MEMORANDUM OF UNDERSTANDING

Contract #00000000000000000000021231

This Memorandum of Understanding ("MOU") is entered into by and between the Indiana State Department of Health ("ISDH") and the Indiana Family and Social Services Administration ("FSSA"), including all of its divisions. In consideration of the mutual understandings and covenants set forth herein, the parties agree as follows:

I. INTRODUCTION AND PURPOSE

a. ISDH and FSSA, through its various divisions, routinely exchange data in electronic format in support of programs undertaken by each agency in which shared information is necessary for the successful execution of such programs. Such data exchanges are either permitted or required by applicable federal and/or state laws and regulations and support a defined business need with respect to the associated programs.

b. In order to minimize the number of agreements entered into by and between ISDH and FSSA regarding such data exchanges, and in order to assure consistency of the terms and conditions that apply to all such data exchanges, the parties wish to enter into a single agreement (this MOU) that includes a definition of each such data exchange attached hereto as appendices.

c. The purpose of this MOU is to establish a mutual understanding of the roles and responsibilities of the parties with respect to all current and future electronic data exchanges between ISDH and FSSA as set forth in the appendices to this MOU.

d. Upon execution, this MOU contains Appendices 1 through 8 all of which are attached hereto and hereby incorporated. Additional or amended appendices will be added in accordance with Section III.

II. TERM AND TERMINATION

a. This MOU shall be effective July 1, 2017 and shall terminate on June 30, 2019.

b. This MOU may be renewed for successive two (2) year terms upon mutual written agreement between the parties. Any renewal of this MOU will include all appendices attached hereto at the time of the renewal unless otherwise stipulated at the time of the renewal.

c. This MOU may be terminated with or without cause by either party upon thirty (30) days written notice to the other party

d. When the Director of the State Budget Agency makes a written determination that funds are not appropriated or otherwise available to support continuation of performance of this MOU, the MOU shall be cancelled. A determination by the Director of the State that funds are not appropriated or otherwise available to support continuation of performance shall be final and conclusive.

III. AMENDMENT

a. This MOU may be amended at any time by mutual written agreement of the parties; provided however:

i. With respect to an appendix only, an appendix may be added, removed, or modified by mutual written agreement of ISDH and the FSSA Division of Technology Services or the FSSA Division responsible for the data exchange.

ii. Appendices do not need to be amended to reflect minor changes in the data fields that do not otherwise materially affect the data exchange or legal authorities cited therein.

IV. FUNDING

This MOU is hereby established as a no-cost agreement between the parties. Any data sharing

exchanges between ISDH and FSSA that involve the exchange of funds will be addressed in separate MOUs.

V. AUTHORITY

This MOU is executed under the authority of IC 12-8-1.5-6.

VI. PROVISIONS

a. ISDH and FSSA agree to undertake specific electronic data exchanges as defined in each of the appendices attached hereto.

b. The data to be exchanged, including but not limited to, sending party, receiving party, meta data, data source, frequency of the exchange, data selection criteria, method and means of the exchange (e.g., secure file transfer), and additional considerations will be defined in the appendix for each exchange.

c. Each appendix for each data exchange will cite the business purpose (including program) for the exchange and the legal authorities under which the data exchange is permitted or required.

d. The term for each data exchange will be identified in the applicable appendix. By way of example only, some exchanges may be only required for a short period of time; others may continue for as long as this MOU continues in force, including renewals.

VII. CONFIDENTIALITY AND SECURITY OF THE DATA

a. ISDH and FSSA agree that each is required to secure and protect the confidentiality, integrity, and availability of confidential data in its safekeeping, including but not limited to Protected Health Information[1] and Personal Information[2], in compliance with applicable federal and state laws and regulations. These laws and regulations include, but are not limited to, the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"}, including regulations and subsequent amendments thereto, Indiana Code 4- 1-10, Indiana Code 4-1-6, 42 CFR Subpart F, 7 CFR 205.50, Indiana Code 12-15-27, Indiana Code 12-14-1, and the Patient Protection and Affordable Care Act (Public Law 111-148).

b. Data provided to one party (the "receiving party") by the other party (the "sending party") under this MOU (the "Data") will be kept secure and confidential (collectively, "safeguarded") by the receiving party (inclusive of any third parties performing services on behalf of the receiving party and to which access and use of such Data is authorized by the receiving party) in accordance with applicable state and federal laws and regulations and not used or disclosed outside of the purpose for which the Data was provided under this MOU, excepted as otherwise may be required by law.

c. Should a breach of confidentiality occur, meaning that the Data in the safekeeping of the receiving party has been used or disclosed in a manner not permitted by this MOU or by applicable federal and state laws and regulations (collectively, a "breach"), then:

   i. The receiving party will undertake appropriate mitigating actions as prescribed by applicable federal and state laws and regulations, including providing notice to the victims of the breach and/or other notices to state and/or federal authorities where required;

   ii. The receiving party will provide prompt notice of the breach to the sending party in the manner described below:

      a) When ISDH is the receiving party:

         1) Once a breach has been confirmed by the ISDH Security Manager, the ISDH

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[1] As defined in 45 CFR §160.103
[2] Reference IC 4-1-6-1 and IC 4-1-11-3 for examples of Personal Information; also commonly referred to as Personally Identifiable Information.

Security Manager will provide an initial awareness notice to the FSSA Privacy & Security Officer within twenty-four (24) hours of such confirmation; such notice may be made by phone (877-690-0010 or 317-232-4732) or by email (fssa.PrivacyOffice@fssa.in.gov);

2) Subsequently, the ISDH Security Manager (or designee) will periodically update the FSSA Privacy & Security Officer (by email at fssa.PrivacyOffice@fssa.in.gov) regarding the status of the breach including mitigating actions taken or will be undertaken by ISDH; the timing of such periodic updates will at the discretion of the ISDH Security Manager but made such that the FSSA Privacy & Security Officer is kept reasonably apprised of the status; and,

3) Upon conclusion of the breach event the ISDH Security Manager will provide the FSSA Privacy & Security Officer with a copy of ISDH's internal breach report or similar report summarizing the breach details and the actions taken.

b) When FSSA is the receiving party:

Reporting of Security Incident to ISDH. FSSA, in collaboration with FSSA Privacy Office shall report to ISDH any security incident of which the FSSA becomes aware. Successful breaches of security shall be reported by the FSSA Privacy Office to the ISDH Security Manager by calling (317) 233-4945 within two (2) hours of becoming aware of the breach and in electronic form to PrivacyandSecurityOfficers@ISDH.in.gov within twenty-four (24) hours of becoming aware of the breach. If the FSSA Privacy Office is unable to reach the ISDH Security Manager at the above phone number, then the FSSA Privacy Office will report successful breaches of security to the Chief Information Officer by calling (317) 233-7673 within the same timeframes indicated above. In the event a successful breach is discovered outside of normal business hours, leaving a voice message at the above listed numbers is sufficient verbal notification; however, FSSA in collaboration with the FSSA Privacy Office shall still comply with the electronic reporting requirement stated above.

The following format should be used when reporting the breach electronically:

- **Name of Agency**
  Incident # (number assigned by reporting entity)

- **Type of Incident** –
  Date and Time of Report (Date and time incident was initially reported)
  Date and Time of Incident (Date and time incident occurred)
  Time potential breach was identified

- **Name and Title of Person Reporting Incident**
  Contact Information (of person reporting incident)

- **Summary of Incident** (include pertinent information regarding the potential security breach)

- **Description of Personally Identifiable Information Involved** (Include number of participants' records involved)

- **Action Taken**
  Name of Person(s) Conducting Preliminary Investigation

  Contact Information (of individual responsible for Issue Analysis)

  Date Investigation started

Action(s) Taken (include dates, times, and names of agencies notified of the Incident)

- **Conclusion**
Measures taken to address issue, and prevent any reoccurrences

d. All electronic data exchanges between FSSA and ISDH will be secured through encryption technologies that meet or exceed the standards under Federal Information Processing Standards (FIPS) 140-2, Level 1, for data in motion.

VIII. NOTICE TO THE PARTIES

a. Where written notice is required under this MOU, such written notice shall be provided to the FSSA Secretary (or designee) and the Contracts Section of ISDH.

b. With respect to the performance of an electronic data exchange as defined in an appendix to this MOU, communication shall be between the agency program contacts listed in the applicable appendix.

c. Each agency will notify the other when there is a change in the program contact listed in an appendix to help facilitate communication.

THE REMAINDER OF THIS PAGE HAS BEEN INTENTIONALLY LEFT BLANK

In Witness Whereof, INDIANA STATE DEPARTMENT OF HEALTH and the Indiana Family and Social Services Administration have, through their duly authorized representatives, entered into this Memorandum. The parties, having read and understood the foregoing terms of this Memorandum, do by their respective signatures dated below agree to the terms thereof.

