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Re: Request for Information - Administration for Children and Families Development of Interoperability Standards for Human Service Programs

The American Public Human Services Association (APHSA) respectfully submits the following comments in response to the Administration for Children and Families (ACF) Request for Information (RFI), *Development of Interoperability Standards for Human Service Programs* published on October 28, 2024.

APHSA is a bipartisan national membership association representing state and local human services agencies and the subject matter experts that help execute their mission to improve outcomes for people nationwide. APHSA routinely convenes and hosts several nationwide “affinity groups” and other shared spaces for program administrators in key human services areas - child welfare (the National Association of Public Child Welfare Agencies, or “NAPCWA”), child care (the National Association of State Child Care Administrators or “NASCCA”), TANF (the National Association of State TANF Administrators or “NASTA”), and Information Technology (IT Solutions Management for Human Services or “ISM”).

APHSA additionally provides Secretariat services to support the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC), which administers the Interstate Compact on the Placement of Children (ICPC). The AAICPC is a governmental entity which consists of compact parties from the 50 states, the District of Columbia, and the U.S. Virgin Islands. Additionally, APHSA, as the AAICPC Secretariat, developed and administers the National Electronic Interstate Compact Enterprise (NEICE) which is a secure technology platform currently connecting 46 of the participating compact members as they exchange and assess possible foster care and adoptive placements of children across state and territorial jurisdictions. By using data standards, NEICE connects different state child welfare information systems with one another and the NEICE Modular Case Management System (MCMS) to ensure a seamless and nearly real time exchange of case information across state boundaries. NEICE is currently funded by annual state licensing fees and federal resources provided by the Children’s Bureau under grant number 90XA0151.* States develop and maintain their connections to the NEICE exchange. The original pilot grant for NEICE required APHSA and AAICPC to build a national data exchange that was interoperable and could be leveraged for additional types of data exchanges such as information from Child Abuse and Neglect Registries or Medicaid.

This response reflects the generalized feedback received across APHSA’s cross-program affinity groups in consultation with additional leaders in APHSA’s membership community. We specifically address requested areas for input: 1. Practical enablers of/or barriers to interoperability; 2. Impact of lack of human services interoperable data standardization; 3. Care coordination; 5. Standards in practice; and 7. Funding.

APHSA Response

This letter recommends several key approaches for advancing interoperability in human services programs. Increased collaboration is needed across federal agencies to develop cohesive data-sharing frameworks and states, counties, tribes and territories need access to training and technical assistance to navigate complex

regulatory landscapes. Expanding funding for pilot projects and IT modernization is critical to address technological disparities and enhance the adoption of innovative standards like HL7 FHIR and NIEM. These efforts aim to streamline data sharing, improve efficiency, and support better outcomes for children and families.

1. Practical enablers of/or barriers to interoperability

Through focused special initiatives, including ACCESS – the Aligned, Customer-Centered Ecosystem of Supports and Services initiative and the NEICE – APHSA has surfaced core barriers and practical enablers to interoperability. In collaboration with agencies and peer associations across the health and human services ecosystem, APHSA has spent the last two years identifying enablers and blockers to cross-state alignment through the ACCESS initiative. ACCESS, led by APHSA and the National Association of State Workforce Agencies (NASWA), is focused on aligning modernization efforts across the health, human services, and labor ecosystem to promote customer-centered improvements in program design and delivery. These insights draw from the [ACCESS Early Insights Report](#), the NEICE initiative, and feedback from APHSA’s nationwide member network.

Enablers	Barriers
<p>Collaborative Governance and Cross-Sector Partnerships: Collaborative governance models, such as those implemented in NEICE – covered in detail later in this response – demonstrate how standard frameworks enable data sharing. Such models provide essential alignment and mutual accountability in data exchange efforts. ACCESS findings highlight that cross-sector partnerships bring together resources and expertise from diverse programs like TANF (Temporary Assistance for Needy Families), child welfare, and labor services to foster innovative solutions.</p> <p>Customer-Centered Design and Co-Creation: Customer journey mapping is a proven approach to ensuring system designs meet real-world needs. This underscores the importance of co-designing solutions with input from program participants to ensure systems are accessible and user-friendly.</p> <p>Investments in Capacity-Building and Tools: ACCESS findings highlight the importance of technical assistance, training, and modern tools to empower states in building and sustaining interoperable systems. Agile project management and data visualization platforms have been identified as particularly effective.</p> <p>Use of Data Standards across programs and states: The NEICE system, as detailed below, uses National Information Exchange Model standards to exchange data across state jurisdictions.</p>	<p>Fragmented Funding Mechanisms: States encounter significant challenges in prioritizing interoperability and IT Modernization due to fragmented or inconsistent funding streams. Competing priorities can delay efforts to adopt interoperable systems.</p> <p>Technological Disparities and Legacy Systems: Technological disparities between states exacerbate interoperability challenges causing and entrenching operational siloes within and across systems. ACCESS highlights that reliance on outdated systems often increases costs and delays modernization, as some systems are incompatible with standards. The NEICE project also found states had unequal technology resources and knowledge of data standard implementation which made it challenging for some states to connect to NEICE as originally envisioned.</p> <p>Complex Regulatory Frameworks: Federal regulations governing inter-connected programs create confusion and delays in data sharing. ACCESS collaborators reported significant time and resources spent navigating legal constraints that thwart interoperability progress. Concerns around data ownership, consent, and accountability for breaches complicate the adoption of shared systems.</p>



States are eager for unified federal guidance, established consistent funding streams to support IT modernization and interoperability, and targeted capacity-building assistance, including training on implementing data standards, using agile methodologies, and technical implementation support.

