach to architectural decisions resulting in favorable solution traits (e.g., loose coupling, modularity, favoring declarative vs. imperative implementations). |
| Software Architecture and Design | Pattern | A proven architectural method to addressing a class of problems and requirements (e.g., architectural layering, service orientation). |
| Software Architecture and Design | Option | <p>A choice of a design approach to a specific class of problems ranked in terms of attractiveness of the resulting solution based on the PADU framework.</p> <ul style="list-style-type: none">- Preferred: Fully adhere to specified standards- Acceptable: Adhere to the optimal set of standards, but generally result in more effort to implement than ideally desired- Discouraged: Initial shortcuts are only permitted if accompanied by a future mitigation plan- Unacceptable: Violating key architectural tenets to the point of impermissible under any circumstances, regardless of any future correctional remedies |
| Software Architecture and Design | Technology | Purchased COTS offering to be used as foundation for functionality implementation (e.g., operating system, business rule engine, database engine, enterprise application integration platform). |

| Element Group | Metamodel Element | Description |
|----------------------------------|----------------------|--|
| Software Architecture and Design | Use Case Realization | <p>Use case realizations are traceable to use cases whose requirements serve as inputs into solution function designs. Use case realizations refine the foundational principles found in the Reference Software Architecture to achieve optimal, standards-compliant solution designs.</p> <p>In the spirit of SDLC agility, HHS 2020 permits solution designers substantial leeway in the formality of use case realizations. Only the non-obvious, complicated, fundamental, important design elements will be documented. Storyboards are the most likely vehicle to elicit UI-related software designs.</p> <p>Static structure depictions of participating components or classes (depending on design granularity) may be presented to show scope of a technical solution. Participants may be put into sequences of message calls demonstrating their interaction to fulfill specified requirements.</p> |
| Software Architecture and Design | Storyboard | A storyboard is a visual depiction of a user interface via wireframes, in various states of interaction, intended to shape UI layer solution design. |
| Software Architecture and Design | Participant | Programmatic interfaces and classes (or components for less granular designs) with their attributes, operations and inter-relationships (generalizations, implementations, dependencies, associations,, etc.) |
| Software Architecture and Design | Sequence | Interactions of use case realization participants with messages exchanged in the course of requirements implementation. |
| Software Architecture and Design | Orchestration Design | Orchestration design is a combination of human, service and rule tasks traceable to the requirements contained in a business process. |
| Software Architecture and Design | Human Task | A Human task is an orchestrate-able business process element involving human interaction with a user interface (e.g., a web page, text message, email exchange,, etc.). |
| Software Architecture and Design | Service Task | A Service task is an orchestrate-able interaction with a business service (e.g., check claims status). |
| Software Architecture and Design | Rule Task | Rule task is an invocation of one or more business rules to be applied to the process data in order to arrive at a decision (e.g., if payment status is disputed and payment is past due by more than 2 weeks, escalate to account manager). |

| Element Group | Metamodel Element | Description |
|-----------------------------|-------------------------|---|
| Infrastructure Architecture | Environment Design | Environment design is a combination of server and network design for a given computing environment instance (e.g., development, production, disaster recovery). |
| Infrastructure Architecture | Server Design | Server design is physical hardware, software and virtualization specification for a server computing node (e.g., web server, app server, database server). |
| Infrastructure Architecture | Network Design | Network design is network partitioning, addressing schemes, security mechanisms,, etc., within and across environments. |
| Infrastructure Architecture | Operational Requirement | An operational requirement is a requirement arising from business constraints (e.g., MARS-E security controls) and configuration change management requirements for hosted software and integrated hardware components (e.g., changes to network configuration, access control lists,, etc.). |
| Infrastructure Architecture | Hosting Requirement | Requirement for placement of COTS software and configured/built solution components into various computing nodes within an environment. |

2.2.3 Test Management

The HHS 2020 initiative adheres to the CMS Testing Framework V1.1 and marries that with the V-Model of Testing (below). HHS 2020 benefits from following the guidance and standards of CMS as well as the rigor of V-Model Testing that standardizes tasks for the module contractors participating in the HHS 2020 effort. Figure 3 below provides a visual representation of the V-Model of Testing.

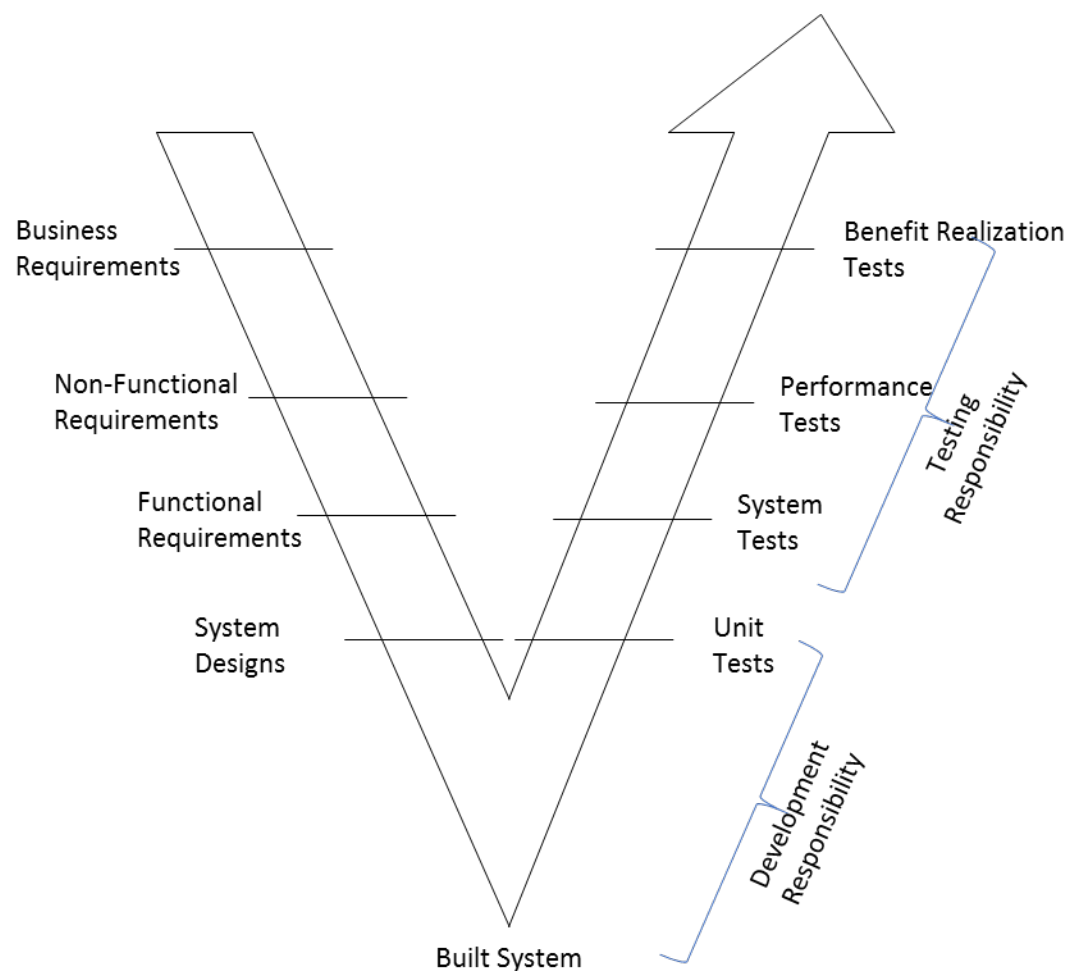


Figure 3: HHS 2020 V-Model of Testing

The SDLC lifecycle can be thought of as the 2 sides of the letter V where the left side represents the journey to create the solution, and the right side represents various levels of tests to verify the solution's quality and adherence to stipulated requirements. The highest level of requirements contributing to a solution come from the Business Architecture. They are followed by the Non-Functional Requirements for the system (performance, scalability, reliability, redundancy,, etc.) since such requirements are expressed as simple, "bullet point" statements and are easy to elicit and document. System functional requirement elicitation, analysis and documentation is a much lengthier task with a considerably larger number of work products. Solution requirements get reflected in system designs, which in turn materialize as executable solution elements or the "built" system. This completes the left-hand side SDLC activities, enabling the testing (right side) activities to commence.

Testing activities occur at the granularity of the solution elements corresponding to the left- side elements. The most granular tests corresponding to system designs are unit tests. Unit test design,

execution and failure resolution are the responsibilities of solution implementors. Tests of lower granularity are the responsibility of test management professionals outside of the implementation teams. The first non-developer testing is done to demonstrate coverage of the functional requirements in the solution and is known as system testing. With functional implementations in place and verified, the solution is tested against the non-functional requirements; most critically: performance and scalability-related requirements. The highest level of testing demonstrates that the complete solution, with all its functional and non-functional aspects, meets the needs stipulated in the Business Architecture and allows the HHS 2020 enterprise to realize all the benefits envisioned at the highest levels of business requirements.

The diagram below illustrates the test management metamodel of the HHS 2020 EA.

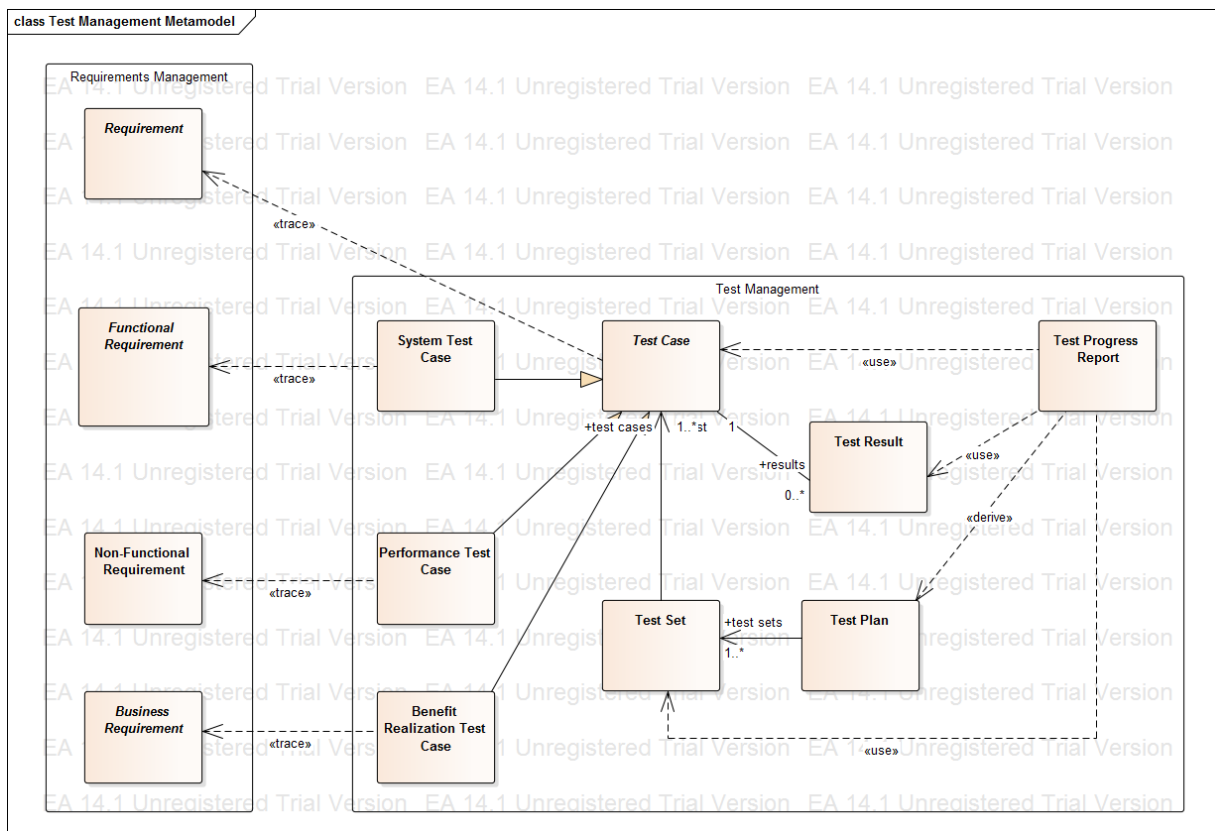


Figure 4: Test Management Metamodel

The following table contains explanations for each of the test management metamodel elements' purpose and their relationships to other elements.