INDIANA STATE DEPARTMENT OF HEALTH

Indiana Family and Social Services Administration

By: *Aaron N. Atwell*

By:

Title: CFO

Title:

Date: 7/3/2017

Date:

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Electronically Approved by: State Budget Agency By: (for) Jason D. Dudich, Director *Refer to Electronic Approval History found after the final page of the Executed Contract for details.*	

Summary of Appendices
To Agreement #00000000000000000000021231

2017 Appendix	Data From	Data To	Description	Comments
1	FSSA-OMPP	ISDH-MCH	Prenatal and Postnatal Medicaid Claims	Access to be provided via Data Mart when ready; currently exchange is not operating
2	ISDH-CSHCN/FSSA-DFR	FSSA-DFR/ISDH-CSHCN	IHCP enrollees, including TPL	Two way data exchange
3	ISDH-HIV/FSSA-OMPP	FSSA-OMPP/ISDH-HIV	Eligibility for MA & TANF	Exchange of 270/271 Enrollment Eligibility Verification Transactions
4	FSSA-DFR	ISDH-WIC	Medicaid, SNAP and TANF eligibility	
5	FSSA-OMPP/ISDH-Immun.	ISDH-Immun./FSSA-OMPP	MA ages 0-18	Two way data exchange
6	ISDH Refugee/FSSA-OMPP	FSSA-OMPP/ISDH Refugee	Refugee exchange	Two way data exchange; some additional details on the technical exchange need to be worked out between ISDH and OMPP
7	FSSA-OMPP/ISDH-Lead	ISDH-Lead	Blood lead data match (2-way)	Exchange of 270/271 Enrollment Eligibility Verification Transactions; ISDH blood lead data to OMPP; The Blood Lead Detail reports from OMPP have been (and continue to be) sent to: JamKing@isdh.IN.gov , mmettler@isdh.IN.gov , MMeade@isdh.IN.gov , ASaini@isdh.IN.gov
8	ISDH-Vital Records	FSSA-DFR	Newborn records	
8	ISDH-Vital Records	FSSA-Audit	Birth and Death records	
8	ISDH-Vital Records	FSSA-Estate Recovery	Death records	
8	ISDH-Vital Records	FSSA-DMHA	Death records	
8	ISDH-Vital Records	FSSA-DDRS (BQIS)	Death records	
8	ISDH-Vital Records	FSSA-Aging (QAQI)	Birth and Death records	
8	ISDH-Vital Records	FSSA-Aging (CaMSS)	Death records	
8	ISDH-Vital Records	FSSA-OMPP	Mortality	

Appendix 1
To Agreement #000000000000000000021231

Section 1. This is an appendix to the above referenced Agreement with respect to the data exchange described below between the Indiana State Department of Health (ISDH) and the Indiana Family & Social Services Administration (FSSA). This Appendix—check the box that applies:

☑   Is a new Appendix to the Agreement (designated new as this is an appendix to a new MOU)

☐   Replaces Appendix _____, Version ____ (update Version Number below)

☐   Removes Appendix _____ per the mutual written agreement of the parties as signed below effective

          _____ (mm/dd/yyyy)—remove data exchange table and sign in Section 3 below.

Section 2. Data Exchange Table (replace the guidance in *italics* with the required particulars):

Information	Description
Associated Program	ISDH Maternal and Child Health (MCH); FSSA Office of Medicaid Policy and Planning – Prenatal and Postnatal Medical Claims
General Description of the Data to be provided	OMPP will provide Medicaid member claims and demographic information to MCH, along with applicable Provider information.
Business Justification	The purpose of the information shared between MCH and FSSA/OMPP will assist in the analysis effort to help improve both pre- and post-natal care for mother and child in the Medicaid population. In addition, it will also help enable the State to report on the CMS Core Set Measures for Maternal and Child Health, outcome measures for Title V, supplement contact data for the Pregnancy Risk Assessment Monitoring System (PRAMS), and other evaluations of MCH and OMPP programs and services.
Legal Authority	IC 16-37-1-10; IC 12-8-1.5-6
Program Management Contacts	ISDH Contacts: Martha Allen, Director, Maternal and Child Health - ISDH 317-233-1252 Kelsey Gurganus- ISDH 317-234-1524 FSSA Contacts: Medicaid Director, Office of Medicaid Policy and Planning 402 West Washington Street Indianapolis, IN 46204; Susan Beecher – OMPP 317-234-7887
Data Exchange Technical Contacts	ISDH Contacts: Mohan Ambaty, Systems Analyst/Program Manager, mambaty@isdh.in.gov, (317-232-0758) FSSA Contacts: Mark Wiley, Senior Manager, Data & Analytics, Jon.Wiley@fssa.IN.gov (317-232-4308); DataWarehouse.Communication@fssa.IN.gov; Data.Analytics@fssa.IN.gov
Records (data) deemed confidential by Sending Party (IC 4-1-6-8.5(2))	☒ Yes ❑ No Note: all data exchanges are considered confidential unless otherwise stipulated.

Sending Party	FSSA-OMPP
Receiving Party	ISDH-Maternal and Child Health (MCH) Division
Data Exchange Term	Duration of MOU
Sending System	OMPP/FSSA Data Warehouse Data Mart
Receiving System(s) & Data Distribution	N/A—ISDH authorized access to Data Mart
Frequency	ISDH will be able to access prenatal and post-partum claims paid as needed through the Data Mart. The Data Mart will be populated with relevant paid claims on a weekly basis (reflecting claims paid during the prior week ending on Friday or the last business day of the week).
Data Selection Criteria	ISDH will be able to select the prenatal and post-partum claims as need through the Data Mart.
Data Exchange Method	ISDH will be provided authorized access to the Data Mart. FSSA Data Warehouse and ISDH personnel will collaborate on the method and means for authorized access.
Meta Data	Recipient Data (Mother/Child):

Recipient Data (Mother/Child):
First Name
Last Name
DOB
Maiden Name (if applicable/known)
Street Address
City
State
Zip
County of Residence
Phone Number
SSN
RID
Gender
Case Number
Medicaid Effective Date
Pregnancy Indicator (Y/N)
Mother's RID
Previous RID

Prenatal	**FSSA standard claims extract should be sufficient for ISDH purposes**
Notification of Pregnancy	V72.42
Pregnancy	**Diagnosis**: V22.0, V23.9,V22.1,V22.2, V23.0,V23.2, V23.4, V23.41, V23.0-24.2, V72.4, 629.81, 633.0-633.91, 639.8-640.9, 642.0-

		643.9, 644.2-644.29,645.0-649.9, 651.0-651.6, 671.0, 677.0 760.0-761.9, 765.0-765.1,779.6, 22.0-23.9, 61.6-61.7,72.4-72.42
	Prenatal Care (All)	**Diagnosis**: V23.7, V27.9, V65.11, **Procedure Code**: 59025, 59400, 59424, 59425, 59426, 59510, 59610, 59618, 76801-76817, 76818, 82105-82106, 88271-88275, 88291
	Maternal Antenatal Steroid Use	**Procedure Code**: 57170, 58300, 59400, 59410, 59430, 59510, 59515, 59610, 59614, 59618, 59622, 88141, 88142, 88143, 88147, 88148, 88150, 88152, 88153, 88154, 88155, 88164, 88165, 88166, 88167, 88174, 88175, J1725*, J3490*
	Caesareans	**Diagnosis**: 669.7, 654.20,-654.23
	Deliveries and Live Birth	**Procedure**: 59400, 59409, 59410, 59510, 59514, 59515, 59610, 59612, 59614, 59618, 59620, 59622 **Diagnosis**: 630.0-639.9,640.x1, 641.x1, 642.x1, 642.x2, 643.x1, 644.21, 645.x1, 646.x1, 646.x2, 647.x1, 647.x2, 648.x1, 648.x2, 649.x1, 649.x2, 651.x1, 652.x1, 653.x1, 654.x1, 654.02, 654.12, 654.32, 654.x2, 655.x1, 656.01, 656.11, 656.21, 656.31, 656.51, 656.61, 656.71, 656.81, 656.91, 657.01, 658.x1, 659.x1, 660.x1, 661.x1, 662.x1, 663.x1, 664.x1, 665.01, 665.x1, 665.x2, 666.x2, 667.x2, 668.x1, 668.x2, 669.x1, 669.x2, 670.02, 671.x1, 671.x2, 672.02, 673.x1, 673.x2, 674.x1, 674.x2, 675.x1, 675.x2, 676.x1, 676.x2, 678.x1, 679.x1, 679.x2
	Postpartum	
	Well-Child Visits Birth-15 Months	V20.2, V20.31, V20.32, V79.3
	Post Partum Care (All)	**Procedure**: 57170, 58300, 59400, 59410, 59430, 59510, 59515, 59610, 59614, 59618, 59622, 88141-88143, 88147, 88148, 88150, 88152-88155, 88164-88167, 88174, 88175 **Diagnosis**: V24.1, V24.2, V25.1, V72.3, V76.2
	Transportation Services (All)	A0021, A0427,A0433
	Provider	**For Claims submitted above please provide the following if available:**
	NPI Record	NPI, Business Name, First Name, Last Name, NPI Name, Gender, Address Type, Street Address, City, State, Zip, Phone number

Additional Limitations or Considerations	
Version Number	V.1 [Note: under the prior MOU this was Appendix 1; this version has changes to replace the prior use of SFTP (no longer employed) with access via the Data Mart, and is deemed V.1 under the new MOU]
Version Date	07/01/2017
Implementation Date	07/01/2017 or later depending on the subsequent availability of the Data Mart.