2. Impact of lack of human services interoperable data standardization: Provide examples of existing and planned human services interoperable data efforts and to what degree, if any, does a lack of standardization negatively impact them.

Consistent Data Standards and Exchange Protocols Could Reduce Inefficiencies and Improve Outcomes for Children and Families

Our members have highlighted inefficiencies and poor outcomes stemming from the lack of standardized data exchange protocols in human services programs:

- Coordination of services for individuals engaged with multiple programs, such as SNAP, Medicaid and TANF, is often hindered by disconnected systems, leading to fragmented support for families. The absence of reliable and timely case information frequently results in delayed or incorrect benefits, as outdated or inaccurate data—like incorrect addresses or slow information releases—undermine service delivery.
- The manual and duplicative entry of client information across disparate systems and spreadsheets creates disjointed records that are challenging to update when new information becomes available. This redundancy consumes valuable staff time, diverting resources away from case management, direct service delivery, and program improvements.
- Many agencies continue to use outdated and insecure communication methods, such as fax, phone, and email, further complicating efficient data sharing.
- When seeking to determine the safety of a potential placement of a child across state lines for foster care or adoption through the ICPC, states often experience weeks or even months of delays in receiving background checks or accessing Child Abuse and Neglect Registry scans from other states. This significantly lengthens the time it takes to place children with safe, permanent families

These systemic inefficiencies underscore the urgent need for standardized and interoperable data exchange systems across human services programs.

3. Care coordination: ACF seeks comments on current care coordination activities and data standards to support the interoperable data exchange for service delivery, operations, and reporting.

Federal Guidance on Data Sharing: Expectations, Security, and Privacy Protections for Clients

Members reported significant difficulty reaching data sharing agreements or progressing toward interoperable systems because of the myriad privacy regulations that hinder exchanging information. For example, because disclosing SNAP data must meet the requirements in Section 11(e)(8) of the Food and Nutrition Act of 2008 and Federal regulations at 7 CFR 272.1(c), sharing SNAP data with other human services programs that serve the same customer is limited. Additionally, one state reported a two year long legal exploration on what data can and cannot be shared according to FERPA or HIPAA, resulting in delays for sharing data across programs.



Some members expressed concerns about data ownership and informed consent related to how data flows to other partners involved in data exchanges, and who is responsible for ensuring the security of the information as well as the privacy of the individuals' information.

Some members also highlighted the importance of ensuring that data collection balances programmatic needs with privacy protections. Members recognize the value of functional programmatic information, such as eligibility dates, participation rates, program outcomes, and aggregate demographic data. However, they also noted that collecting highly specific personally identifiable information could introduce challenges if shared across multiple systems or in the event of policy changes. To address these concerns, members have suggested that data collection tools focus on essential program data while limiting the collection of unnecessary personally identifiable information.

Innovative Practices and Systems: Methods to Advance Interoperability in Human Services

Members reported several innovative practices and systems currently sharing data across human services programs within and across states.

- **Data Sharing Agreements Across States:** The National Electronic Interstate Compact Enterprise (NEICE) which supports the exchange of child and placement data across states lines for the ICPC has created a standard data sharing Memorandum of Understanding that 50 states, the District of Columbia, and the US Virgin Islands have all signed. See below for full explanation of the NEICE MOU data sharing model.
- **Shared Information with Other Programs:** One state using NEICE has reported providing authorized state users in other programs (such as Medicaid) access to NEICE to facilitate and reduce delays in eligibility determination for children. Through its multi-year cohort program “Coordinating SNAP and Nutrition Supports” (CSNS), APHSA has supported multiple states in [developing and adopting data sharing models among human services programs](#). The data sharing models have streamlined enrollment, set up automatic referrals, and supported performance analysis in cohort states. Additional resources on data innovation in human services programs can be found on the [Digital Government Hub website](#), a living library housing a range of resources like data sharing case studies and template data sharing agreements.
- **Coordination Across Programs within States:** Some members reported that coordination across programs is currently happening through a mix of direct messaging, meetings (e.g. Multi-Disciplinary Teams, Child and Family Teams), and evolving client portals. One state provides judicial leaders with training and access to NEICE for them to monitor cases on their docket in real time. Similarly, federal programs that require collaboration across agencies, like the new Summer EBT program, can lead to modernized data collection and data sharing practices that also streamline administration of related programs and services.