Table 11: Test Management Metamodel Element Catalogue

| Metamodel Element | Description |
|-------------------------------|---|
| Test Set | A combination of test cases covering a group of related requirements. |
| Test Case | <p>An abstract concept traced to a corresponding requirement, describing test conditions, data, and success criteria. The element is abstract because the nature and structure of the contained information changes with the type of test that is performed and is delegated to the concrete derivatives.</p> <p>While initially a test case is not associated to any test results, as testing is performed and results are generated, the cardinality of case to result increases.</p> |
| Test Result | An outcome from the performance of a single test case. |
| System Test Case | A concrete sub-type of test case traced to a functional requirement. |
| Performance Test Case | A concrete sub-type of test case traced to a non-functional requirement. |
| Benefit Realization Test Case | A concrete sub-type of test case traced to a business requirement. |
| Test Plan | An ordered listing of all test sets ensuring holistic requirement coverage. |
| Test Progress Report | A regularly executed report derived from test plan scheduling information, listing status of test sets, test cases based on available test results. |

2.2.4 Traceability through SDLC tools

The HHS 2020 initiative will follow CMS guidance on how traceability should be undertaken. HHS 2020 will leverage enterprise tools for the project requirements traceability matrix (RTM) and fully trace requirements through the SDLC to the solution elements that satisfy the MECT checklist. See Table 11, below.

Table 12: Requirement Traceability Tools

| Company | Product | Purpose in EA |
|-----------------------|------------|---|
| Microsoft Corporation | SharePoint | Artifact repository for all RTM artifacts |

| Company | Product | Purpose in EA |
|-------------------------|---------------------------------|--|
| TaskTop | TaskTop | Enterprise Integration tool connecting tools within requirements management; test management; defect management and engineering management. This tool enables models and rules to be applied to work item types (WIT) in each of the tools and apply rules and real time synchronization between the systems. |
| Atlassian | Jira | This tool functions as the project engineering system to track, trace and plan development activities. TaskTop is leveraged to synchronize information that is linked between the systems. |
| Xpand-it | Xray Add-on for Jira | A test management solution for requirement verification, defect management and traceability. . |
| Xpand-it | Xporter Add-on for Jira | This tool is used to move information from the engineering system into CMS Templates in the artifact system both for traceability and reporting. |
| JAMA Software | JAMA | JAMA is the project requirements repository. It is the central component of the project RTM. TaskTop connects JAMA's requirements functions to Jira for development as well as traceability. |
| Adaptavist ScriptRunner | ScriptRunner Add-on for Jira | Used to author scripts for Jira. |

2.2.5 Proactive Change Management

3 BUSINESS ARCHITECTURE STRATEGY

For New Mexico HSD, the journey towards a more person-centric enterprise starts with the definition of a Business Architecture that links processes, information, stakeholders, systems and rules in an effort to provide optimal service to NM stakeholders.

3.1 ARCHITECTURE SCOPED BY MITA

MITA business process catalogue bounds the functional scope of Business Architecture with a set of proven, structured and well-documented interactions. HHS 2020 EA will include a holistic depiction of all standard business processes and variations necessitated by uniqueness of New Mexico Medicaid Enterprise. The processes will be modeled in an industry-standard notation (BPMN) that is universally understandable and shareable within State of New Mexico's departments, as well as with other states looking to leverage proven MMISR Business Architecture collaterals. New Mexico HSD business stakeholders have taken charge in systematic identification, cataloguing, documentation of Business Information items that flow through business processes. The resulting definitions are technology-independent, understandable and subject to reuse across business processes as needed.

Business information items serve a foundational role for solution data modeling with strong traceability maintained among Business Information items and Conceptual, Logical and Physical data model elements. HHS 2020 Business Architecture takes the approach of externalizing the logic controlling business process flow execution into Business Rules. In the spirit of keeping Enterprise Architecture assets understandable and reusable, HHS 2020 EA is using the latest COTS BRE technologies from Oracle, enabling Business ability to define rules in plain English language. Related rules are combined into rule sets that are checked for consistency, redundancy and any coverage gaps, equipping the Business Rules authors with sufficient degree of confidence in the quality and usefulness of our Business rules.

3.2 NO WRONG DOOR

With HHS 2020 solution in place, the State will serve each constituent through the channel of his/her preference, with consistent information, data quality and ubiquitous security through our no-wrong-door multichannel strategy. To maintain continuity of user experience with available legacy touchpoints, HHS 2020 will initially offer web and interactive voice response (IVR) self-service channels. However, due to the socioeconomic background of our target constituents and the complex nature of initial interactions to bring potential benefit recipients into the system and offer them an optimal combination of assistance offerings, in-office, in-person field office visits and calls to full-service contact center will remain as the most interaction-rich channel for the foreseeable future.

Whether in self or full-service model, the State's goal is to bring all the pertinent, up-to-date, high quality information to users, making each interaction as positive and productive as possible, minimizing the number of subsequent touchpoints. The State's aims to maximize initiation, execution and tracking of various business processes through uses of advanced computer technologies. It is expected that the process, data and rule elements of Business Architecture, along with all related requirements, will be implemented in the technology layers of HHS 2020 Enterprise, vastly reducing the amount of manual tracking, coordination and escalation that has been the historical norm.

The State will pursue a mobile-first approach to our self-service channels. The ubiquity of mobile devices in use by our constituent population, coupled with the limited financial resources to make larger form-factor devices and internet access available for regular use, necessitate mobile optimization for all constituent-facing web and mobile application entry points. The Business foresees not only rendering user experience that is optimized for the host device form-factors, but also enhancing the experience based on the interaction context and considering state of the user's participation in various business processes that are currently underway. We are striving not for just a responsive experience, but for a truly adaptive one.

State will explore new self-service channel opportunities such as SMS text-based applications and visual IVR. With ubiquity of text messaging available to users in all socioeconomic strata and widespread acceptance of texting technologies, HHS 2020 Enterprise can capitalize on this low-cost communication channel. It can be used not only for traditional message-based campaigning e.g., enrollment and seasonal vaccination reminders, but also to implement stakeholder information exchanges as part of ongoing business processes e.g., questionnaires, field office appointment scheduling, etc.

Visual IVR is a customer service technology gaining quick traction in the world of commercial healthcare that shows great promise in government service applications.

Visual IVR Interaction Flow



Figure 5: Visual IVR interaction flow illustration

Visual IVR interactions start with a call from the user's mobile device to a regular voice response system, followed by an opportunity to switch from the IVR menu interactions to a small-format web site. The web

site provides a better experience than the telephony-only options by providing the user tailored screens and workflows. Should the user's inquiries fail to get answered in visual IVR self-service mode, his/her place in the full-service queue will be maintained and all interaction details will become available to the customer service representative to complete the full-service portion of the call.

Fundamental to NM's ability to provide a useful and compelling digital experience is the end user's ability to customize and maintain their preference for communication channels, styles, media,, etc.

3.3 STAKEHOLDER-DIRECTED, STATE-CONTROLLED INFORMATION

Given the strategic goal of changing the population behaviors towards healthier alternatives and providing integrated, value-based models of care, it is essential for constituents to know the extent of relevant information maintained by the State. To meet these goals, the State envisions a robust, end user preference management mechanism that the user can access via self-service or via a traditional encounter with the contact center. The preference management service will allow stakeholders to fine-tune his/her communication and information sharing preferences.

Given the highly personal and sensitive nature of constituent information held in the HHS 2020 systems, the State is adopting strict security and privacy standards to prevent unauthorized system access or information disclosure. The user's ability to access functionality and to view data will be based on a combination of application role membership, applicable information sharing preferences and the user's relationship to the information (e.g., a State employee who is normally authorized to review claims will be prevented from accessing claims for his/her family members as such access would constitute conflict of interest).

3.4 DATA-DRIVEN ENTERPRISE

Access to timely, pertinent and high-quality data is essential to decision-making by HHS 2020 stakeholders. Business Architecture stipulates strict data quality requirements, including information accuracy, timeliness, absence of data duplication and effective information aggregation.

Access to transactional data will be required for one-off review and decision purposes. Transactional information will be included as part of various application screens and operational reports. Aggregated and summarized data lacking individual transactional details will be used for managerial reporting purposes offered for internal and external consumption. The State envisions operating a Reporting Universe sub-system enabling business users to query the enterprise for new combinations of summarized data concepts without involving technical resources that have been historically needed for creation of every report. An even higher level of data aggregation will enable strategic what-if analysis as

well as proactive identification of trends pertinent to business operations, finance, care management and emerging current and future focus areas for the enterprise.

Having satisfied the stakeholders' data access and reporting needs, the HHS 2020 EA will offer additional data-driven event origination and processing capabilities whereby discovered trends will lead to business process improvements and opportunities to offer innovative public assistance administration and health care approaches. New Mexico HSD understands that its area of historical competency in health care administrative data (defined under the HIPAA EDI standard) is insufficient for creation of a 360-degree view of a constituent, complete with insightful and actionable information to enable optimal care. Other necessary data streams will be incorporated under the HHS 2020 vision. To enable outcomes-based care and reimbursement models the state will invest in clinical data repositories (HL7 standard) that can be used to link provided care with diagnosable outcomes.

3.5 COLLABORATION AND REUSE

The HHS 2020 EA provides an opportunity for integration among legacy and newly-deployed systems where data is shared and business processes span across traditional organizational boundaries. Such an approach breaks down artificial boundaries between systems, geography and funding inherent to Title XIX programs. Although the starting scope of implemented functionalities are Medicaid-centric, departments outside of NM Medicaid are enabled from the outset to share in the benefits afforded to the State by the new enterprise. Conversely, as other NM departments join the HHS 2020 ecosystem and make their data and processes open for collaboration, new opportunities to serve constituents will emerge.

Decisions can be made concerning housing, child-support, income, employment, transportation and even correctional and other data sources not typically associated with the core business of health care but revealing valuable data points about the social determinants of health. For example, correctional data can be used to plan the transition of inmates from prison to public health care, vocational training and housing assistance, or; changes in housing status of chronically-ill members would trigger proactive interventions to keep them from falling off treatment regimens,, etc. New Mexico's embrace of mandatory managed care for recipients places the burden of constructing and operating the care ecosystem with contracted MCOs.

3.6 MOVING FROM TRANSACTIONAL TO VALUE-BASED RELATIONSHIPS

The realm of evidence-based care, value-based reimbursements and other innovative approaches changes the historical pay-per-transaction paradigm to a pay-for-performance framework. The State's goal is to equip its care partners (MCOs, providers) with information-based insights, predictive analytics and tooling to better manage risk and to maximize rewards for demonstrated, proven performance. New Mexico plans to erect a partner ecosystem in which the State does the heavy-lifting in setting up the

complex information exchange for its partners to leverage in the movement towards value and outcomes-based care.

HHS 2020 takes the concepts of risk-sharing and value-based relationships beyond its health care partners to management of relationships with business process outsourcing (BPO) partners responsible for operation of financial services, quality assurance, data services,, etc. This approach contrasts with the historical transactional contracts maintained with monolithic Medicaid system vendors tasked with day-to-day processing and not incentivized for any improvement opportunities or innovative thinking.

4 INFORMATION ARCHITECTURE STRATEGY

The first objective of the HHS 2020 information architecture strategy is to bridge gaps in data quality and consistency that exist amongst the disparate systems holding information in the NM MMIS. The second objective is to enable cutover of legacy functionalities to the new BPO module modules with standardized subsets of data pertinent to each module's operational needs. The third objective is to provide a system of record for informational concepts maintained across different systems. The fourth objective is to support file-based data exchanges between the HHS 2020 enterprise and outside entities. The fifth objective is to enable improved data reporting and newly-introduced business intelligence functionalities.

4.1 ENTERPRISE INFORMATION ARCHITECTURE VISION

The role of the HHS 2020 EA is bounded by the requirements for reporting, data analytics, artificial intelligence-based data pattern discovery and exposure of numerous information architecture components as services to the enterprise. The proposed enterprise Information Architecture is based on the modern Big Data Factory approach.