Appendix 2
To Agreement #00000000000000000021231

Section 1. This is an appendix to the above referenced Agreement with respect to the data exchange described below between the Indiana State Department of Health (ISDH) and the Indiana Family & Social Services Administration (FSSA). This Appendix—check the box that applies:

    ☑   Is a new Appendix to the Agreement (designated new as this is an appendix to a new MOU)

    ☐   Replaces Appendix _____, Version ___ (update Version Number below)

    ☐   Removes Appendix _____ per the mutual written agreement of the parties as signed below effective _____ (mm/dd/yyyy)—remove data exchange table and sign in Section 3 below.

Section 2. Data Exchange Table (replace the guidance in *italics* with the required particulars):

Information	Description
Associated Program	ISDH – Children with Special Health Care Needs Program (CSHCN); FSSA – DFR.
General Description of the Data to be provided	The file will contain name-linked data regarding Indiana Health Coverage Programs (IHCP) enrolled individuals.
Business Justification	Provision of the IHCP enrollment data to ISDH will allow ISDH to identify individuals who may be eligible for CSHCN programs.
Legal Authority	ISDH – 410 IAC 3.2-2-4 DFR – 42 CFR 431.615
Program Management Contacts	ISDH Contacts: Shirley Payne, Director, Children with Special Health Care Needs Program, (317-233-7046) FSSA Contacts: Medicaid Director Adrienne Shields, Director DFR
Data Exchange Technical Contacts	ISDH Contacts: Mohan Ambaty, Systems Analyst/Program Manager, mambaty@isdh.in.gov, (317-232-0758) FSSA Contacts: Mark Wiley, Senior Manager, Data & Analytics, Jon.Wiley@fssa.IN.gov (317-232-4308); DataWarehouse.Communication@fssa.IN.gov; Data.Analytics@fssa.IN.gov
Records (data) deemed confidential by Sending Party (IC 4-1-6-8.5(2))	☑ Yes ❑ No Data are confidential and may not be used for purposes other than the matching process
Sending Party	ISDH sends a file to FSSA DFR of individuals for a data match with IHCP enrollment data. FSSA DFR returns a file of matched data to ISDH.
Receiving Party	FSSA DFR receipt of the data file for matching ISDH – Children with Special Health Care Needs Program receipt of the matched data file
Data Exchange Term	Duration of MOU
Sending System	IHCP Enrollment files from ICES/IEDSS
Receiving System(s) & Data Distribution	ISDH Agency Claims Administration and Processing System (ACAPS)
Frequency	CSHCS-ICES/IEDSS FILE EXCHANGE SCHEDULE 1. ACAPS generates outbound file on every Friday at 5:00pm with the file name: WELCEPDG.GDE965FF.PROD 2. A SFTP job sends the file to BizTalk on Friday at 5:30pm 3. BizTalk will send to ICES/IEDSS right after received the file

	4. ICES/IEDSS process at 7:00pm
	5. Returning file from ICES to BizTalk on Saturday before 12:00pm with file name: ICES_CSHCS_IN
	6. A SFTP job picks up the file ICES_CSHCS_IN from BizTalk on Saturday at 2:00pm
	7. ACAPS process the file on Saturday at 2:15pm
Data Selection Criteria	ICES/IEDSS matches IHCP enrollment data based on the individuals identified by ISDH in the submitted data file.
Data Exchange Method	The BizTalk Enterprise Service Bus (ESB) (managed by IOT) transfers the files from and to ISDH—Reference the attached diagrams.
Meta Data	***Incoming data from ICES/IEDSS*** Medicaid control number Medicaid RID # Medicaid SSN Medicaid transaction type Medicaid last name Medicaid middle initial Medicaid refugee indicator Medicaid ethnic code Medicaid first name Medicaid marital status Medicaid program status Medicaid alien indicator Medicaid date run Medicaid gender Medicaid date of birth ***The data below can repeat up to 12 times:*** Medicaid eligibility begin date (1) Medicaid aid category (1) Medicaid liability (1) Medicaid eligibility end date (1) TANF flag (1) Medicaid spend down flag (1) ***The data below can repeat up to 3 times:*** Medicaid TPL begin date (1) Medicaid TPL carrier (1) Medicaid TPL policy # (1) Medicaid TPL group # (1) Medicaid TPL owner (1) Medicaid TPL policyholder (1) Medicaid TPL state (1) Medicaid TPL effective buy in (1) Medicaid TPL end date (1) Medicaid TPL city (1) Medicaid TPL address Line 11 Medicaid TPL address Line 21 Medicaid TPL zip (1)
Additional Limitations or Considerations	

Appendix 2
To Agreement #000000000000000000021231

Version Number	V.1 [Note: under the prior MOU this was Appendix 2; this version has minor changes to enhance specificity and employment of the Enterprise Service Bus BizTalk and is deemed V.1 under the new MOU]
Version Date	07/01/2017
Implementation Date	Exchange is currently in place under prior MOU.

Appendix-02
ISDH_FSSA MOU 20'

Appendix 3
To Agreement #0000000000000000000021231

Section 1. This is an appendix to the above referenced Agreement with respect to the data exchange described below between the Indiana State Department of Health (ISDH) and the Indiana Family & Social Services Administration (FSSA). This Appendix—check the box that applies:

☑   Is a new Appendix to the Agreement (designated new as this is an appendix to a new MOU)

☐   Replaces Appendix ___, Version ___ (update Version Number below)

☐   Removes Appendix _____ per the mutual written agreement of the parties as signed below effective

           _____ (mm/dd/yyyy)—remove data exchange table and sign in Section 3 below.

Section 2. Data Exchange Table (replace the guidance in *italics* with the required particulars):

Information	Description
Associated Program	ISDH HIV (MSP) & FSSA Office of Medicaid Policy and Planning (OMPP)
General Description of the Data to be provided	1. OMPP will exchange Medicaid/CHIP enrollment eligibility verification information with ISDH via the 270/271 standard transactions (relative to Ryan White eligibility). ISDH will provide Ryan White eligibility information so that FSSA/OMPP can mark those clients medically frail with an infinity end date. 2. Monitor and manage how medical services for HIV
Business Justification	This process is needed to ensure that Ryan White eligible clients are not dropped from the Medicaid or CHIP coverage.
Legal Authority	45 CFR 134.502, 45 CFR 164.506, 45 CFR 164.512(b) & 42 CFR 431.302
Program Management Contacts	ISDH Contacts: Mark Schwering, Ryan White Part B Director, HIV Division, MSchwering@isdh.IN.gov, (317-233-7189) FSSA Contacts: Medicaid Director Office of Medicaid Policy and Planning 402 West Washington Street Indianapolis, IN 46204
Data Exchange Technical Contacts	ISDH Contacts: Mohan Ambaty, Systems Analyst/Program Manager, mambaty@isdh.in.gov, (317-232-0758) FSSA Contacts: Mark Wiley, Senior Manager, Data & Analytics, Jon.Wiley@fssa.IN.gov (317-232-4308); DataWarehouse.Communication@fssa.IN.gov; Data.Analytics@fssa.IN.gov
Records (data) deemed confidential by Sending Party (IC 4-1-6-8.5(2))	☒ Yes ☐ No Note: all data exchanges are considered confidential unless otherwise stipulated.
Sending Party	1. ISDH HIV Division will send 270 standard eligibility benefit inquiry transactions to OMPP
Receiving Party	1. OMPP will return to ISDH HIV the 271 standard eligibility benefit inquiry response transaction 2. OMPP will send a file with HIV-related paid claims information.
Data Exchange Term	Duration of the MOU
Sending System(s)	1. ISDH HIV System will send the standard 270 transaction

Receiving System(s)	OMPP Core MMIS will return the standard 271 transaction OMPP will send a file with HIV-related paid claims information
Frequency	1. Weekly – Exchanged every Monday 2. Upon request (e.g., Annual, Quarterly, etc.)
Data Selection Criteria	1. Data selection (i.e., 271 response transaction) will be based on the content of the 270 eligibility verification inquiry transaction generated by ISDH. 2. Based on Diagnosis and Procedures codes provided by ISDH
Data Exchange Method	ISDH will generate the appropriate 270 enrollment eligibility verification inquiry file to be sent to DXC (operating Core MMIS for OMPP) via BizTalk Enterprise Service Bus (ESB); DXC will generate the 271 response transaction file to be sent back to ISDH via BizTalk ESB. IOT (BizTalk ESB), ISDH, and DXC will collaborate on the methods and means of generating the 270/271 transactions, including appropriate incorporation of the IHCP companion guide found at: http://provider.indianamedicaid.com/general-provider-services/electronic-data-interchange-(edi)-solutions/ihcp-companion-guides.aspx

Meta Data	(1.) With respect to the 270/271 data exchange: specific elements, including size, format, and coding are established in the 270/271 transaction structure as augmented by the IHCP transaction companion guide.
	(2.) Includes but not limited to:
	  • Recipient ID Number
	  • Recipient Name (Last, First, Middle)
	  • County of Residence
	  • Date of Birth
	  • Gender
	  • Race
	  • Paid Expenditures
	  • Provider Name
	  • Procedure
	  • NDC

Additional Limitations or Considerations	
Other	
Version Number	V.1 [Note: under the prior MOU this was Appendices 3.A and 4.A; this version has changes to enhance specificity and employment of the Enterprise Service Bus BizTalk and is deemed V.1 under the new MOU]
Version Date	07/01/2017
Implementation Date	Exchange is currently in place under prior MOU.