One state is planning to leverage new systems designed for Summer EBT to create a bi-directional communication pathway between the state’s Department of Human Services and local schools to improve student data accuracy and streamline information sharing to support eligibility determinations for SNAP and the National School Lunch Program. Members also report that dedicated funding for special initiatives like the CSNS program can help states establish new relationships across agencies and other partners, setting the foundation for future collaboration. Additionally, coordination efforts are strengthened when there is a role dedicated to facilitating cross-agency collaboration. Through their



CSNS projects, both [Michigan](#) and [Hawai'i](#) hired Cross-Enrollment Coordinators who played pivotal roles in advancing coordination across Human Services agencies and Departments of Health.

NEICE Memorandum of Understanding (MOU): A Data Sharing Agreement that Securely Connects the United States for the Placement of Children Across State Borders

Because many of the records used in interstate child placements involve medical information, the APHSA felt it appropriate to base the NEICE MOU on the Data Use and Reciprocal Support Agreement (DURSA) model that is widely used in health information exchanges. All NEICE participating states are required to abide by the basic information sharing governance terms of a standard NEICE MOU.

As new states were added to the NEICE system, each one reviewed the standard MOU language. The Information Technology, security and privacy counsel leads for each state reviewed the documents, asking for modifications as needed to make the agreement and appendices consistent and congruent with individual state statutory requirements. And, as NEICE technology and information security requirements have evolved, the MOU has been adapted to these changes by means of appendices.

A fundamental requirement of the NEICE MOU is governance of data breaches. In this respect, the breach response protocol closely tracks HIPAA and the National Institute of Standards and Technology requirements for government systems (as outlined in NIST SP 800-53). Accordingly, the MOU requires all participating states to attend regular breach preparedness sessions. Since the NEICE's inception, there have been no major data breaches.

5. Standards in practice: In cases where human services data systems currently use interoperable data standards, describe how they do or do not incorporate the following: (1) Interoperable standards developed and maintained by intergovernmental partnerships such as the National Information Exchange Model (NIEM). (2) Interoperable standards developed and maintained by specific federal agencies with authority over contracting and financial assistance.

The NEICE project developed human services data standards that cover the fields exchanged for interstate placements of children using NIEM standards. They published an Information Exchange Package Document (IEPD) which is publicly available ready for others to utilize and build additional human service fields into the IEPD. Forty-six states, the District of Columbia, and the US Virgin Islands are using the NEICE system to exchange data and documents securely across their jurisdictions.

7. Funding: Describe current funding mechanisms that support or hinder interoperable data systems' design, development, and implementation.

Members reported funding for interoperability initiatives remains fragmented and/or inconsistent and that states' ability to update exchanges may face challenges from competing IT resource priorities. Lack of sufficient funding impacts the ability of state and local human services to modernize legacy systems, build, update, and maintain necessary interfaces, and implement shared systems across agencies.

Additionally, states need resources and guidance about prioritizing updates to information exchange connections for interoperability efforts to be successful. In some instances, the NEICE project has experienced that states



may not have the resources or prioritization to make needed updates to the NEICE connection. This causes the system to be out of step at a national level with states experiencing these delays.

Conclusion and Recommendations

Members identified next steps that ACF could take to support state and local human services agencies with developing and implementing interoperable data standards.

- ACF should collaborate closely with other federal agencies, such as the Food and Nutrition Service (FNS), the Centers for Medicare and Medicaid Services (CMS), and the Department of Labor (DOL) to develop a more cohesive data-sharing framework, and consider building out a more robust set of human services standards in the NIEM IEPD already developed for child welfare-related data in NEICE.
- In informal polling, members expressed a low awareness level of the interoperable data standards referenced in the RFI, HL7 FHIR. Members reported a significant interest in more opportunities to learn about and understand any recommended interoperable data standards before ACF adopts any final recommendations or requirements.
- Training and technical assistance (T/TA) offerings should help guide state and local agencies through the complex legal and regulatory landscape of data sharing. Some members reported an interest in T/TA availability for staff on methodologies such as agile project management, which would bolster and expedite efforts to implement interoperable systems.
- ACF should consider supporting grants to states, counties, tribes, and/or non-profits to pilot and extend innovative, interoperability projects and initiatives within and across states. (e.g., extending the opportunities for leveraging NEICE or exploring the use of AI to improve data matching and bridging existing health and human service data models (FHIR and NIEM)).

APHSA welcomes the opportunity to elaborate upon the learnings provided in this comment letter to support state and local human services agencies' mission in promoting the economic and social well-being of children, families, individuals, and communities. For any questions or follow-up, please contact Jessica Maneely or Marci McCoy-Roth below.

Respectfully,

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* Disclaimer: NEICE is operated by the American Public Health Services Association (APHSA) with the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC) and is made possible by grant number 90XA0151 from the Children's Bureau. The contents of this letter do not necessarily reflect the views or policies of the funder, nor does mention of trade names, commercial products or organizations imply endorsement by the U.S. Department of Health and Human Services. This information is in the public domain.