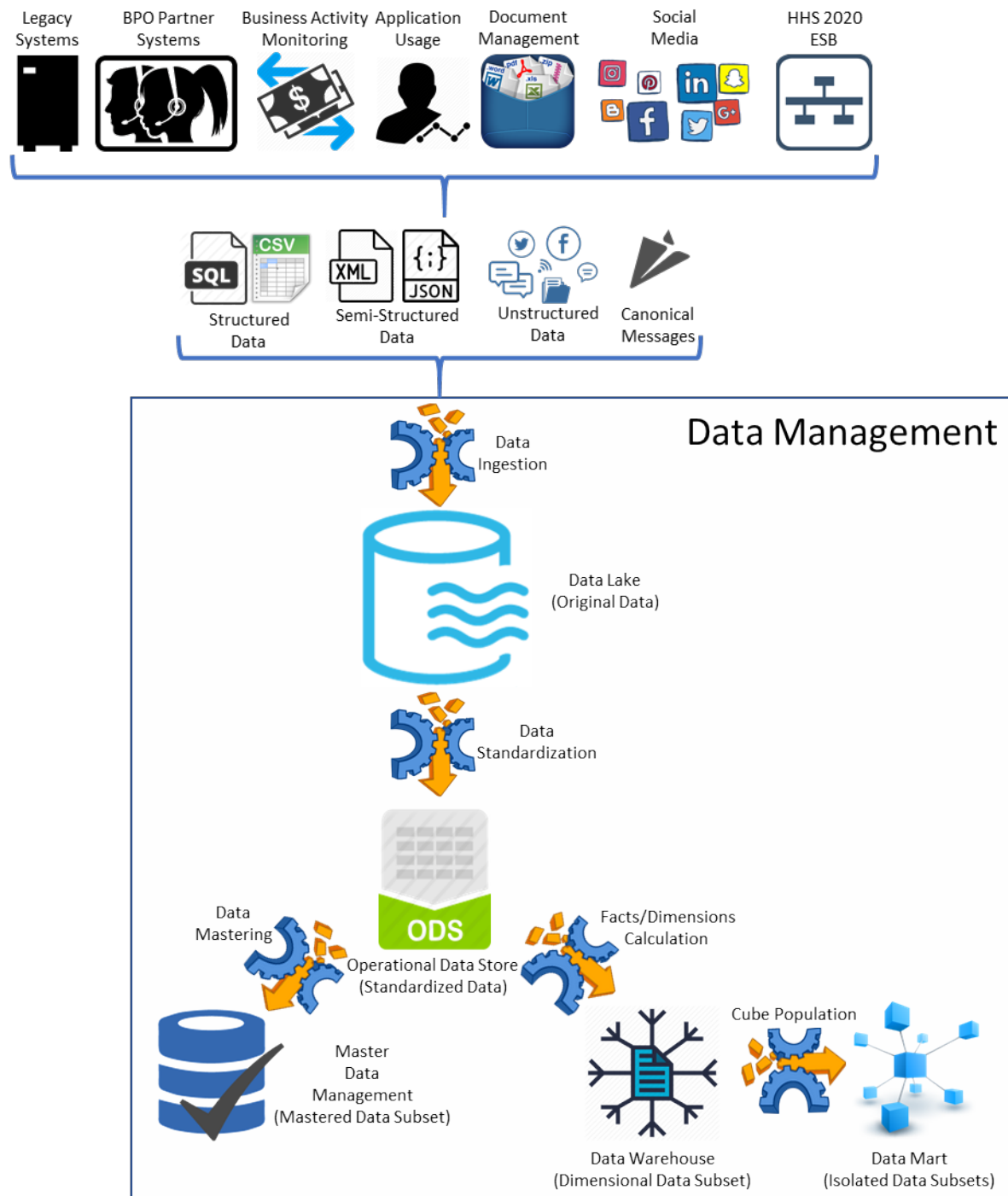


Figure 6: HHS 2020 Data Factory

Data Types and Sources

The HHS 2020 Data Factory will routinely ingest data from a variety of sources. Data of interest falls into four categories:

- Structured – strongly structured and consistent data extracts from application back-ends (e.g., SQL exports, delimited files)
- Semi-structured – data with applied schema but no guaranteed consistency (e.g., XML and JSON-encoded files)
- Unstructured – data in formatted document files, free-form text, images, etc.
- Canonical Messages – information exchanged among HHS 2020 services. Although messages follow XML encoding (like semi-structured data) their content is consistent with applicable rules, making them more akin to structured data.

The likely data sources of each of the above categories are:

- Legacy systems primarily supplying batch extracts of structured data with a possibility of messages sent from applications that have been enhanced with SOA capabilities for HHS 2020 ecosystem participation.
- BPO module systems will deliver a mix of structured data extracts and canonical messages.
- Metadata about execution of business process orchestrations and application usage of HHS 2020 presentation layer components will be delivered as a combination of structured data extracts and semi-structured files.
- Documents residing in the enterprise document management system, digital content assets deployed via the Liferay digital experience platform and social media content and metadata for interactions of interest to NM HSD will be represented as unstructured data.
- HHS 2020 data back-end will subscribe to certain canonical messages from the ESB that are deemed applicable to enterprise data management capabilities.

Data Ingestion and Data Lake

All data entering the data management boundary will be stored within a data lake. The data lake will preserve all incoming data and metadata details and make them available for subsequent refinement as an input into the artificial intelligence sub-system for machine-driven pattern analysis. The data lake will be built in COTS technology from MarkLogic.

Data Standardization and Operational Data Store

The transactional sub-set of raw data will be transformed into an operational data store. In the steady state, the HHS 2020 enterprise will contain transactional data at stipulated quality levels (e.g., error rates

and extent of duplication below maximums permitted under HSD data governance quality standards), reducing the need for quality improvement within the ODS. The primary enhancements performed during ODS loads will be directed at data standardization into the HHS 2020 canonical model for schema and reference values. ODS contents will feed into operational reports and will be available for export as bulk data extracts for consumption by interested external parties. The ODS will be built from a MarkLogic NoSQL database.

Data Warehouse

A sub-set of transactional data in the ODS will be transformed into fact and dimension tables of the data warehouse (DW). The DW will serve as a primary source of information for analytical reports and for data science research. DW contents will be available for consumption by external parties. The DW will be implemented by IBM Watson Health, the MMISR Data Services module contractor.

Data Mart

While the DW serves as a dimensional aggregator for enterprise-wide data analysis and consumption, the data mart (DM) will segregate data into analytical cubes to serve narrow needs (e.g., line-of-business, departmental, etc.). The DM will support analytical reporting and data science needs by pre-running queries against DW contents, making complex, high-value data retrieval extremely fast and efficient. The DM will be implemented by IBM Watson Health.

4.2 MASTER DATA MANAGEMENT

Complex enterprises like NM HSD contain numerous systems that manage portions of large business entities spanning multiple business processes. For example, information about provider entities is spread across contracting, credentialing, claims, compliance and other systems. The goal of a master data management solution is to consolidate, standardize and keep up to date various portions of an entity record in a single referenceable source. The HHS 2020 MDM sub-system will be built on the MarkLogic NoSQL platform.

A big advantage of the unified entity views provided through MDM is the ability to continually improve data quality and to relate entities to each other in order to enable key processing capabilities. Poor data quality of constituents' address information has historically been a source of unnecessary physical mailing expenditures, where hundreds of thousands of pieces of mailed correspondence are routinely returned as undeliverable. Address standardization capabilities via the MDM solution, coupled with USPS address verification and credit agency address checks, will lead to substantial increases in physical mailing efficiency and cost reductions.

The MDM subsystem will power identity-based access authorization functions in scenarios where access to requested information is dependent on a user's membership and application roles. For example, a State employee who is normally authorized to review claims will be prevented from accessing claims for his/her family members as such access would constitute a conflict of interest.

4.3 REPORTING AND OUTBOUND DATA EXTRACTS

Information residing in the data management layer will be fed to various reports and file extracts.

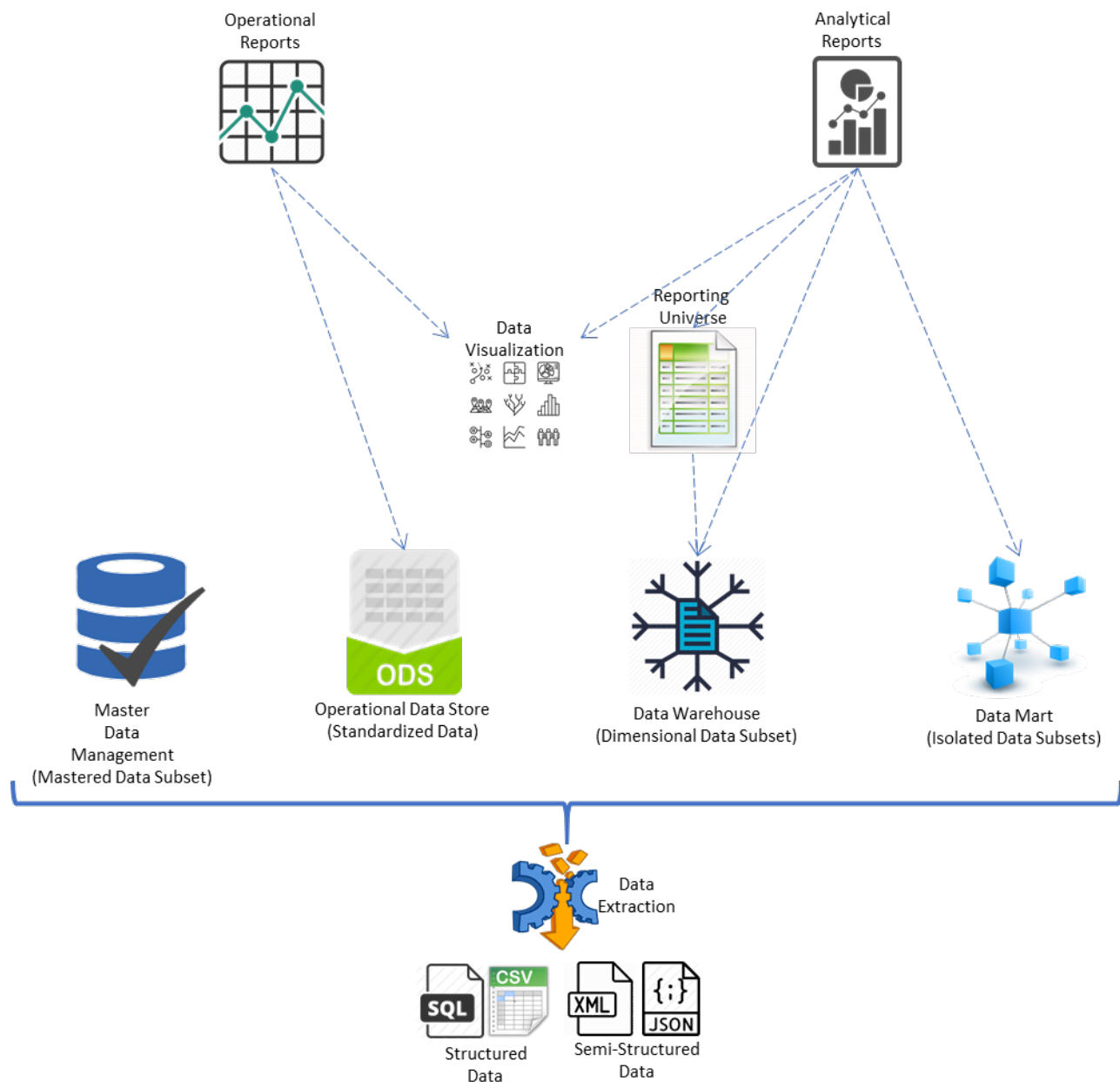


Figure 7: Reports and Outbound File Extracts

Reporting

The ODS, DW and DM will collectively satisfy all of HHS 2020's reporting requirements.

Pre-canned operational reports requiring transactional data will query the ODS. Analytical reports will be generated out of the DW and DM. At present HSD produces over 1,200 pre-canned reports and data extracts for reporting purposes. The goal of the HHS 2020 EA is to reduce the number of such full-service reports to the minimum required to maintain operational capabilities and regulatory compliance. All others will be moved into the realm of self-service data analysis by qualified users. These users will have access to a reporting universe that makes all reportable elements and relationships available for easy selection and ad hoc report inclusion.

IBM Cognos will be used for pre-canned report management and will support ad hoc reporting and data analysis. All reports can be enhanced with advanced data visualization capabilities afforded by Tableau software.