Appendix 4
To Agreement #00000000000000000000021231

Section 1. This is an appendix to the above referenced Agreement with respect to the data exchange described below between the Indiana State Department of Health (ISDH) and the Indiana Family & Social Services Administration (FSSA). This Appendix—check the box that applies:

☑ Is a new Appendix to the Agreement (designated new as this is an appendix to a new MOU)

☐ Replaces Appendix ____, Version ____ (update Version Number below)

☐ Removes Appendix _____ per the mutual written agreement of the parties as signed below effective _____ (mm/dd/yyyy)—remove data exchange table and sign in Section 3 below.

Section 2. Data Exchange Table (replace the guidance in *italics* with the required particulars):

Information	Description
Associated Program	ISDH -Women, Infants and Children (WIC) Program
General Description of the Data to be provided	FSSA Medicaid, SNAP and TANF eligibility data will be provided to ISDH WIC program by FSSA/DFR.
Business Justification	The ISDH WIC program provides nutrition and health screening and assessment, nutrition education and counseling, breastfeeding promotion and support, referrals to other Indiana health, family and social services providers, and supplemental healthy foods designed to meet special nutrition needs. The purpose of the data exchange is to assist ISDH with WIC enrollment efforts by identifying potentially WIC eligible women and children.
Legal Authority	1. 7 CFR 272.1(c)(1)(i) allows information collected from food stamp applicants to be shared with other federal assistance programs. 2. IC 12-14-1-7(b)(3) allows TANF applicant or recipient information to be shared with state programs that provide assistance based on need. 3. 42 CFR 431.302(c) allows Medicaid information, as part of plan administration, to be used for providing services to recipients (which is the basis of this data exchange). 4. 45 CFR 164.512(k)(6)(ii), HIPAA Privacy Rule, permits the sharing of the subject PHI among government entities providing public benefit programs if the programs serve the same or similar populations and the sharing of PHI is necessary to coordinate the programs.
Program Management Contacts	ISDH Contacts: Eldon Whetstone, Director, Indiana WIC Program, ewhetstone@isdh.in.gov, 317-234-3513 FSSA Contacts: Adrienne Shields, Director DFR, adrienne.shields@fssa.in.gov,

	317.234.2373; Sunshine Beam, Deputy Director DFR Eligibility Systems, sunshine.beam@fssa.in.gov, 317.650.0819
Data Exchange Technical Contacts	ISDH Contacts: Mohan Ambaty, Systems Analyst/Program Manager, mambaty@isdh.in.gov, (317-232-0758) FSSA Contacts: Mark Wiley, Senior Manager, Data & Analytics, Jon.Wiley@fssa.IN.gov (317-232-4308); DataWarehouse.Communication@fssa.IN.gov; Data.Analytics@fssa.IN.gov
Records (data) deemed confidential by Sending Party (IC 4-1-6-8.5(2))	☒ Yes ❑ No
Sending Party	FSSA/DFR through the FSSA Data Warehouse
Receiving Party	ISDH WIC Program
Data Exchange Term	Duration of the MOU
Sending System	FSSA Data Warehouse (using data extracted from ICES/IEDSS)
Receiving System(s) & Data Distribution	INWIC -WIC Information System Enhanced
Frequency	The 1st day of every month is the target; ISDH and FSSA will collaborate on the specific date.
Data Selection Criteria	Females enrolled in Medicaid, TANF, and/or SNAP and are pregnant and/or who have Medicaid eligible children ages 0 – 4 years as of the end of the calendar month.
Data Exchange Method	Currently, the FSSA Data Warehouse sends the file via SFTP. It is planned that the BizTalk Enterprise Service Bus (ESB) (managed by IOT) will extract the required data from the FSSA Data Warehouse and then populate the applicable ISDH database or provide a secure file for selection and input into the WIC Information System Enhanced.
Meta Data	County of Residence Category RID Close Date (Eligibility End Date YYMM) Birthdate (CCYYMMDD) Martial Status Race / Ethnicity Sex Last name First name Middle Name Member Street address Member City Member State

	Member Zip Case number Status of AG LN2 FN2 Location Phone Pregnancy Status Review number SSN (masked with last 4 digits displayed)
Version Number	V.1 [Note: under the prior MOU this was Appendix 9.B; this version has minor changes to enhance specificity and employment of the Enterprise Service Bus BizTalk and is deemed V.1 under the new MOU]
Version Date	07/01/2017
Implementation Date	Exchange is currently in place under prior MOU

Appendix 5
To Agreement #000000000000000000021231

Section 1. This is an appendix to the above referenced Agreement with respect to the data exchange described below between the Indiana State Department of Health (ISDH) and the Indiana Family & Social Services Administration (FSSA). This Appendix—check the box that applies:

☑ Is a new Appendix to the Agreement (designated new as this is an appendix to a new MOU)

☐ Replaces Appendix _____, Version ___ (update Version Number below)

☐ Removes Appendix _____ per the mutual written agreement of the parties as signed below effective
_____ (mm/dd/yyyy)—remove data exchange table and sign in Section 3 below.

Section 2. Data Exchange Table (replace the guidance in *italics* with the required particulars):

Information	Description
Associated Program	OMPP HEDIS Reporting; ISDH Immunization Division
General Description of the Data to be provided	1. OMPP will provide a file of Medicaid/CHIP recipients under age 19 years old to ISDH; ISDH will match the recipients to the vaccine registry (CHIRP) and will update the CHIRP with the Medicaid enrollment information. 2. ISDH will provide a match of Medicaid recipients ages 0 – 18 in the ISDH vaccine registry (CHIRP) and return the match file to OMPP (the file exchange from OMPP containing the Medicaid recipients to be matched to the vaccine registry .The immunization match data will be made available to the Medicaid managed care plans for their HEDIS reporting.
Business Justification	OMPP requires vaccination information on Medicaid/CHIP recipients ages 0 – 18 (i.e., under age 19 years old) for annual HEDIS and 416 reporting.
Legal Authority	42 CFR Subpart F; 42 CFR §431.17; IC 16-38-5-3(c)
Program Management Contacts	ISDH Contacts: Dave McCormick, Director, Immunization Division FSSA Contacts: Director, Medicaid Policy and Planning
Data Exchange Technical Contacts	ISDH Contacts: Cameron Minich and Vijay Pathangi FSSA Contacts: Mark Wiley, Senior Manager, Data & Analytics, Jon.Wiley@fssa.IN.gov (317-232-4308); DataWarehouse.Communication@fssa.IN.gov; Data.Analytics@fssa.IN.gov
Records (data) deemed confidential by Sending Party (IC 4-1-6-8.5(2))	☒ Yes ❏ No Note: all data exchanges are considered confidential unless otherwise stipulated by the sending party.
Sending Party	1. OMPP sends Medicaid/CHIP member file of children under age 19 to ISDH 2. ISDH sends data match file of immunization records to OMPP

Receiving Party	1. ISDH receives Medicaid/CHIP member file of children under age 19 from OMPP 2. OMPP receives data match file of immunization records from ISDH
Data Exchange Term	Duration of the MOU
Sending System(s)	Enterprise Data Warehouse (FSSA EDW) to ISDH CHIRP
Receiving System(s)	ISDH CHIRP to Enterprise Data Warehouse (FSSA EDW)
Frequency	OMPP to send: Quarterly—to be sent the second full week (on or about the 15th) of January, April, July, and October for the calendar quarter ending the previous month ISDH to send: Quarterly—to be send at the end of the month of January, April, July, and October (after data match from the file received from OMPP)
Data Selection Criteria	All current Medicaid/CHIP enrollees under 19 years of age.
Data Exchange Method	Currently, the files are posted via SFTP. Subsequently, the BizTalk Enterprise Service Bus (EBS) (managed by IOT) will be used to securely transfer the Medicaid/CHIP recipients file from the FSSA EDW to ISDH CHIRP; BizTalk will securely transfer the populated data file from ISDH CHIPR to FSSA EDW.
Meta Data	<u>Medicaid enrollment data to be sent to ISDH</u> 1. MEDICAID RID NUMBER 2. PATIENT_LAST_NAME 3. PATIENT_FIRST_NAME 4. PATIENT_MIDDLE_NAME 5. ADDRESS_1 6. ADDRESS_2 7. CITY 8. STATE 9. ZIPCODE 10. SEX 11. DATE_OF_BIRTH ISDH Match file to be sent to OMPP 1. MEDICAID RID NUMBER 2. PATIENT_LAST_NAME 3. PATIENT_FIRST_NAME 4. PATIENT_MIDDLE_NAME 5. ADDRESS_1 6. ADDRESS_2 7. CITY 8. STATE 9. ZIPCODE 10. SEX 11. DATE_OF_BIRTH 12. PROCESS DATE

	13. CHIRP ID NUMBER 14. Vaccine CVX or CPT Code 15. Facility ID or Facility Name 16. Date of Vaccine Provided
Additional Limitations or Considerations	None.
Version Number	V.1 [Note: under the prior MOU this was Appendix 5 and 6; this version has changes to enhance specificity, consolidate the two appendices into one (reflecting the actual data exchange), and the subsequent employment of the Enterprise Service Bus BizTalk, and is deemed V.1 under the new MOU]
Version Date	07/01/2017
Implementation Date	Exchange is currently in place under prior MOU.

