

Medicaid and CHIP Eligibility Review Pilots

Round 1 Test Case FAQ's

- 1. My state has a systems release/conversion scheduled between now and December 31, when should my state run the test cases?**

CMS encourages states to run the test cases on the new system after the systems release as long as states are still able to report findings and corrective actions by December 31.

- 2. My state has already run the test cases, what should we do?**

States that have already run test cases will not need to re-run test cases. States that have already run all test cases may report on all test cases or may select a random sample of test cases to report, as long as they meet the requirements for at least 3 cases demonstrating each scenario. States should follow the procedures provided for comparison of results and reporting in the Round 1 Test Case Guidance.

- 3. Does CMS have any additional resources available for the test cases?**

Yes, CMS has made available for states the Eligibility Outcome Analysis Tool and User Guide which are available on CALT and the Round 1 Test Case Guidance. Within the User Guide states can access a tutorial video. The CALT Document Number is **doc64094**.

- 4. How can I use the outcomes tool if I don't have access to CALT?**

The Outcome Analysis Tool is stored on CALT for ease access by states. States do not need access to CALT to actually use the outcomes tool. This tool is an access data base that simply needs to be downloaded from CALT and may be offline on any desktop computer. . Pilot contacts should work with the staff in their states who have access to the CALT to obtain the tool.

- 5. Do all states have to test for the Individual eligible for the adult group?**

No, only states that have expanded their Medicaid programs to include the adult group (1902(a)(10)(A)(i)(VIII)) need to run test cases that include individuals eligible for this group.

- 6. Who is responsible for entering the test cases?**

The state may designate the staff responsible for entering the test case; however the state must ensure that testers are independent of state eligibility staff. States typically use designated testers or USI vendors.

7. My state has to manually enter the test cases. What are the steps to enter the test cases into the non-production environment?

This will vary from state to state. Each state should consult with their technical teams and contractors.

8. Will the test cases be loaded into the UAT environment in the HUB so that when performing matching they can find the people? What are the expectations during testing for the HUB calls? Will there be coordination within the HUB for the test cases provided.

No. States should assume that all verifications have been done on all information provided in the test cases. States do not need to verify information via the HUB and should skip that part of the process.

9. How detailed should states be when putting the test cases through the system? For example, do we have to enter the email address?

Any field that is required for your system to be able to determine eligibility should be included.

10. Can states change some test case information, such as date of birth, if necessary to pass system edits?

No. Test data must be consistent in order for state results to be compared to CMS expected results.

11. Can CMS put the test cases in a similar format to the FFM testing so states don't have to manually enter every case?

CMS is unable to send test data in a different format due to resource constraints; there data is in the original format and a more user friendly format.

12. Will CMS require additional verifications, data, or screen shots from the test environment after the submission of test case results, if so how long are states required to retain this information?

States must retain sufficient documentation of the testing process and outcome in the event that CMS or other agency should chose to review the state's results in greater detail. This should include a clear audit trail of what the state's system produced such as screen shots with relevant dates. The state should maintain the information for a minimum of three years from the date the information was reported to CMS. For more detail, refer to the Test Case Reporting Section of the Round 1 Test Case Guidance.

13. If a test case and/or test scenario matches CMS's expected outcome, will the state be required to re-test that test case and/or scenario in the Round 2 pilot? Or will only the test cases that fail to match the expected outcome need to be run to verify that the corrective actions implemented were effective?

Forthcoming Round 2 test case guidance will specify which test cases states should run in Round 2. CMS anticipates requiring states to rerun any test cases for which discrepancies were identified in Round 1 to evaluate the effectiveness of corrective actions. In addition, states should also expect to retest test cases if there were changes to states' eligibility policies that necessitated a change in the MAGI business rules and/or if the state transitioned since Round 1 from a manual or mitigation approach to calculating MAGI to an automated process to ensure that the new automated rules engine is producing accurate results. States should not proceed with Round 2 test cases until official guidance is issued from CMS.

14. Are states required to report corrective actions for the test cases?

Yes, states are required to report corrective actions. The corrective actions for the test cases should be reported on the Eligibility Outcome Analysis Tool. If the discrepancy was a result of an error, the corrective actions should include a detailed description of interim fixes, long term fixes, and scheduled start and completion dates. For more detail, refer to number 5 under Test Case Process and Requirement Section of the Round 1 Test Case Guidance.

15. Will CMS provide a template for specific information that must be included in the IV & V certification statement?

No. The Round 1 Test Case Guidance identifies the specific items to be included in the IV&V verification. IV & V vendors may use a format similar to the one used for eligibility systems and HUB testing or may use a different format as long as it includes the required information.

16. Are states required to use an IV&V vendor to certify the test results? What if there is no IV&V vendor available?

State should use an IV&V vendor if possible. However if an IV&V is not available states may use an independent entity such as a non-subordinate sister agency or similar alternative to demonstrate that the QC reviews of these test cases were completed by a separate department than that which usually handles eligibility operations. States should follow the same guidelines that were used for testing with the HUB.

17. What information should be included in the cover letter?

The cover letter should include a description of the environment used to run the test cases, a list of the specific test cases selected for each scenario, a statement certifying the accuracy of the information, and the signature of the state official or designee. For more detail, refer to number 2 under Test Case Process and Requirement Section of the Round 1 Test Case Guidance.

18. How are results for the Round 1 Test Cases to be reported to CMS?

State results for the Round 1 Test cases are exported to an Excel file. This file, along with a cover letter signed by your state official or designee and IV & V certification of the results must be submitted to the Medicaid and CHIP Eligibility Pilot mailbox: FY2014-2016EligibilityPilots@cms.hhs.gov by December 31, 2014. For more detail, refer to the Test Case Reporting Section of the Round 1 Test Case Guidance.