Data Extracts

Information contained in the MDM, ODS, DW and DM sub-systems will be made available for consumption by external interested parties (e.g., researchers, MCOs, regulators, etc.) in file-based extracts. The HHS 2020 EA will support structured and semi-structured formats. The available data elements will originate for the canonical data model. Values to all reference items will come from canonical reference lists of the EA.

4.4 DATA SCIENCE AND ARTIFICIAL INTELLIGENCE SUPPORT

The HHS 2020 data management layer will enable the enterprise to gather insights from the stored information that will lead to significant improvements in NM HSD operations and customer service.

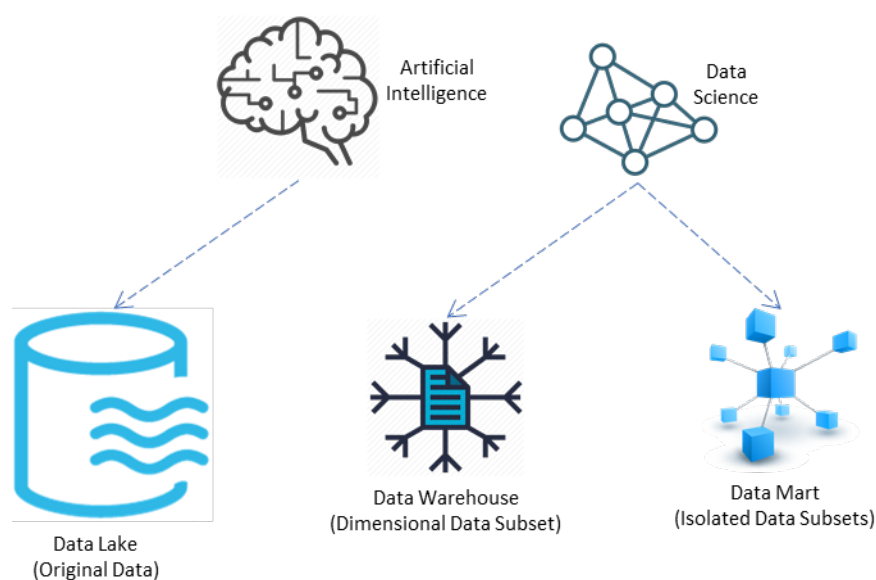


Figure 8: Data Science and AI Capabilities

Human-Powered Data Science

Human users are best capable of querying and analyzing structured data. Analysts, economists, strategists and other similarly skilled personnel will rely on data science tools like Python and R programming languages to explore the DW and DM sub-systems. Their findings will be made available to stakeholders and decision-makers as discovered (i.e., not via automated measures) and will play a role in shaping HSD's offerings and operations.

Artificial Intelligence

The IBM Watson AI platform will assist with pattern matching and insight discovery while considering the complete spectrum of available data. The HHS 2020 AI sub-system will mine the data lake contents. AI findings and recommendations will be initially and primarily used on a one-off basis to shape HSD's offerings and operations. However, as the levels of confidence in the AI's capabilities increase, the sub-system will publish its finding automatically into the HHS 2020 ESB in order to trigger decisions and processes.

4.5 DATA SERVICES

A number of components in the data management layer will act as services accessible via the HHS 2020 ESB. These data services will communicate using canonical messages as well as by subscribing to and publishing events, as required. Figure 9, below, depicts the candidate data service components and their relationship to the ESB.

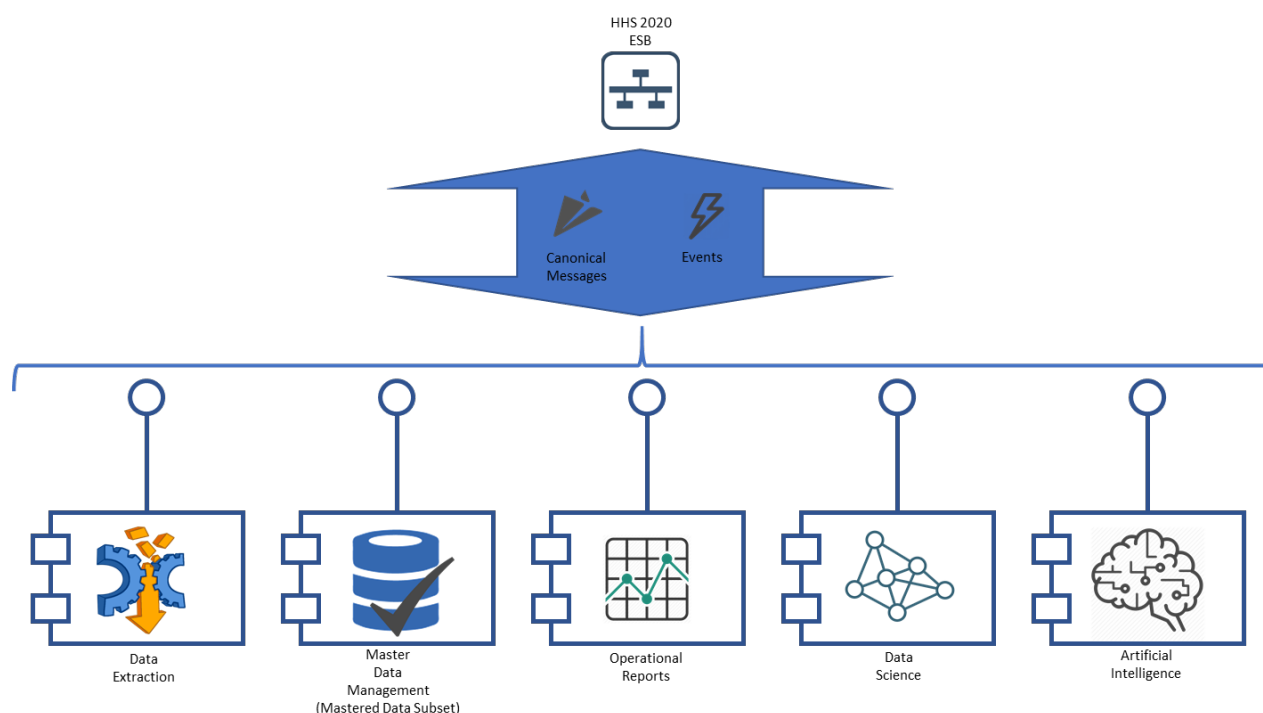


Figure 9: data management Services

Data Extraction Services

Data Extraction Services (DES) components encapsulate the ETL functionality of the HHS 2020 EA. When invoked, DES will perform asynchronous extraction, encoding, and presentation of data in the form of files. Data extraction will occur during optimal times and using optimal methods based on the context of each incoming request. DES may implement call-back and event-based notification design patterns to inform callers of file creation completion so that consumers can proceed with desired file access.

MDM Services

The MDM will present mastered data as a service. In addition to providing access to a gold copy of each mastered data set, the MDM may render information about concept inter-relationships. For example, an entity service will connect related individuals, organizations, family units, etc., so that users can make use of these relationships while implementing business functions (e.g., to prevent authorized data access by entities in unpermitted relationships with subject entities). MDM services will be invoked through

request/response patterns and may publish events to subscribers interested in changes to particular mastered data categories or record instances.

Operational Reporting Services

Operational and other pre-canned report invocation and dissemination can be invoked programmatically via operational reporting services (ORS). On-demand pre-canned report execution will occur during optimal times using optimal methods based on the context of each incoming request. ORS may implement request/response, call-back, and event-based notification design patterns to inform users of file creation completion.

Data Science Services

Data science service interfaces will be invoked by client processes and applications to request analyst involvement in identified situations of interest to the enterprise. Services would have a request/response pattern with no expectation of any results entering the system and influencing operations automatically. The findings will be made available to stakeholders and decision-makers on a one-off basis.

4.6 LEGACY DATA MIGRATION

The HHS 2020 System Migration Repository (SMR) will play a central role in data conversion from legacy systems to new modules. The SMR will ultimately exercise the same portions of the data management layer as ongoing operations, but in separate regions/instances that HSD will keep active during data migration activities.

Figure 10 shows how data will be extracted from source/legacy systems, transformed, cleansed, converted to a new schema, and loaded into tables that enforce and validate NM HDS data governance policies for data quality management.

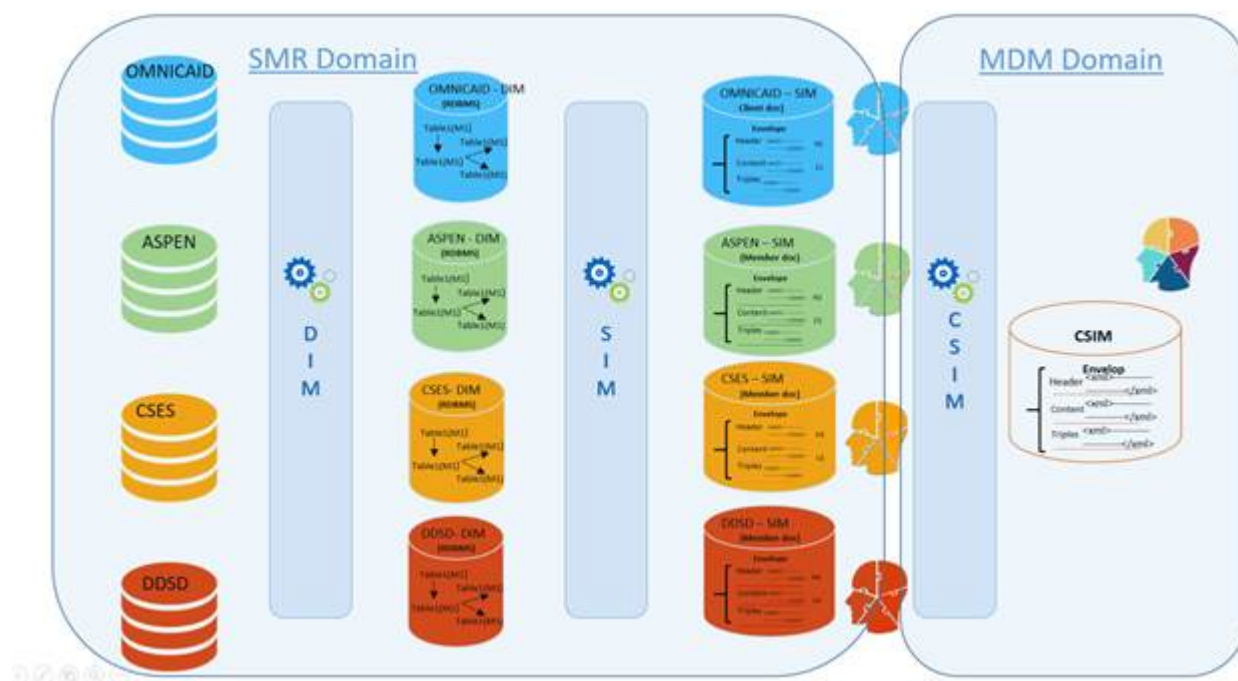


Figure 10: SMR Design

The processing will occur within and through the SMR. The purpose of the SMR is to create a reusable infrastructure with repeatable policies, processes and data quality management (DQM) best practices for all systems that will integrate with MMISR assets.

Figure 11 below illustrates the SMR-enabled data migration process.