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Appendix 6
To Agreement #00000000000000000000021231

Section 1. This is an appendix to the above referenced Agreement with respect to the data exchange described below between the Indiana State Department of Health (ISDH) and the Indiana Family & Social Services Administration (FSSA). This Appendix—check the box that applies:

☑   Is a new Appendix to the Agreement

☐   Replaces Appendix _____, Version ____ (update Version Number below)

☐   Removes Appendix _____ per the mutual written agreement of the parties as signed below effective _____ (mm/dd/yyyy)—remove data exchange table and sign in Section 3 below.

Section 2. Data Exchange Table (replace the guidance in *italics* with the required particulars):

Information	Description
Associated Program	ISDH TB/Refugee Program and FSSA Office of Medicaid Policy and Planning (OMPP); FSSA Division of Family Resources (DFR)
General Description of the Data to be provided	1. OMPP will exchange Medicaid/CHIP enrollment eligibility verification information with ISDH via the 270/271 standard transactions. 2. Monitor and manage how medical services for refugees are reimbursed.
Business Justification	The data match is used by ISDH and OMPP for monitoring and surveillance to assure appropriate delivery and payment of health care services for Medicaid enrollees.
Legal Authority	42 CFR 431.302
Program Management Contacts	ISDH Contacts: Eric Hawkins, Director, ISDH TB/Refugee Program, (317-233-7545) FSSA Contacts: OMPP--Gary Parker (Gary.Parker@fssa.IN.gov), DFR--Victoria Knowles (Victoria.Knowles@fssa.IN.gov), DFR--Suzanne Tryan (Suzanne.Tryan@fssa.IN.gov), DFR--Katie Hunter (Katie.Hunter@fssa.IN.gov)
Data Exchange Technical Contacts	ISDH Contacts: Mohan Ambaty, Systems Analyst/Program Manager, mambaty@isdh.in.gov, (317-232-0758) FSSA Contacts: Mark Wiley, Senior Manager, Data & Analytics, Jon.Wiley@fssa.IN.gov (317-232-4308); DataWarehouse.Communication@fssa.IN.gov; Data.Analytics@fssa.IN.gov
Records (data) deemed confidential by Sending Party (IC 4-1-6-8.5(2))	☒ Yes ❑ No Note: all data exchanges are considered confidential unless otherwise stipulated by the sending party.
Sending Party	ISDH will send a 270 standard eligibility benefit inquiry transaction to OMPP ISDH will send a file of refugees who have had received health services that were reimbursed by ISDH outside CORE MMIS that would include, at minimum, a

	refugee's alien identification number, health service billing code, and date of service. When applicable, ISDH will share the member RID when it is known.
Receiving Party	1. OMPP will return to ISDH the 271 standard eligibility benefit inquiry response transaction (in response to the 270 inquiry transaction 2. OMPP will return to ISDH updated Medicaid eligibility status including months of coverage, if applicable, and Medicaid claims paid for those who match the ISDH file.
Data Exchange Term	Duration of the MOU
Sending System(s)	1. ISDH ITARA database will send the standard 270 enrollment verification inquiry transaction 2. OMPP Core MMIS will send the standard 271 response transaction to ISDH. 3. ISDH will send a data file of refugees with pending/unconfirmed Medicaid eligibility and health care services claims associated with those persons 4. OMPP will send a match file with eligibility and related claims information.
Receiving System(s)	See above.
Frequency	1. Upon request for the 270/271 transactions *2.* Monthly for the refugee data match files.
Data Selection Criteria	1. Data selection (i.e., 271 response transaction) will be based on the content of the 270 eligibility verification inquiry transaction generated by ISDH. 2. Data selection (i.e., refugee match) will be based on the content of the refugee data generated by ISDH. Note: additional details need to be determined between ISDH and OMPP & DFR.
Data Exchange Method	1. ISDH will generate the appropriate 270 enrollment eligibility verification inquiry file to be sent to DXC (operating Core MMIS for OMPP) via BizTalk Enterprise Service Bus (ESB); DXC will generate the 271 response transaction file to be sent back to ISDH via BizTalk ESB. 2. It is planned that the BizTalk Enterprise Service Bus (ESB) (managed by IOT) will extract the required data from the FSSA Data Warehouse and then populate the applicable ISDH database or provide a secure file.
Meta Data	1. With respect to the 270/271 data exchange: specific elements, including size, format, and coding are established in the 270/271 transaction structure as augmented by the IHCP transaction companion guide. 2a. For the pending refugee data file ISDH will furnish OMPP:

SSN			
RID Number	If available		
Alien Number	[DS_ANumber]	[varchar](11)	
Last Name	[DS_LastName]	[varchar](50)	
Middle Name	[DS_FirstName]	[varchar](50)	
First Name	[DS_MiddleName]	[varchar](50)	
Date of Birth	[DT_OfBirth]	[date]	
Gender	[DS_Gender]	[varchar](1)	Values = "M" or "F"
Date of Arrival	[DT_OfArrival]	[date]	
Arrival Status	[NO_VisaType]	[int]	The reference table will have the values. The description field is varchar(50)
Initial Date of Screening	[DT_ScreeningDate]	[date]	

2b. Medicaid data elements requested for DFR / ISDH refugee reporting

COLUMN	FORMAT	LENGTH	DESCRIPTION
CLAIM_NUM	VARCHAR	16	Identifier of the claim
CLAIM_LINE_NUM	DECIMAL	40	Identifier of individual lines within a claim
BEG_SRV_DTL_DT	DATE (YYYY-MM-DD)	10	Begin date of the service
END_SRV_DTL_DT	DATE (YYYY-MM-DD)	10	End date of the service
DTE_BILLED	DATE (YYYY-MM-DD)	10	Billing date of the service
DTE_PAID	DATE (YYYY-MM-DD)	10	Paid date of the service
RECPNT_AID_CAT	VARCHAR	5	Recipient's Medicaid category
EDW_PGM_CD	VARCHAR	2	Recipient's program code
PROC_CD	VARCHAR	6	Procedure code
PROC_DESC	VARCHAR	100	Procedure code description

NDC_CD	VARCHAR	12	NDC code	
NDC_DESC	VARCHAR	250	NDC code description	
REVNU_CD	VARCHAR	4	Revenue code	
REVNU_CD_DESC	VARCHAR	250	Revenue code description	
CLAIM_TYPE_CD	VARCHAR	1	Claim Type code	
CLAIM_TYPE_CD_DESC	VARCHAR	100	Claim Type code description	
PAYMT_SRC	VARCHAR	10	Payment source, either MCE or FFS	
PLAN_PROVDR_ID	VARCHAR	15	Identifier of the recipient's MCE	
PROVDR_NM	VARCHAR	50	Name of the recipient's MCE	
AMT_PAID_PRORTE	DECIMAL	102	Amount paid, prorated to the line level	

Additional Limitations or Considerations	None.
Version Number	V.1 [Note: not part of prior MOU]
Version Date	07/01/2017
Implementation Date	07/01/2017

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Section 1. This is an appendix to the above referenced Agreement with respect to the data exchange described below between the Indiana State Department of Health (ISDH) and the Indiana Family & Social Services Administration (FSSA). This Appendix—check the box that applies:

   ☑   Is a new Appendix to the Agreement (designated new as this is an appendix to a new MOU)

   ☐   Replaces Appendix _____, Version ____ (update Version Number below)

   ☐   Removes Appendix _____ per the mutual written agreement of the parties as signed below effective

           _____ (mm/dd/yyyy)—remove data exchange table and sign in Section 3 below.

Section 2. Data Exchange Table (replace the guidance in *italics* with the required particulars):