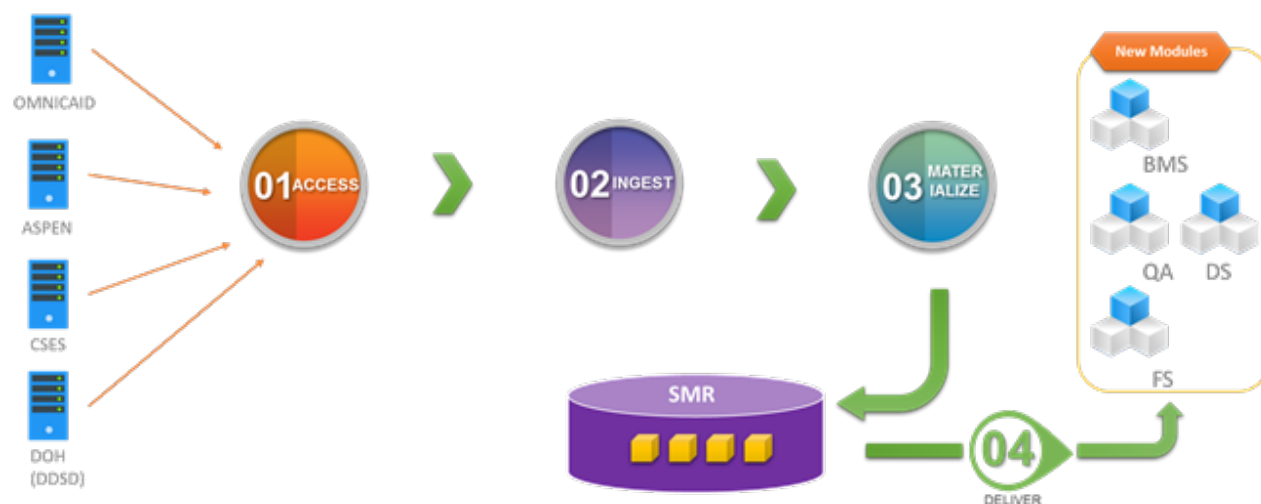


Figure 11: Pre-Go-live Data Integration Steps

Migration of a given legacy system to a new BPO operation would proceed as follows:

1. A copy of the legacy system's data in complete raw form will be obtained.
2. The complete raw legacy data set will be placed into a data lake repository.
3. The raw data will be converted into canonical format with standardized reference values, followed by enhancement of data quality through de-duplication.
4. The canonical, standardized and de-duplicated data will be placed in the SMR NoSQL database.
5. The NoSQL database contents will be made available for ingestion by the new BPO module systems.

The SMR is not meant to supply operational, transactional data to the MMISR systems in real time. It is only meant to perform bulk loads of source data into MMISR systems. All transactional data, once the system/module is live, will be populated by transactions flowing through the integration platform.

The SMR is a reusable platform that includes ETL tooling, DQM tooling, databases, data modeling, and data dictionary tools. It also is a main asset used by the NM HHS Data Governance Council for publishing policies on shared data, shared schemas, data models, data security, and other data sharing/reuse topics.

Stringent data quality processes, including master and reference data management, are intended to ensure that data quality in the HHS 2020 ecosystem post go-live will remain consistent with the quality of data obtained during initial loads of canonical data via the SMR.

5 SOFTWARE ARCHITECTURE STRATEGY

HSD's approach to software architecture results in a modular, loosely-coupled, layered, secure and declarative solution built on proven COTS technologies.

5.1 COTS TECHNOLOGY PERSPECTIVE

To offer maximum flexibility to various HHS 2020 ecosystem participants while deploying best possible solutions to meet the State's needs, the HHS 2020 EA is pursuing a technology-independent architectural approach to all specialized and shared sub-systems. By following standards for technological interoperability, service orientation and componentization HSD intends to bring together optimal solutions sourced from contracted vendors regardless of their respective implementation approaches. Such an enterprise architecture allows for eventual vendor changes and additions with minimal technological and operational disruption. Additional benefits arise from the ability to replicate a proven solution approach to other departments of NM State government as well as to other States' Medicaid agencies, thus furthering a consistent, nation-wide Medicaid ecosystem.

At present time the key Commercial-off-the-shelf (COTS) technologies operating within the boundaries of the HHS 2020 ecosystem hosted by the State are listed in Table 13.

Table 13: HHS 2020 Internally-hosted COTS technologies

| Technology | Purpose |
|---|--|
| Microsoft Active Directory | <ol style="list-style-type: none">1. Certificate services supporting internal Public Key Infrastructure (PKI)2. State employee enterprise group membership3. State employee authentication through user ID and password combination4. Active Directory Federation Services (ADFS) |
| Oracle Identity and Access Management (IdAM) platform | <ol style="list-style-type: none">1. Multi-factor authentication for all HHS 2020 users, including State employees, BPO employees, providers, constituents and system/service accounts2. Application role-based authorization for all authenticated users applied to all publicly accessible and private URLs (web pages, service end-points, process orchestration end points) |

| Technology | Purpose |
|-------------------------------------|---|
| Oracle Fusion Middleware suite | <ol style="list-style-type: none"> 1. Long-running business process configuration, orchestration and monitoring 2. Service publishing, discovery and run-time invocation 3. Service end-point hosting and message routing 4. Enterprise rule management and enforcement 5. Service implementations using EAI adapters and short running orchestrations |
| Liferay Digital Experience Platform | <ol style="list-style-type: none"> 1. Unified presentation layer web-based portals supporting all HHS 2020 stakeholders 2. Digital content management |
| MarkLogic NoSQL Database | <ol style="list-style-type: none"> 1. Bi-directional ETL file-based data supporting both legacy system migration onto HHS 2020 platform and ongoing file-based integration with external systems 2. Metadata management 3. Master data management 4. Raw data lake 5. NoSQL database engine |
| Perceptive Content | Enterprise document management |
| OpenText Exstream | Correspondence management |
| SAP Address Validation | Part of SAP Data Quality Management Services to verify residency of individuals at specified addresses |

At this time, the MMISR effort has established contracts for two modules, the System Integrator and Data Services module contractors. Following is a list of COTS software that the Data Services contractor will use.

Table 14: HHS 2020 Externally-hosted COTS technologies

| Partner | Technology | Purpose |
|---------------|----------------------|--|
| Data Services | IBM Cognos Analytics | <ol style="list-style-type: none"> 1. Pre-canned report management 2. Ad hoc report management |
| Data Services | Tableau | <ol style="list-style-type: none"> 1. Data visualization 2. Geo-spatial data analysis |

| Partner | Technology | Purpose |
|---------------|----------------------------|---|
| Data Services | Python programing language | Statistical analysis programing |
| Data Services | R programming language | Statistical analysis programing |
| Data Services | IBM Watson | Question-answering artificial intelligence engine |

5.2 SOFTWARE ARCHITECTURE VISION

In accordance with HHS 2020 EA standards all software-related architecture views, including the conceptual architecture depicted in Figure 4, are modeled using unified modeling language (UML) v.2.4.1. Figure 12 shows groupings of components packages comprising both the HHS 2020 enterprise and the external systems. SOA integrations are shown as bi-directional associations decorated with a descriptive stereotype. While significant package and component package contents are included, the package-to-package and component-to-component dependencies are omitted from the conceptual architecture depiction.

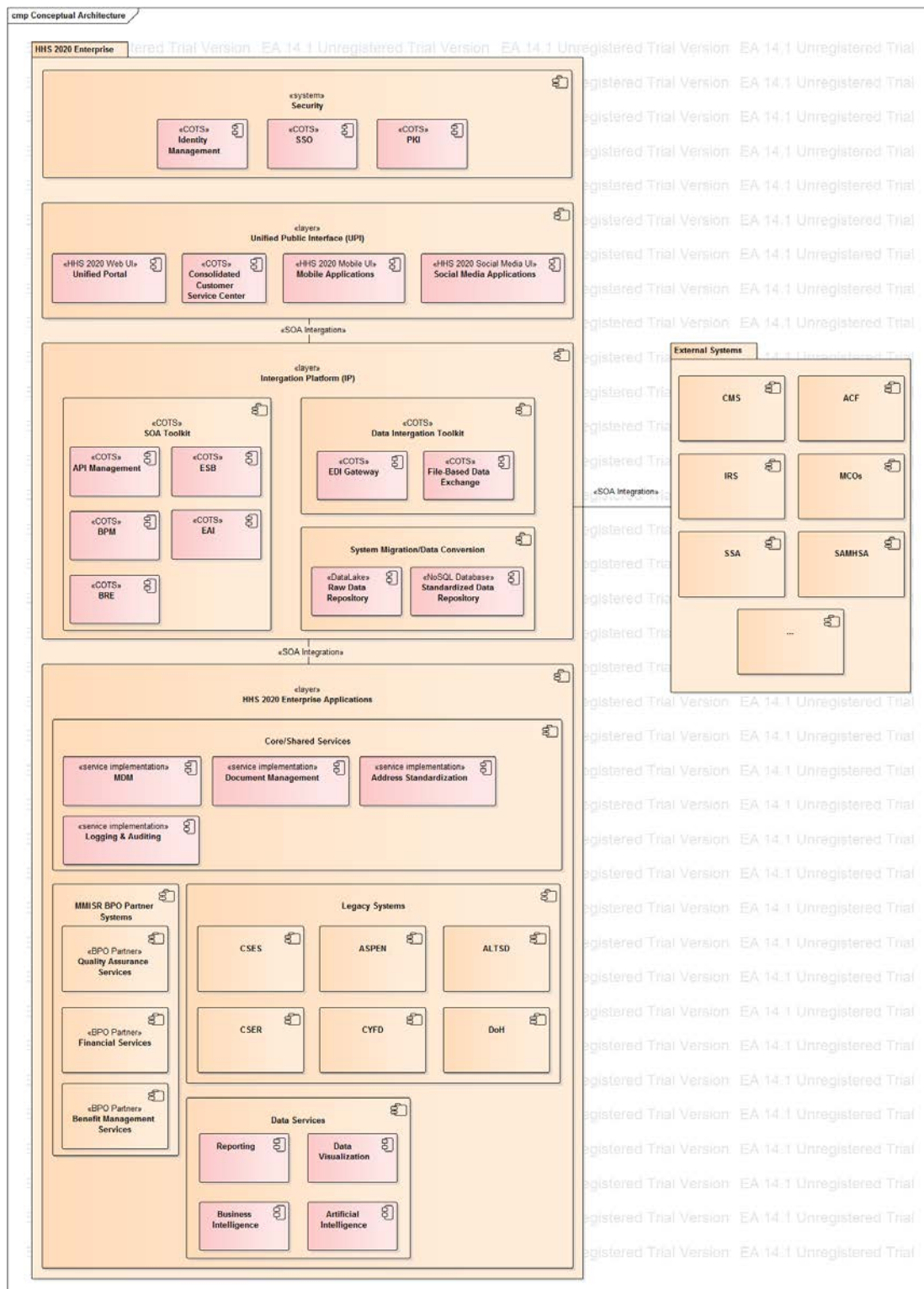


Figure 12: MMSIR Conceptual Software Architecture

Security

All requests for functionality and data contained within the HHS 2020 enterprise pass through the security system. It is comprised of purchased COTS components and configured to meet HHS 2020 requirements for user authentication, role-based access authorization, cryptographic public key infrastructure management and single sign-on.

Unified Public Interface (UPI)

The UPI includes user interaction channels for the public, including a Unified Portal (for all external and internal web interfaces and applications), mobile and social media access (for incorporating mobile devices/interfaces and tying into social media outlets), and a Consolidated Customer Service Center (CCSC)/Call Center Interface.

Integration Platform (IP)

The sole responsibility of the MMISR System Integrator contractor, this is the central mechanism for integrating all backend systems, all interfaces to external systems, and users via the Unified Public Interface. The IP layer contains three distinct sub-groupings of functionality.

SOA Toolkit includes an ESB and other service-oriented architecture enablers like COTS EAI adapters to be used in service implementations, business process management components for process definition and execution, a business rules engine to assist in rule-based business processing and context-based message routing through the ESB, and API Management for service discovery and invocation by the UPI layer clients. All systems, subsystems, modules and services will integrate using SOA principles of decoupled services exchanging messages through a common integration platform, briefly listed below:

- Services will be autonomous and decoupled from other services.
- Services will be discoverable through the IP.
- Services will be composable.
- Services will interoperate via sending/receiving asynchronous messages.
- Services and messages will be built to be reusable.
- Services will be stateless and idempotent, as much as possible.
- Services will communicate via asynchronous messages.
- Services will hide their implementation details from other services.

All services will be registered in the API Manager services catalog, which will enforce any policies regarding knowledge of and access to those services. All shared schemas which comprise messages will also be registered in the IP, which will enforce data integrity and DQM where required. Message requests and responses will be managed by the Integration Platform, which will enforce common security protocols to ensure that access to the IP and integrity of messages is secure.

Data Integration Toolkit allows for EDI transaction handling and all other ongoing file-based data exchanges in standard (e.g., HL7) and custom formats with HHS 2020 legacy and external systems.

System Migration Repository contains data conversion tooling and intermediate data storage for migrating data from legacy systems to the new BPO modules.

HHS 2020 Enterprise Applications

This is a grouping for all new BPO module applications, services and legacy systems integrated into HHS 2020 enterprise.

Shared Services are the design and implementation responsibility of the SI including operationalization of all COTS supporting software which enable shared services functionality and access by consumers. This logical group consists of one or more master data management (MDM) instances (for managing master indices for members/consumers, providers, and potentially others), shared reference data, a shared document Management solution (for all scanning, storing, imaging, creating and managing all documents), a shared address standardization service, and a set of shared auditing/logging services.

MMISR BPO modules are component service packages provided by the BPO module contractors. This consists of all decoupled, stand-alone applications licensed/implemented through the distinct procurements of the MMISR program:

- the Quality Assurance system
- the Benefit Management Services system
- the Financial Services system

Each of these systems will rely on tooling implemented via the Systems Integrator.

Legacy Systems

This an architectural grouping of systems which exist within NM's HHS enterprise and which may or may not provide functionality for MMISR. This includes existing systems, such as ASPEN, which may undergo improvements to increase compliance with the MMISR standard of SOA-enabled integration.

Data Services

A set of data-centric functionalities implemented and operated by a technology partner, IBM Watson Health. The sub-system includes pre-canned and ad hoc report management, data visualization, analysis, business intelligence and artificial intelligence components.

External Systems

This is an architectural grouping of all systems which exist outside of NM and may be hosted by other States, by partner organizations (commercial, educational, or other) as well as federal systems.

5.3 PERVASIVE SERVICE ORIENTATION

Figure 13 shows a component static structure depiction of HHS 2020 SOA approach which allows for loose coupling of service consumers with service providers and covering 3 service categories:

1. HHS 2020 shared services enabled by newly-developed components and data repositories within the integration layer (e.g., address standardization, entity management, logging and auditing, etc.)
2. HHS 2020 specialized business services enabled by a combination BPO module and legacy systems (e.g., claims, prior authorization, reporting, etc.)
3. BPO module UI layer presentation services proxied for integration into HHS 2020 Unified Portal

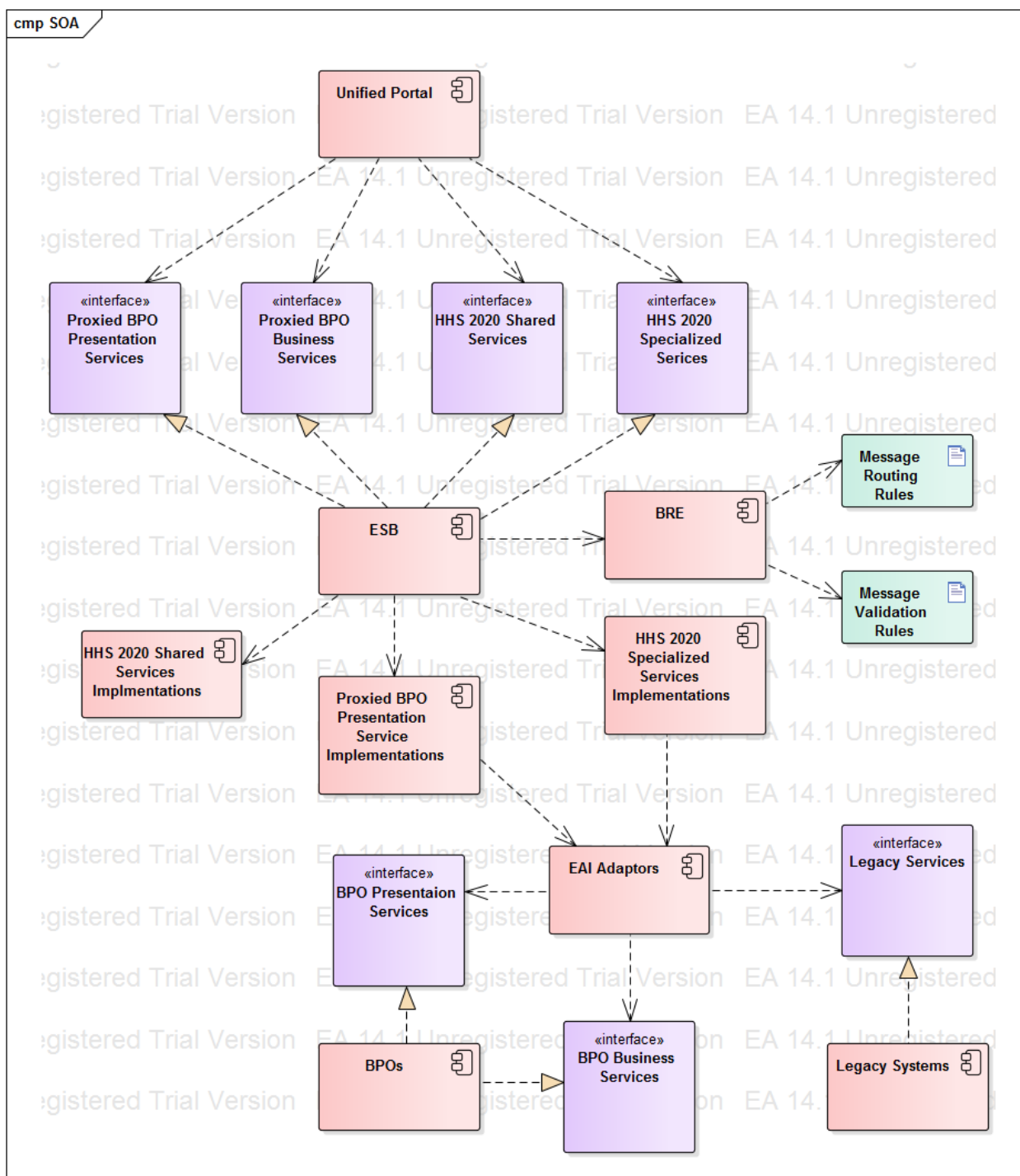


Figure 13: Details on the SOA-Based Design of the MMISR Integration Platform

5.3.1 Role of the ESB

ESB-mediated service invocation is at the core of the HHS 2020 EA. All service consumers that are aware of service interfaces (e.g., the HHS 2020 UP supporting human stakeholders or outside systems requesting data from HHS 2020 enterprise) will request the ESB to invoke the appropriate service end-points rather than having any direct end-point knowledge.

Consumers will communicate with services via messages routed to the appropriate end points by the ESB. Messages will adhere to shared/canonical schemas and validation for both schema and content. Context-based routing will occur with assistance from a BRE enforcing appropriate sets of message validation and routing business rules. The ESB will provide encoding (XML, JSON) and protocol (HTTP, JMS) translations to handle messages serving clients of varying technological capabilities and needs. The ESB will enforce role-based authorization for service access and will carry out necessary logging of service interactions for auditing purposes.

5.3.2 Shared Services

Shared services implement shared behavioral (e.g., reporting, document management, etc.) and non-behavioral (e.g., logging, address standardization) functional requirements and are intended for broad reuse across business entities. Development of shared services is the responsibility of the SI contractor and all necessary components will reside outside of the BPO modules.

Some of the shared services will rely on the MDM repository of reference data about core business concepts. An entity management service will establish relationships among entities and may preclude access to information about an entity, e.g., a State employee may be prevented from accessing information about a family member. Other shared services (e.g., Address Standardization) will make calls to external business partners (e.g., USPS, Fair Isaac Corporation, etc.) that perform data collection and validation tasks that HHS 2020 enterprise can't itself perform. Finally, some shared services (e.g., Document Management, Communication Management) will enable access to general-purpose COTS systems in a consistent, centralized and mediated fashion.

5.3.3 Specialized Business Services

Data and functionality contained in the HHS 2020 back-end (comprised of externally-hosted BPO module and integrally-hosted legacy systems) will be exposed via specialized business services. Since the back-end systems integrated via business services are based on industry-standard technologies (services, web sites, relational databases, file stores, etc.) HHS 2020 service implementations will rely primarily on short-running orchestrations of calls through COTS EAI adapters (e.g., SOAP, REST, HTTP, Open Database Connectivity (ODBC), Java Message Service (JMS), etc.) and assembly of obtained results into canonical schema-based responses.

5.3.4 Presentation Services

To enable UI layer integration, HHS 2020 has mandated adherence to web services for remote portlets or the WSRP 2.0 standard for its BPO module systems. Under this standard, an external portlet acts as a presentation layer service returning both business data in a desired format (XML or JSON) and presentation markup (e.g., lists, pagination, etc.) making it easy for the consuming portlet to render the response with minimal additional development effort.

Since the HHS 2020 EA does not allow its components to access any service end-points (including presentation services) directly, the BPO modules' services will be proxied by HHS 2020 counterparts hosted on the ESB. Each proxying service will, at a minimum, make calls to the external portlet via an appropriate COTS EAI adapter and pass the unchanged results to the HHS 2020 clients.

5.4 ADAPTIVE WEB AND THE MULTI-CHANNEL ARCHITECTURE

The HHS 2020 enterprise will serve user needs through a variety of access channels, including:

- Adaptive web applications
- Mobile applications
- SMS applications
- Desktop applications

Adaptive web applications exposed via the UPI will be the initial and the ongoing primary means of self-service interactions of the HHS enterprise and its various human stakeholders.

The UP UI will be the primary means of end user access to HHS 2020 functionality. The web user interface will be based on a COTS portal framework rendering not only a responsive, but also an adaptive user experience. Responsive experience refers to the web application's ability to scale presentation area and UI mechanisms with available screen resolution on the browser host device. Adaptive applications go beyond resolution-based display scaling and include customizations of content and functionality, depending on the usage context. As the system knows more about a user and his/her needs, it will better tailor the user experience. The continuum of context is broad, starting with unauthenticated users browsing sites with content tailored based on the user's geographic location (assuming access to location has been granted), to authenticated users during program enrollment with limited, goal-oriented functionalities, to authenticated, fully enrolled users interacting with most complete sets of UI features.

The preferred mechanism for State employees to interact with functions exposed by both the HHS 2020 services and 3rd party applications is via State-provided, tailored UI components via the internal Unified Portal. These components will have a consistent look and feel and will participate directly in UI process orchestrations, including immediate posting of workflow step outcomes to the process orchestration

engine. Such custom-built UIs will rely on underlying services for data acquisition and manipulation. The same UI components can be reused in multiple workflows.

5.5 COMPONENT RE-USE

The HHS 2020 ecosystem will be comprised of reusable, loosely-coupled components that can be brought together through an orchestration to achieve both long- and short-running business process capabilities.

Reusability and platform independence of HHS 2020 architecture is achieved through three complementary technical approaches:

1. Design by contract
2. Adherence to standards for technological interoperability
3. Reliance on configuration of proven COTS products rather than custom software solutions

All HHS 2020 functional component design decisions are grounded in corresponding business requirements. All components expose their functionalities through well-defined programmatic interfaces. It is therefore possible to create implementations of the same set of requirements in different ways while hiding all technology-specific implementation details from consumers. This implementation flexibility is applicable to other NM HHS stakeholders that will join and leverage the HHS 2020 ecosystem in future. The HHS 2020 EA will be available for other state Medicaid enterprises to leverage as well.

The possibility of complete implementation transparency vis-à-vis consumption of HHS 2020 components by clients is enabled through adoption of standards for technological interoperability. HHS 2020 services will be discoverable via WS-Discovery (Web Service Dynamic Discovery) and UDDI (Universal Description Discovery and Integration) protocols. Service invocation will occur over an HTTP channel in either SOAP (Simple Object Access Protocol) with XML (Extensible Markup Language) message encoding or via REST (Representative State Transfer) protocol with JSON (Java Script Object Notation) message encoding. Service implementations will be secured using technology-independent identity and principal objects accessible from any client development platform.

The HHS 2020 EA favors use of COTS adapters and orchestrations to implement reusable service functionalities and BPEL orchestrations to enable long-running business process automation. Both types of orchestrations will be assisted by a COTS BRE that houses rule logic outside of functionality implementations. Use of orchestration-based solutions allows for quick modification of service and process capabilities with evolution of business needs. Reliance on open, human-readable and repeatable process and rule configurations enables knowledge sharing among larger Medicaid ecosystem, so that external organizations in need of similar functionalities can have a substantial productivity boost on their solution development efforts.