Information	Description
Associated Program	ISDH Environment Public Health (EPH) & FSSA Office of Medicaid Policy and Planning (OMPP)
General Description of the Data to be provided	Data match of ISDH blood lead lab results for children under age 7 years old to identify Medicaid and CHIP children at risk. 1. OMPP CoreMMIS will exchange Medicaid/CHIP enrollment verification information with ISDH via the 270/271 standard transactions. 2. ISDH will send blood lead data for children with a birth date within the past 7 years to OMPP via SFTP/BizTalk.
Business Justification	The data match is used by ISDH and OMPP for monitoring and surveillance to assure appropriate lead screening and follow up activities are undertaken.
Legal Authority	IC 16-41-39.4-4 (ISDH); 45 CFR §164.502, §164.506, §164.512(b), 42 CFR §431.302
Program Management Contacts	ISDH Contacts: Magan Meade, Epidemiologist, (317-233-9264) FSSA Contacts: Medicaid Director, Office of Medicaid Policy and Planning
Data Exchange Technical Contacts	ISDH Contacts: Mohan Ambaty, Systems Analyst/Program Manager, mambaty@isdh.in.gov, (317-232-0758) FSSA Contacts: Mark Wiley, Senior Manager, Data & Analytics, Jon.Wiley@fssa.IN.gov (317-232-4308); DataWarehouse.Communication@fssa.IN.gov; Data.Analytics@fssa.IN.gov
Records (data) deemed confidential by Sending Party (IC 4-1-6-8.5(2))	☒ Yes ☐ No Note: all data exchanges are considered confidential unless otherwise stipulated by the sending party.
Sending Party	1. ISDH will send a 270 standard eligibility benefit inquiry transaction to OMPP CoreMMIS 2. ISDH will send a blood lead data file to OMPP
Receiving Party	1. OMPP CoreMMIS will return to ISDH the 271 standard eligibility benefit inquiry response transaction (in response to the 270 inquiry transaction) 2. OMPP will return to ISDH a blood lead data summary report of match results via email in response to the blood lead data file sent by ISDH (the summary report does not contain any PII or PHI). OMPP will provide detailed match information to ISDH and the FSSA

	managed care organizations.
Data Exchange Term	Duration of the MOU
Sending System(s)	ISDH Lead System will send the standard 270 enrollment verification inquiry transaction; ISDH Lead System will send a data file of blood lead data for children with a birth date within the past 7 years to OMPP.
Receiving System(s)	OMPP CoreMMIS will return the standard 271 enrollment verification response transaction OMPP Core MMIS will receive the blood lead data file for processing of the reports.
Frequency	1. 270/271 transaction exchange will be performed as needed (initiated by ISDH via the 270 transaction). 2. Monthly by the 23rd of the month
Data Selection Criteria	Data selection (i.e., 271 response transaction) will be based on the content of the 270 eligibility verification inquiry transaction generated by ISDH.
Data Exchange Method	ISDH will generate the appropriate 270 enrollment eligibility verification inquiry file to be sent to DXC (operating Core MMIS for OMPP) via BizTalk Enterprise Service Bus (ESB); DXC will generate the 271 response transaction file to be sent back to ISDH via BizTalk ESB. IOT (BizTalk ESB), ISDH, and DXC will collaborate on the methods and means of generating the 270/271 transactions, including appropriate incorporation of the IHCP companion guide found at: http://provider.indianamedicaid.com/general-provider-services/electronic-data-interchange-(edi)-solutions/ihcp-companion-guides.aspx The blood lead data file generated by ISDH and the data match file generated by OMPP will be posted to a folder via SFTP; subsequently, BizTalk ESB will be used to transfer the file once the methods and means of doing so are determined by ISDH, OMPP, and IOT.
Meta Data	With respect to the 270/271 data exchange: specific elements, including size, format, and coding are established in the 270/271 transaction structure as augmented by the IHCP transaction companion guide. For the blood lead data file ISDH will furnish OMPP: 1. Patient Last Name 2. Patient First Name 3. Patient Date of Birth 4. Date blood sample taken (service date) 5. Medicaid Number (if known) 6. +PB_Results 7. ScreenSite 8. SampleType 9. Reason,Gender 10. SSN 11. City 12. State 13. County 14. Zip OMPP will furnish ISDH:

	1. Patient Last Name 2. Patient First Name 3. Patient DOB 4. Patient SSN 5. Patient Gender 6. Patient Race 7. Patient Street Address 8. Patient City 9. Patient State 10. Patient Zip 11. Patient County 12. Medicaid Number 13. Medicaid/CHIP member program with effective dates and termination dates, provider name/number
Additional Limitations or Considerations	None.
Version Number	V.1 [Note: under the prior MOU this was Appendix 7.A; this version has minor changes to enhance specificity and employment of the Enterprise Service Bus BizTalk and is deemed V.1 under the new MOU]
Version Date	07/01/2017
Implementation Date	Exchange is in place under prior MOU.

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Appendix 8
To Agreement #000000000000000000021231

Section 1. This is an appendix to the above referenced Agreement with respect to the data exchange described below between the Indiana State Department of Health (ISDH) and the Indiana Family & Social Services Administration (FSSA). This Appendix—check the box that applies:

☑   Is a new Appendix to the Agreement (designated new as this is an appendix to a new MOU)

☐   Replaces Appendix_____, Version 1.0 (update Version Number below)

☐   Removes Appendix _____ per the mutual written agreement of the parties as signed below effective _____ (mm/dd/yyyy)—remove data exchange table and sign in Section 3 below.

Section 2. Data Exchange Table (replace the guidance in *italics* with the required particulars):

Information	Description
Associated Programs	FSSA: • FSSA/DFR Eligibility • FSSA Audit Services • FSSA/OMPP Estate Recovery • FSSA/OMPP Mortality Review • FSSA/DMHA Mortality Review • FSSA/DDRS Mortality Review • FSSA/Division of Aging Mortality Review ISDH Vital Records
General Description of the Data to be provided	ISDH will provide FSSA with a copy of its vital records from its IDRS (Indiana Death Registry System) and IBRS (Indiana Birth Registry System) to be used by the identified FSSA divisions as described in this Appendix. Since common birth/death information from ISDH is needed by each of the identified FSSA divisions a single data exchange can be used to minimize processing impact on ISDH.
Business Justification	FSSA/DFR Eligibility: More timely eligibility determination for newborns (SNAP, TANF, Medicaid) and more timely termination of benefits for deceased individuals by the Division of Family Resources (DFR). FSSA Audit Services: To assist with effective auditing of SNAP, TANF, and Medicaid (health coverage) programs, birth/death information is used by FSSA Audit Services to validate timely and proper enrollment (due to birth) and disenrollment (due to death) in these programs. FSSA/OMPP Estate Recovery: Timely death information is necessary for FSSA/OMPP (Office of Medicaid Policy & Planning) Estate Recovery to

	undertake efforts to recover from a deceased Medicaid beneficiary's estate amounts previously paid to the beneficiary under the Medicaid program (pursuant to applicable federal and state law). FSSA/OMPP Mortality Review: Mortality information (e.g., cause of death, contributing factors) is necessary for OMPP (Office of Medicaid Policy and Planning) to monitor member and provider services for OMPP with respect to premature births, deaths and their causes. FSSA/DMHA Mortality Review: Mortality information (e.g., cause of death, contributing factors) is necessary for DMHA (Division of Mental Health & Addiction) to monitor provider services for the population served by DMHA with respect to premature deaths and their causes. FSSA/DDRS Mortality Review: Mortality information (e.g., cause of death) is necessary for DDRS' (Division of Disability & Rehabilitative Services) Bureau of Quality Improvement Services (BQIS) to identify provider quality of care issues that harm or have the potential to harm individuals with developmental disabilities under DDRS' purview. Division of Aging Mortality Review: Mortality information (e.g., cause of death) is necessary for the Division of Aging to monitor for relevant issues for persons that were in certain programs (Aged and Disabled, Traumatic Brain Injury, and Money Follows the Person); relevant issues may include the timeliness and adequacy of service delivery and the presence of an abusive or neglectful environment.
Legal Authority	The data maintained by ISDH in its Indiana Birth Registration System (IBRS) and Indiana Death Registration System (IDRS) databases may be disclosed to FSSA pursuant to IC 16-37-1-10(a)(3). ISDH has authority to disclose Social Security numbers to another State agency pursuant to IC 4-1-10-4. The use of IBRS and IDRS information by FSSA is required or permitted under IC 12-21-2-3, IC 12-21-2-8, IC 12-11-2.4-4, and 42 CFR 441.302(a).
Program Management Contacts	ISDH Contacts: Anne Reynolds, Vital Records Epidemiologist, areynolds1@isdh.in.gov, 317.234.0280; State Registrar, 317.233.7534 FSSA Contacts: FSSA/DFR: Adrienne Shields, Director DFR, adrienne.shields@fssa.in.gov, 317.234.2373; Sunshine Beam, Deputy Director DFR Eligibility Systems, sunshine.beam@fssa.in.gov, 317.650.0819 FSSA Audit Services: Roger A. Booth, Chief Audit Executive, roger.booth@fssa.in.gov, 317.232.6859 FSSA/OMPP Estate Recovery and OMPP Mortality Review: Medicaid Director FSSA/DMHA Mortality Review: Wendy Harrold, Deputy Director Provider Quality and Performance: wendy.harrold@fssa.in.gov, 317.232.7824