5.6 SECURITY CONSIDERATIONS

The HHS 2020 EA is governed by a combination of security control requirements found in MARS-E 2.0 and FIPS 140-2 standards intended to prevent unauthorized access to system data and functionalities. Compliance with 18 MARS-E 2.0 security control families is distilled into four separate focus areas of the HHS 2020 enterprise:

- Application security is implemented in software components and covers run-time execution of the following capabilities:
 - Authentication
 - Authorization
 - Encryption
 - Non-repudiation
 - Auditing
- Network and system security covers run-time operation of server nodes and networks providing the following capabilities:
 - Network partitioning
 - Minimization of potential attack surface
 - Access monitoring
 - Auditing
 - DDoS attack detection and response
 - Software intrusion detection and response
- Physical security covers the following aspects:
 - Physical access controls
 - Physical intrusion detection and response
- Configuration management
 - Application security configuration changes
 - Network and system security configuration changes
 - Physical security configuration changes

All human users of HHS 2020 functionalities will be permitted access after successful multifactor authentication. Although all users will have an ID and password combination, representing the “what you know” portion of the authentication mechanism, the system will consider additional factors like trusted device (“what you have”) and user’s location (“where you are”) as part of the authentication scheme for a given usage context (e.g., a State employee accessing an internal web site from a State-issued computer vs. a constituent accessing a public web site from an unknown device).

After successful authentication users will be assigned permissions to access system functionality and data based on application role membership. All user roles will be defined in the identity management solution, the system’s “first line of defense” when authorizing system access. Additional entitlement checking will be performed to ensure that the data requested by a user can be rendered based on the user’s identity. Such identity-driven entitlement checking will be enabled by the shared entity management service,

which will establish relationships among entities, including the family ties of State employee with constituents.

All data traversing the HHS 2020 enterprise will be encrypted both in transit and at rest to an applicable standard of strength using certificate services from Microsoft Active Directory and database encryption via MarkLogic and Oracle. Other at rest encryption needs will be supplied by Vormetric encryption from Thales Security. All web server requests (for web sites, services and business process orchestrations) will be hosted under the Transport Layer Security (TLS) protocol, ensuring appropriate web channel privacy protection. Data in databases and file systems will be encrypted as well using the same cryptographic infrastructure.

Encryption capabilities will be used for an additional purpose of non-repudiation by relying on digital signatures to sign communication content. By supplying a public key with which to decrypt digitally signed content, the sender ensures that the signed communication originated from the device where the corresponding private key can be found.

All access to secure information will be audited. Failed authentication and lack of authorization will be logged and processed via the identity management system. Rogue access attempts will be prevented by denying the originating host system access and triggering investigative and corrective actions by the State IT Security personnel.

6 INFRASTRUCTURE ARCHITECTURE STRATEGY

It is HHS 2020 preferred practice to have each module contractor host their applications in their own data center so that they administer, secure and monitor their own infrastructure and tools. However, since the State reserves the right to bring the application into State's data centers, each vendor's solution must be compatible with State's hosting capabilities and constraints.

Each individual module contractor has leeway on platform choices, although the State will likely restrict platform choices to Linux or Windows, and restrict the module contractors to using commodity hardware and storage, COTS container management, virtualization, and best-of-breed system management. It is not anticipated that any modular system will be a mainframe system; rather, the State expects smaller, more agile systems that can scale both vertically and horizontally, depending upon the nature of the application.

The IP and its components, as well as the Unified Portal, will be hosted inside State data centers which are located in Santa Fe (Simms) and Albuquerque (Oso Grande). The primary location is the Simms data center in Santa Fe, with the backup/disaster recovery environment planned for deployment and operation in the Oracle Government Cloud (OGC). Each of the state-run data centers is a Tier 3 data center interconnected with high speed dedicated lines. The IP system and its components will run in a VMware virtualized hyperconverged architecture, such as VxRack. These systems are highly scalable and highly available, with load balancing, software defined storage and networking. Nodes can be either compute-centric or storage-centric, depending on need. The virtual machines, applications, and data in the primary site will be replicated to the backup site in the OGC in a manner that will meet the State's required recovery time objective and recovery point objective.

Each MMISR module will require high-bandwidth, high-throughput internet connectivity for end users. The Simms and Oso Grande data centers can meet these performance requirements by offering secure, continuously available, highly scalable, and self-contained infrastructure. HSD can achieve network connectivity and defense-in-depth security by means of employing a multi-layered approach that includes: network segmentation (DMZ), virtual private network (VPN) connections, firewalls, intrusion detection (IDS) and prevention (IPS) capabilities, secure remote access, and proxy controls. Access to State assets will pass through secure site-to-site IPsec tunnels for dedicated server traffic, while end user traffic will route through proxy servers via F5 load balancers.

6.1 HOSTING OPTIONS

The diagram in Figure 14 depicts how different components of MMISR are decoupled, to the degree that they may be hosted, managed and operated in various physical environments, even in different State, vendor and partner data centers, cloud-based systems, and each with separate security zones.

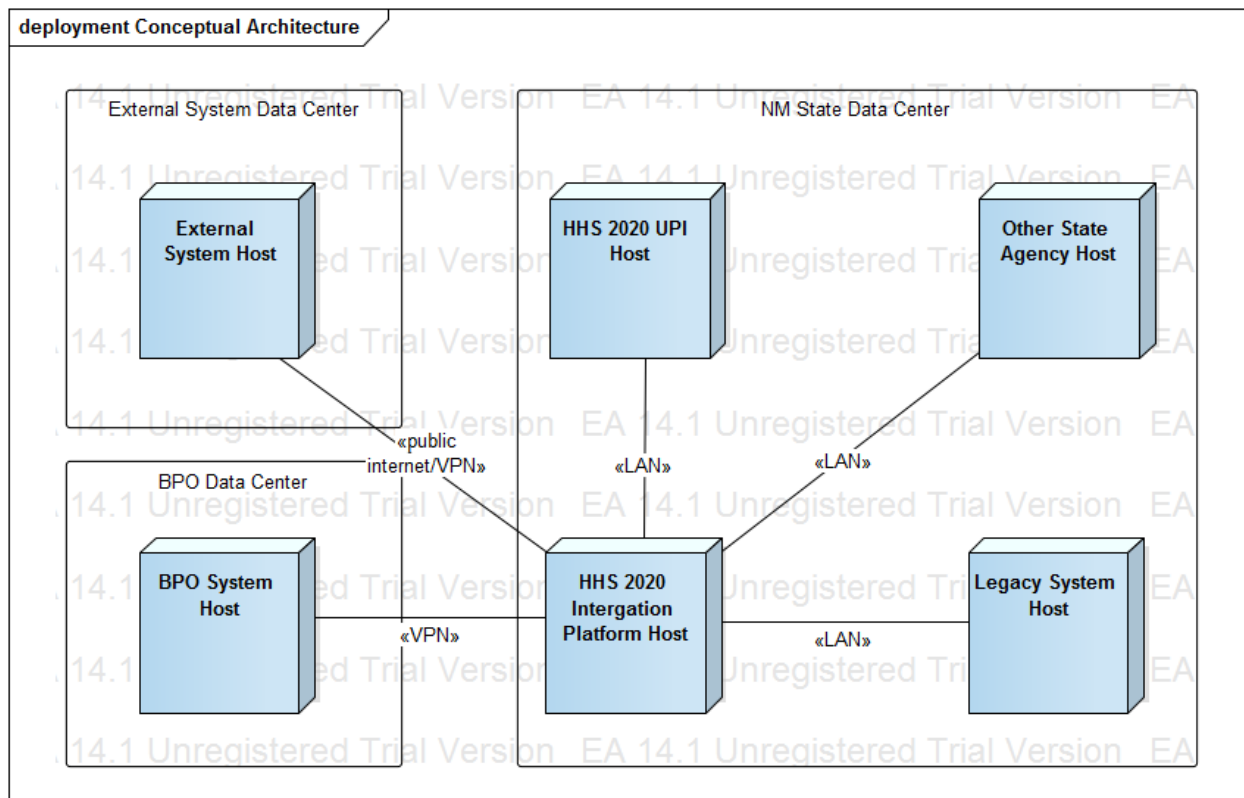


Figure 14: High Level Deployment Architecture of MMISR

MMISR architecture assumes that not all systems, subsystems and services will reside in the same data center. Some systems will be hosted and administered in vendors' data centers and some will run in State of New Mexico data centers. All component systems will integrate and interoperate through a single Integration Platform (IP) that enforces SOA principles, Data Quality Management verification and validation, security, auditing and logging. The IP will support highly reliable and scalable shared services, which will be used by all system assets that are part of MMISR.

Like all other technical decisions, uses of cloud computing within the HHS 2020 ecosystem have been carefully considered in light of business needs and Total Cost of Ownership (TCO) for the resulting solution. NM plans to leverage cloud environments for some systems development and SDLC testing activities and for disaster recovery (DR) purposes. With the HHS 2020 EA maturing over time and

achieving proven results in an on-premise deployment, the State will consider migrating additional elements of the HHS 2020 ecosystem into suitable cloud facilities.

6.2 SECURITY CONSIDERATIONS

To secure the HHS 2020 infrastructure, the network will be segmented to allow minimum access for functionality. This will be done via software defined network microsegmentation with VMware's NSX. All traffic to and between network zones will be logged. The firewall logs are forwarded to Splunk for auditing by the HSD security team. All hosted modules, as well as other state agencies' systems that participate in the HHS 2020 enterprise, will connect to the IP through a VPN. MARS-E controls for servers and network devices will be adhered to. All operating system security patches will be applied on a timely basis.

The Simms data center is a secure facility managed by the New Mexico Department of Information Technology. Entrance is controlled by access card and biometric screening. All racks are locked at all times and the departments that own the racks control access to them.

APPENDIX A: GLOSSARY

Table 15: Glossary of Terms

| Acronym | Term | Definition |
|---------|--|--|
| ACF | Administration for Children and Families | |
| API | Application Programming Interface | A tightly-coupled interface that a programmer writes which allows other programmers to send data through the interface to a module. Usually these are “Remote Procedure Calls” that tightly couple the hosting system to the client system. |
| ARB | Architecture Review Board | |
| Asset | Asset | An asset is any piece of software or hardware that makes up a part of the HHS 2020 EA. Software assets can be designs, drawings, checklists, files and documents. |
| ATLSD | Aging and Long-Term Services Department | |
| BA | Business Architecture | The body of work that captures, specifies manages and communicates business area needs, business area divisions of labor, business processes, business functions, business tasks and their interactions with each other, with external systems and with users. This is one of three “realms” of architectural design and specification that are a part of the New Mexico Enterprise Architecture. |
| BAM | Business Activity Monitoring | |
| BPM | Business Process Management | |
| BPO | Business Process Outsourcing | |
| BRE | Business Rules Engine | |
| BTC | Business Transformation Council | |
| CA | Continuously Available | |
| CIO | Chief Information Officer | |
| CMS | The Centers for Medicare & Medicaid Services | The federal sponsor of the MMISR project. CMS is responsible for setting the guidelines, regulations, certification requirements, and federal financial participation for state MMISR projects. |
| COTS | Commercial Off-The-Shelf | |
| CYFD | Children Youth and Families Department | |
| DevOps | Development and Operations | An IT practice that creates a tighter relationship between software development and software operations by fostering better collaboration between the builders of applications and those who run and maintain the software artifacts. |
| DGC | Data Governance Council | |

| Acronym | Term | Definition |
|-----------|--|---|
| DoD | US Department of Defense | |
| DOH | New Mexico Department of Health | |
| Domain | Domain | |
| EA | Enterprise Architecture | An overarching architectural framework of an enterprise that encompasses rigorous definition of business areas, functions, and processes, shared data, and enabling technologies. |
| EAF | Enterprise Architecture Framework | |
| Ecosystem | Ecosystem | |
| EDI | Electronic Data Interchange | |
| ESB | Enterprise Service Bus | |
| ESC | Executive Steering Committee | |
| FTP | File Transfer Protocol | |
| HA | Highly Available | |
| HHS 2020 | | New Mexico's vision for an ecosystem of Health and Human Services-related programs and supporting systems working cooperatively to improve outcomes for citizens while reducing operational costs for the State by increased use of service sharing and data sharing. |
| HL7 | Health Level-7 | |
| HSD | New Mexico Human Services Department | |
| IA | Information Architecture | The body of work that captures, specifies, manages and communicates strict definitions of data used within the HHS 2020 ecosystem, including data models, data dictionaries, message schemas, requirements for data quality management and other work products. This is one of three "realms" of architectural design and specification that are a part of the New Mexico Enterprise Architecture. |
| IP | Integration Platform | |
| JDBC | Java Database Connectivity | |
| JMS | Java Messaging Service | |
| JSON | JavaScript Object Notation | |
| MDM | Master Data Management | |
| MITA | Medicaid Information Technology Architecture | |
| MMIS | | |
| MMISR | MMIS Replacement | |
| NASCIO | National Association of State Chief Information Officers | |
| NHSIA | National Human Services Interoperability Architecture | Published by the ACF in 2012, NHSIA provides an EAF in order to guide development of systems that work together across organizational silos and boundaries to accomplish ACF mission and goals. |