	FSSA/DDRS Mortality Review: Shelly Thomas, Assistant Director, shelly.thomas@fssa.in.gov, 317.234.2764 FSSA/Division of Aging Mortality Review: Debbie Pierson, Assistant Director Community & Home Based Services, Debbie.pierson@fssa.in.gov, 317.232.0604
Data Exchange Technical Contacts	ISDH Contacts: Anne Reynolds, Vital Records Epidemiologist, areynolds1@isdh.in.gov (317.234.0280); Eric Vance, Operations Manager, evance1@isdh.in.gov (317.233.7710) FSSA Contacts: Mark Wiley, Senior Manager, Data & Analytics, Jon.Wiley@fssa.IN.gov (317.232.4308); DataWarehouse.Communication@fssa.IN.gov; Data.Analytics@fssa.IN.gov For DMHA: Ryan McClain, Database Analyst, Sr. (317.232.7905), ryan.mcclain@fssa.in.gov, and William Sweeney, Application Systems Analyst/Programmer Supervisor - Support Team Lead (317.232.7879), william.sweeney@fssa.in.gov
Records (data) deemed confidential by Sending Party (IC 4-1-6-8.5(2))	☑ Yes ❑ No
Sending Party	ISDH/Vital Records
Receiving Party	FSSA Data Warehouse (note: FSSA Data Warehouse, in concert with IOT [BizTalk], facilitates the provision of the vital records data to the appropriate FSSA division)
Data Exchange Term	Duration of MOU
Sending System(s)	ISDH IBRS and IDRS systems.
Receiving System(s)	FSSA/DFR: ICES/IEDSS (ICES is the legacy combined enrollment system for TANF, SNAP, Medicaid, and similar state benefit programs; it is being replaced by IEDSS through a phased rollout over time; this will have no impact on ISDH). FSSA/OMPP Mortality Review: Data Warehouse FSSA Audit Services: Audit File FSSA/OMPP Estate Recovery: Social Services Data Warehouse (Cognos Reporting) FSSA/DMHA Mortality Review: DARMHA FSSA/DDRS Mortality Review: BQIS Mortality Review Database Division of Aging Mortality Review: SQL Tables—populated by BizTalk then accessed by various Aging Systems: INsite, DART, PAS. Note: these systems

	are being replaced and the exchange will be modified by FSSA and IOT (BizTalk) accordingly, with no impact on ISDH; CaMSS (new Case Management System)
Frequency	Nightly to capture all IBRS and IDRS updates for the prior 24 hours.
Data Selection Criteria	All new birth and death data entered into IBRS and IDRS, respectively, since the prior exchange.
Data Exchange Method	BizTalk Enterprise Service Bus (managed by IOT) will query and select the data from the IBRS and IDRS systems and then populate the applicable databases or provide secure input files as identified above under Receiving Systems. FSSA Data Warehouse, IOT, and ISDH will collaborate on technical exchange details.
Meta Data	Reference attached spreadsheet of Meta Data
Additional Limitations or Considerations	
Version Number	V.1 [Note: under the prior MOU these exchanges were under Appendices 8.A, 10, 11, 12, 13, 14; the exchange with CaMSS is new to this appendix; this version has changes to enhance specificity, consolidate the data exchanges, and reflect the employment of the Enterprise Service Bus BizTalk and is deemed V.1 under the new MOU]
Version Date	07/01/2017
Implementation Date	Exchange is currently in place under prior MOU except for the CaMSS exchange.

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ISDH Birth Description	ISDH Field length	Data Type	FSSA (all programs)	DFR Elig.	Audit	OMPP Estate Recovery	DMHA	DDRS	AGING - INsite	AGING - CaMSS	OMPP - Mortality
Abnormal Condition - NICU Admission			x								x
Abnormal Condition - Significant Birth Injury			x								x
Birth Facility			x						x		
Birth ID	VARCHAR(13)	string	x						x		
Birth Weight - Grams			x								x
Birth Weight - Grams Comp			x								x
Birth Weight - lbs/ozs			x								x
Birth Weight - lbs/ozs Comp			x								x
Calculated Gestation			x								x
Children Dead Now			x	x							
Child's Birth Certificate Number			x								x
Child's Birth Year	VARCHAR(10)	string	x						x		x
Child's Date of Birth	VARCHAR(8)	string	x	x					x		x
Child's First Name			x	x					x		x
Child's Last Name			x	x					x		x
Child's Middle Name			x	x					x		x
Child's Race			x								x
Child's Sex			x	x					x		x
Child's SSN			x	x							x
Child's Suffix		suffix	x	x					x		x
City of Birth			x	x					x		x
Congenital Anomaly - Anencephaly			x								x
Congenital Anomaly - Cleft Palate only			x								x
Congenital Anomaly - Down Syndrome			x								x
Congenital Anomaly - Gastroschisis			x								x
Congenital Anomaly - Hypospadias			x								x

ISDH Birth Description	ISDH Field length	Data Type	FSSA (all programs)	DFR Elig.	Audit	OMPP Estate Recovery	DMHA	DDRS	AGING - INsite	AGING - CaMSS	OMPP - Mortality
Congenital Anomaly - Limb Reduction Defect			x								x
Congenital Anomaly - Microcephaly			x								x
Congenital Anomaly - None of the Above			x								x
Congenital Anomaly - Omphalocele			x								x
Congenital Anomaly - Unknown			x								x
County of Birth			x						x		x
Date of First Prenatal Visit			x								x
Death Certificate Number			x								x
DOH Batch Print Date			x	x					x		x
Estimated Gestation			x								x
Father's DOB			x	x							x
Father's First Name			x	x							x
Father's Last Name			x	x							x
Father's Middle Name			x	x							x
Father's SSN			x	x							x
Father's Suffix			x	x							
Month Prenatal Care Began			x								x
Mother Married to Father			x						x		
Mother Receive Prenatal Care			x								x
Mother Receive WIC for Herself			x	x							x
Mother's Current First Name	VARCHAR(50)	string	x	x							x
Mother's Current Last Name	VARCHAR(50)	string	x	x							x

ISDH Birth Description	ISDH Field length	Data Type	FSSA (all programs)	DFR Elig.	Audit	OMPP Estate Recovery	DMHA	DDRS	AGING - INsite	AGING - CaMSS	OMPP - Mortality
Mother's Current Middle Name	VARCHAR(50)	string	x	x							
Mother's Current Suffix			x	x							
Mother's DOB			x	x							x
Mother's Maiden Last Name	VARCHAR(50)	string	x	x							x
Mother's Medical Insurance Company			x	x							
Mother's Medical Insurance Policy Number			x	x							
Mother's SSN			x	x							x
Newborn Screening Number			x							x	x
Number of Prenatal Visits			x								x
Plurality			x	x							
Prenatal Care - Hospital Clinic			x								x
Prenatal Care - Midwife			x								x
Prenatal Care - None			x								x
Prenatal Care - Other			x								x
Prenatal Care - Other Specify			x								x
Prenatal Care - Private Physician			x								x
Prenatal Care - Public Health Clinic			x								x
Prenatal Care - Unknown			x								x
Prenatal Care Provider Type			x								x
Risk Factor - Assisted Reproductive Technology			x								x

ISDH Birth Description	ISDH Field length	Data Type	FSSA (all programs)	DFR Elig.	Audit	OMPP Estate Recovery	DMHA	DDRS	AGING - INsite	AGING - CaMSS	OMPP - Mortality
Risk Factor - Diabetes Gestational			x								x
Risk Factor - Diabetes Prepregnancy			x								x
Risk Factor - Fertility Enhancing Drugs			x								x
Risk Factor - Group B Strep			x								x
Risk Factor - Hypertension Eclampsia			x								x
Risk Factor - Hypertension Gestational			x								x
Risk Factor - Hypertension Prepregnancy			x								x
Risk Factor - None of the Above			x								x
Risk Factor - Number Previous Cesarean Deliveries			x								x
Risk Factor - Pregnancy Resulted - Infertility Treatment			x								x
Risk Factor - Previous Cesarean Delivery			x								x
Risk Factor - Previous Poor Pregnancy Outcome			x								x
Risk Factor - Previous Preterm Birth			x								x
Risk Factor - Unknown			x								x
Smoking - Cigs Per Day - 1st Trimester			x								x
Smoking - Cigs Per Day - 2nd Trimester			x								x
Smoking - Cigs Per Day - 3rd Trimester			x								x
Smoking - Cigs Per Day - Before			x								x
Smoking - Packs Per Day - 1st Trimester			x								x
Smoking - Packs Per Day - 2nd Trimester			x								x
Smoking - Packs Per Day - 3rd Trimester			x								x
Smoking - Packs Per Day - Before			x								x

ISDH Birth Description	ISDH Field length	Data Type	FSSA (all programs)	DFR Elig.	Audit	OMPP Estate Recovery	DMHA	DDRS	AGING - INsite	AGING - CaMSS	OMPP - Mortality
State File Number			x	x					x		x
Father's Ethnicity	VARCHAR(40)	string									
Mother's Mailing Street Address	VARCHAR(150)	string									
Mother's Mailing Town	VARCHAR(50)	string									
Mother's Mailing State	VARCHAR(50)	string									
Mother's Mailing Zip Code	VARCHAR(10)	string									
Mother's Residence Street Address	VARCHAR(150)	string									
Mother's Residence Town	VARCHAR(50)	string									
Mother's Residence County	VARCHAR(50)	string									
Mother's Residence State	VARCHAR(50)	string									
Mother's Residence Zip Code	VARCHAR(10)	string									
Mother's Marital Status	CHAR(10)	string									

ISDH Death Description	ISDH Field length	Data Type	Format	FSSA combined	DFR	Audit	Estate Recovery	DMHA	DDRS-BQIS	AGING-Insite	AGING-CaMSS	OMPP - Infant Mortality	OMPP - Mortality
Age	NUMBER(3)	string		x			x			x		x	x
Age Units	VARCHAR(10)	string		x						x			
Autopsy Available	CHAR(15)	string		x				x		x	x		
Autopsy Performed	CHAR(15)	string		x				x	x	x	x		
Birth State	VARCHAR(50)	string		x									x
Birth Year	char(4)	string		x						x			
Cause of Death A	VARCHAR(200)	string		x				x	x	x	x		x
Cause of Death B	VARCHAR(200)	string		x				x	x	x	x		x
Cause of Death C	VARCHAR(200)	string		x				x	x	x	x		x
Cause of Death D	VARCHAR(200)	string		x				x	x	x	x		x
Date Certified	DATE(8)	string	CCYYMMDD	x				x	x	x	x		x
Date DOH Batch Print	DATE(8)	string	CCYYMMDD	x	x			x		x	x	x	x
Date of Birth	DATE(8)	string	CCYYMMDD	x	x	x	x	x	x	x	x	x	x
Date of Death	DATE(8)	string	CCYYMMDD	x	x	x	x	x	x	x	x	x	x
Date of Death Type				x								x	
Date of Injury				x								x	
Death a Result of Injury				x								x	
Death Certificate Number				x		x	x					x	x
Death ID	VARCHAR(9)	string		x									
Decedent's Education	VARCHAR(30)	string		x						x			x
Decedent's Ethnicity	VARCHAR(40)	string		x						x	x		x

ISDH Death Description	ISDH Field length	Data Type	Format	FSSA combined	DFR	Audit	Estate Recovery	DMHA	DDRS - BQIS	AGING - Insite	AGING - CaMSS	OMPP - Infant Mortality
Decedent's First Name	VARCHAR(50)	string		x	x	x	x	x	x	x	x	x
Decedent's Last Name	VARCHAR(50)	string		x	x	x	x	x	x	x	x	
Decedent's Maiden Name	VARCHAR(50)	string		x				x		x	x	
Decedent's Marital Status	CHAR(20)	string		x			x			x		
Decedent's Medical Record Number				x								x
Decedent's Middle Name	VARCHAR(50)	string		x	x	x	x		x	x	x	x
Decedent's Residence Address	VARCHAR(120)	string		x		x	x					x
Decedent's Residence Apartment Number	VARCHAR(10)	string		x		x	x					
Decedent's Residence County	VARCHAR(50)	string		x								
Decedent's Residence County - FIPS Code	char(3)	string		x			x					
Decedent's Residence State	VARCHAR(50)	string		x		x	x					x
Decedent's Residence Street Address				x								x
Decedent's Residence Street Type				x								x
Decedent's Residence Town	VARCHAR(50)	string		x		x	x					x
Decedent's Residence Zip	VARCHAR(10)	string		x		x	x					x
Decedent's Suffix	VARCHAR(10)	string		x	x			x		x	x	

ISDH Death Description	ISDH Field length	Data Type	Format	FSSA combined	DFR	Audit	Estate Recovery	DMHA	DDRS - BQIS	AGING - Insite	AGING - CaMSS	OMPP - Infant Mortality	OMPP - Mortality
Ethnicity - Cuban				x								x	
Ethnicity - Mexican				x								x	
Ethnicity - Not Spanish				x								x	
Ethnicity - Origin Unknown				x								x	
Ethnicity - Other Hispanic				x								x	
Ethnicity - Puerto Rican				x								x	
Ethnicity - Specify Other				x								x	
Ethnicity_ID	VARCHAR(25)	string		x							x		x
Father's First Name				x	x								
Father's Last Name				x	x								
Father's Middle Name				x	x								
Father's Suffix				x	x								
Funeral Home	CHAR(200)	string		x			x						
Funeral Home Address	char(200)	string	CCYYMMDD	x			x						
Funeral Home City	char(50)	string	CCYYMMDD	x			x						
Funeral Home State - Code	char(10)	string		x			x						
Funeral Home Zip Code	char(10)	string		x			x						
Gender	VARCHAR(1)	string		x	x	x	x	x		x	x	x	x
Infant Death				x								x	x
Informant's Name	char(132)	string		x			x						

ISDH Death Description	ISDH Field length	Data Type	Format	FSSA combined	DFR	Audit	Estate Recovery	DMHA	DDRS - BQIS	AGING - Insite	AGING - CaMSS	OMPP - Infant Mortality	OMPP - Mortality
Interval for COD A	VARCHAR(100)	string		x				x	x	x	x		x
Interval for COD B	VARCHAR(100)	string		x				x	x	x	x		x
Interval for COD C	VARCHAR(100)	string		x				x	x	x	x		x
Interval for COD D	VARCHAR(100)	string		x				x	x	x	x		x
Local Health Department	VARCHAR(100)	string		x						x		x	x
Manner of Death	VARCHAR(50)	string		x				x	x	x	x		x
Medical Examiner Contacted	VARCHAR(20)	string		x				x	x	x	x		x
Mother's First Name				x	x							x	
Mother's Last Name				x	x							x	
Mother's Maiden Name				x								x	
Mother's Middle Name				x	x							x	
Mother's Suffix				x	x							x	
Other Significant Contributing Conditions	CHAR(300)	string		x				x		x	x		x
Place of Death County	VARCHAR(50)	string		x				x	x	x	x		x
Place of Death Facility	VARCHAR(200)	string		x				x	x				x
Place of Death Street Address	VARCHAR(200)	string		x				x		x	x		
Place of Death Street Type	VARCHAR(10)	string		x				x	x	x			
Place of Death Town	VARCHAR(50)	string		x				x	x	x	x		
Place of Death Type	CHAR(15)	string		x				x	x	x	x		
Place of Death Type	VARCHAR(50)	string		x				x	x	x			
Place of Death Zip				x				x					

ISDH Death Description	ISDH Field length	Data Type	Format	FSSA combined	DFR	Audit	Estate Recovery	DMHA	DDRS - BQIS	AGING - Insite	AGING - CaMSS	OMPP - Infant Mortality	OMPP - Mortality
Pregnant at Time of Death	VARCHAR(100)	string		x				x		x			x
Race - American Indian				x								x	x
Race - Asian Indian				x								x	x
Race - Black / African American				x								x	x
Race - Chinese				x								x	x
Race - Filipino				x								x	x
Race - Guamanian / Chamorro				x								x	x
Race - Japanese				x								x	x
Race - Korean				x								x	x
Race - Native Hawaiian				x								x	x
Race - Other				x								x	x
Race - Other				x								x	x
Race - Other American Indian				x								x	x
Race - Other Asian				x								x	x
Race - Other Asian				x								x	x
Race - Other Pacific Islander				x								x	x
Race - Other Pacific Islander				x								x	x
Race - Samoan				x								x	x
Race - Unknown				x								x	x
Race - Vietnamese				x								x	x
Race - White				x								x	x

ISDH Death Description	ISDH Field length	Data Type	Format	FSSA combined	DFR	Audit	Estate Recovery	DMHA	DDRS - BQIS	AGING - Insite	AGING - CaMSS	OMPP - Infant Mortality	OMPP - Mortality
Selected Cause of Death if Infant				x								x	x
Social Security Number	VARCHAR(9)	string		x	x	x	x	x	x	x	x	x	x
Spouse's First Name	char(50)	string		x			x						
Spouse's Last Name	char(50)	string		x			x						
Spouse's Middle Name	char(50)	string		x			x						
SSN Verification				x								x	x
State File Number	VARCHAR(10)	string		x	x			x					x
Time of Death	VARCHAR(4)	string	HHMISS	x				x		x	x		
Tobacco Contribution to Death	CHAR(15)	string		x				x		x			x
Transportation Injury				x									x
Transportation Injury - if Other				x									x
Year of Death	CHAR(4)	string		x				x			x		