| Acronym | Term | Definition |
|---------------|---|--|
| NIEM | National Information Exchange Model | |
| Orchestration | Orchestration | |
| RA | Reference Architecture | A high-level design document that is the basis for myriad implementation projects that will share common architecture, design and implementation patterns. |
| Resource | Resource | Any asset that may be used by a system, and usually refers to an electronic asset rather than physical documents, files, etc. |
| SAMHSA | Substance Abuse and Mental Health Services Administration | SAMHSA worked with CMS to create the Behavioral Health (BH) BH-MITA project. |
| SMR | System Migration Repository | |
| SOA | Service Oriented Architecture | |
| SOAP | Simple Object Access Protocol | |
| SSO | Single Sign On | |
| TA | Technology Architecture | <p>This body of work describes the kinds of technologies that will exist in the HHS 2020 ecosystem, how they are grouped together and managed, their responsibilities/functional roles, and how they depend upon one another to deliver the capabilities, systems, resources and assets that are the HHS 2020 ecosystem.</p> <p>This is one of three “realms” of architectural design and specification that are a part of the New Mexico Enterprise Architecture.</p> |
| TMS | Technical Management Strategy | |
| UX | User Experience | |
| VPN | Virtual Private Network | |
| Workflow | Workflow | |

APPENDIX B: MITA TECHNICAL STRATEGY CONSIDERATION COVERAGE

The following table provides a cross-reference between MITA Technical Management Strategy Considerations (9 principles, 8 goals and 29 objectives) and sections of this document. The table is used to ensure complete coverage of all considerations through at least one section of the MITA TMS deliverable.

Table 16: MITA Technical Strategy Consideration Coverage

| Type | # | Consideration Text | Covered In |
|-----------|---|--|---|
| Principle | 1 | Business driven – MITA uses technology when it supports a business goal or objective; technology should not exist for technology’s sake alone. Technical solutions will map to specific business needs. | Requirement-Centric, Traceable solution, Requirements Management Metamodel, Solution Architecture and Design Metamodel, Traceability through SDLC tools |
| Principle | 2 | Implementation neutral – States are responsible for selecting their own technology (e.g., Oracle J2EE, Microsoft.NET) to accomplish alignment with the MITA objectives. | COTS Technology Perspective, Software Architecture Vision |
| Principle | 3 | Platform independent – Stakeholders will develop reusable and platform-independent application software. | Software Architecture Vision, Pervasive Service Orientation, Component Re-Use |
| Principle | 4 | Adaptable, extensible, and scalable – States will use SOA-based applications so that they can develop them in a modular fashion to accommodate future expanding business requirements. | Software Architecture Vision, Pervasive Service Orientation, Role of the ESB, Shared Services, Specialized Business Services, Presentation Services, Component Re-Use |
| Principle | 5 | Open technology and standards based – Stakeholders will leverage the advantages of standardization (e.g., data sharing and interoperability). | Standards-Based, Enterprise Architecture, Business Architecture, Information Architecture, Technical Architecture |
| Principle | 6 | Integrated Security and privacy – States will maintain security and privacy of information throughout the MITA Framework. | Standards-Based, Government and Regulatory, Software Architecture Vision, Security Considerations, Infrastructure Architecture Strategy |

| Type | # | Consideration Text | Covered In |
|-----------|---|--|---|
| Principle | 7 | Interoperability standards – Stakeholders will establish and follow the MITA SOA design principles to insure seamless functionality between services and other entities. | Standards-Based, Technical Architecture, Pervasive Service Orientation |
| Principle | 8 | Quality data – States will design systems to establish the ability to provide the most current data so that they can make business decisions in a timely and accurate manner. | Enterprise Information Architecture Vision, Master Data Management |
| Principle | 9 | Current and proven technology – Stakeholders will select up-to-date established technology to support current business needs. | COTS Technology Perspective |
| Goal | 1 | Apply Cloud Computing concepts where possible and feasible. | Infrastructure Architecture Strategy, Hosting Options |
| Goal | 2 | Promote an enterprise view that supports enabling technologies aligned with state business processes and technologies. | Software Architecture Vision, COTS Technology Perspective |
| Goal | 3 | Utilize rules engines technologies, where possible, to extend the system configuration abilities to the business community. | Software Architecture Vision, COTS Technology Perspective |
| Goal | 4 | Provide performance standards for accountability and planning. | Moving from Transactional to Value-Based Relationships |
| Goal | 5 | Develop systems that can effectively communicate to achieve common program goals through interoperability and common standards. | Standards-Based, Information Architecture, Technical Architecture, Software Architecture Vision, Pervasive Service Orientation, Role of the ESB |
| Goal | 6 | Promote an environment that supports flexibility, adaptability, and rapid response to changes in programs and technology. | Software Architecture Vision, Component Re-Use |
| Goal | 7 | Provide data that is timely, accurate, usable, and easily accessible in order to support program analysis and decision-making. | Information Architecture Strategy |

| Type | # | Consideration Text | Covered In |
|-----------|---|--|---|
| Goal | 8 | Reduce duplication of costs by collecting data already available elsewhere and using that data to administer the program more effectively. | Software Architecture Vision, Shared Services, Specialized Business Services, Information Architecture Strategy |
| Objective | 1 | Break down artificial boundaries between systems, geography, and funding (within the Title XIX program). | Business architecture strategy |
| Objective | 2 | Adopt data and industry standards and promote the development of appropriate standards when needed. | Standards-Based, Standards Body Participation |
| Objective | 3 | Promote the use of data and technical standards to improve the cost effectiveness of IT development. The use of data standards provides better access to data by promoting data consistency and enhanced sharing through common data-access mechanisms. | Standards-Based, Software Architecture Vision |
| Objective | 4 | Adhere to technical standards, specifically open standards, to facilitate integration of Commercial Off-the-Shelf (COTS) solutions and the reuse of solutions within and among States, resulting in lower development costs and reduced development risk. | Standards-Based, COTS Technology Perspective |
| Objective | 5 | Review national standards for health and data exchange and open standards for technical solutions, using existing national standards whenever possible. When Medicaid-specific standards are necessary, the Centers for Medicare & Medicaid Services (CMS) will support collaboration efforts of industry groups in the submittal of proposed standards to national standards organizations for review and approval. | Standards-Based, Standards Body Participation |
| Objective | 6 | Promote reusable software and hardware components and modularity. | Software Architecture Strategy, Software Architecture Vision, Infrastructure Architecture Strategy |

| Type | # | Consideration Text | Covered In |
|-----------|----|---|--|
| Objective | 7 | Develop reusable services to allow a single service to pass eligibility information from a variety of program systems to a mechanized claims processing, information retrieval, or eligibility determination systems. | Pervasive Service Orientation, Shared Services, Specialized Business Services, Presentation Services |
| Objective | 8 | Differentiate between the processes, data, and technical solutions common to the State Medicaid Enterprise and those unique to individual States. | Architecture Scoped by MITA |
| Objective | 9 | Identify common business processes in order to define and reuse common solutions that enable States to share development costs. | Architecture Scoped by MITA, Collaboration and Reuse |
| Objective | 10 | Capture and represent state differences between common business processes that accommodate cost-effective solutions for state-specific needs. | Architecture Scoped by MITA, Collaboration and Reuse |
| Objective | 11 | Encourage state participation in the development of MITA models and templates to ensure that they represent commonality and differences appropriately. Create a balance between commonality and differences that enable standard mechanisms for interoperability and data exchange. The objective is to maximize the benefit across the State Medicaid Enterprise, while promoting innovation and creativity in local environments. | Standards Body Participation |
| Objective | 12 | Enable data sharing without requiring extraction and loading of the data to a central location allowing each organization control and ownership of its own data. | Information Architecture Strategy, Pervasive Service Orientation |
| Objective | 13 | Use standard definition formats to map data to standard data elements, where appropriate, and provide the data descriptions when the data elements are nonstandard. | Standards-Based, Information Architecture |

| Type | # | Consideration Text | Covered In |
|-----------|----|---|---|
| Objective | 14 | Represent security and privacy access rules for each data element in a standard manner. | Information Architecture Strategy, Requirements Management Metamodel |
| Objective | 15 | Employ a collection of services to read the data descriptions and security/access rules in order to release information to authorized users for processing. | Stakeholder-Directed, State-Controlled Information, Software Architecture Vision, Security Considerations |
| Objective | 16 | Choose to host hubs that identify themselves to others through services and use of standards for the purpose of processing and exchanging data. | Software Architecture Vision, Pervasive Service Orientation |
| Objective | 17 | Provide a beneficiary-centric focus of operations. | Business architecture strategy |
| Objective | 18 | Establish access channels, input device transparency, and built-in security and privacy in order to provide beneficiaries with “no wrong door” (i.e., single point) access to Medicaid services. | No Wrong Door, Adaptive Web and the Multi-channel Architecture |
| Objective | 19 | Improve data quality by using data standards, applying standard performance standards, and relying on the availability of the enhanced data exchange and sharing provided by the hub architecture. | Information Architecture Strategy, Standards-Based, Information Architecture |
| Objective | 20 | Use statistical analysis for comparative and normative analyses in order to provide information to improve service to beneficiaries and the resulting health outcomes by more effectively monitoring patient safety and patient care. | Data Science and Artificial Intelligence Support |
| Objective | 21 | Enable and support interoperability, integration, and open architectures. | Software Architecture Vision, Pervasive Service Orientation, Standards-Based, Technical Architecture |

| Type | # | Consideration Text | Covered In |
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| Objective | 22 | Employ services that make it possible to deploy common interoperability (i.e., system-to-system communication) and access (i.e., system-to-person communication). | Software Architecture Vision, Shared Services, Specialized Business Services |
| Objective | 23 | Package common functionality and capabilities with standard, well-defined interfaces (i.e., services), used by new applications, legacy applications, COTS software, or all three, to invoke the functionality. | Pervasive Service Orientation |
| Objective | 24 | Provide adaptability and extensibility. An adaptation (i.e., the capability that allows users to change the specifics of processes, data, or technical solutions using configuration files) enables States to customize MITA elements to meet their unique needs. An extension (i.e., the capability that allows users to add functionality and capabilities) enables States to add new functionality to MITA elements in order to meet their needs, while still meeting MITA goals and objectives. | Business architecture strategy, Collaboration and Reuse |
| Objective | 25 | Promote secure data exchange. MITA defines and integrates security and privacy capabilities throughout the architecture by identifying access requirements in the business processes, defining them within the data models, and applying them through the MITA technical models. | Standards-Based, Government and Regulatory, Software Architecture Vision, Security Considerations, Infrastructure Architecture Strategy |
| Objective | 26 | Promote good practices (e.g., the Capability Maturity Model (CMM), data warehouse). | Standards-Based, Enterprise Architecture |
| Objective | 27 | Use an EA framework and methodology that will allow States to align IT solutions with business needs. The MITA TA helps States to identify and then use common solutions to drive their State Medicaid Enterprise to support alignment with the state EA. | Standards-Based, Government and Regulatory, Enterprise Architecture |

| Type | # | Consideration Text | Covered In |
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| Objective | 28 | Use the set of MITA Framework common business processes and data standards to make it possible to develop performance standards, measurement techniques, and corresponding utility services. | Business architecture strategy, Architecture Scoped by MITA |
| Objective | 29 | Support integration of clinical and administrative data in order to achieve better health outcomes. This allows stakeholders to redirect dollars formerly spent on preventable diseases or on IT maintenance to more pressing business needs. | Business architecture strategy, Data-Driven Enterprise, Moving from Transactional to Value-Based Relationships |