Congratulations Jay Majmudar!

Please join CNSI in congratulating Jay Majmudar on his promotion to Vice President, Technology Services! Jay re-joined CNSI in January 2004 as a Director in our ESD division. He has shown excellent leadership capabilities since joining CNSI and is a key member of the CNSI think tank.

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CNSI and Lockheed Martin Team to Develop 2010 Census Information Processing System

ROCKVILLE, MD – CNSI, a fast growing, innovative provider of IT business solutions for government and commercial enterprises, announced the U.S. Bureau of Census awarded a contract to a team led by Lockheed Martin to develop and operate an information processing system for the nation’s 2010 Census. Under this contract, CNSI repeats the role it conducted during the 2000 Decennial Census.Under the six-year contract valued at approximately $500 million, the team will develop and deploy the Decennial Response Integration System (DRIS) for the U.S. Bureau of Census.

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enterprises, announced the U.S. Bureau of Census awarded a contract to a team led by Lockheed Martin to develop and operate an information processing system for the nation's 2010 Census. Under this contract, CNSI repeats the role it conducted during the 2000 Decennial Census.Under the six-year contract valued at approximately $500 million, the team will develop and deploy the Decennial Response Integration System (DRIS) for the U.S. Bureau of Census. The team includes Cardinal Technologies Inc., Bethesda, Md.; Computer Sciences Corporation, El Segundo, Calif.; Evolver Inc., Reston, Va.; IBM, Bethesda, Md.; M?tier Ltd., Washington, DC; Nortel PEC Solutions, Fairfax, Va.; and Pearson Government Solutions, Arlington, Va. CNSI is a second tier subcontractor to Evolver, Inc. CNSI will assist in installing systems at the three main 2010 Census processing centers, supporting the systems during the Decennial Census providing network support, helpdesk support and break/fix support, and uninstalling the systems and shipping them to specified locations. "Data gathered in the Decennial Census plays an important role helping the government determine political representation, helping businesses make strategic decisions, and helping citizens learn more about themselves and their families, " Said CNSI President and CEO B. Chatterjee. "CNSI is proud to reprise the role it played in the 2000 Census—the most accurate and sophisticated census in our nation's history."

About CNSI

Founded in April 1994, CNSI is a premier provider of IT business solutions for government and commercial enterprises. Based in Rockville, Md., CNSI delivers technology and resource expertise that improve the efficiency and productivity of IT systems.Focused on supporting clients that ensure the safety, health, and efficiency of the nation, CNSI serves customers such as the Department of Homeland Security, Federal Aviation Administration, Department of Energy, and several state Medicaid agencies. Over the last 10 years, CNSI has earned top

industry honors and regular inclusion in the Inc. 500, VAR Business 500, and the Techway Fast 50 lists for consistently high revenue growth. Additional information about CNSI can be obtained by visiting, http://www.cns-inc.com, emailing vmehta@cns-inc.com or calling (301) 634-4600.

For the Fifth Year in a Row, CNSI is Listed on the VARBusiness Magazine Top 500 List”

Each year, VARBusiness magazine publishes its VARBusiness 500 list that ranks the information technology industry’s top integrators and solution providers. The rankings are based on the previous year’s revenues. For the fifth year in a row, CNSI has made the VARBusiness 500 list, earning a ranking of 220, an improvement over last year’s ranking of 263. Additionally, GovernmentVAR, a VARBusiness magazine supplement that focuses on government IT contractors, ranked CNSI 66th on its GovernmentVAR 100 list.

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CNSI Launches New Website

Today, CNSI is launching our revamped corporate internet and intranet websites. As part of an ongoing project to brand the company, and as CNSI competes for larger complex contracts, our new website effectively delivers the message that we are an innovative IT company dedicated to our customers’ success.

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Be on the lookout for more to come! Please direct all inquiries and questions to Robin Tenney at webmaster@cns-inc.com.

Medicaid HIT Reform and the

EMR Diversion

Widespread adoption of electronic medical record systems in the future is a noble and necessary objective, however it distracts policy makers from enabling true Health Information Technology reform now. While the U.S. Department of Health and Human Services, Office of the National Coordinator for Health Information Technology and others continue to make strides to support EMRs and a national health information network, many in the health sphere confuse the advancement of EMRs with overall HIT reform.

Widespread adoption of electronic medical record systems in the future is a noble and necessary objective, however it distracts policy makers from enabling true Health Information Technology reform now. While the U.S. Department of Health and Human Services, Office of the National Coordinator for Health Information Technology and others continue to make strides to support EMRs and a national health information network, many in the health sphere confuse the advancement of EMRs with overall HIT reform. As industry pundits debate the potential clinical benefits and cost reductions that EMR systems could deliver, there is too little discussion about how HIT can improve the single largest payer of health care claims—Medicaid. Medicaid continues to consume a growing percentage of states' overall budgets and costs are still rising. Why? Because the current Medicaid system is extremely large and the demand for Medicaid services continues to increase, yet this complex system is riddled with inefficiencies and fails to provide consistently high quality healthcare. These inefficiencies are due to lack of coordination, medical errors, poor communication, incomplete records, rising insurance costs and a myriad of other factors. EMR systems alone will not solve these problems.

The Federal government encourages Medicaid reform, but most states will rely on cost savings mandates like increasing co-

pays, making it more difficult to qualify for nursing home care, and discounting drug reimbursements. What States really need is a strategy to break down the silos of the fractured healthcare system. Electronic medical records and cost cutting measures will help, but they are not the only vehicle for Medicaid policy reform. Real Medicaid policy reform will come by leveraging technology to unite Medicaid's redundant and disconnected factions.Medicaid and all its associated agencies and programs can be broken down into three categories:Policy—establishing the overall healthcare goals that determine who is being served, what services they are provided, who will provide them, and how they will be evaluated;Administration—managing the programs, infrastructure and overhead that bring the policy to life and maintain operations, and finally; Healthcare delivery—the care and services dispensed by doctors, disability services providers, hospitals, skilled nursing centers and others who interact with patients. Today, states have comprehensive administrative and claims data that are primarily used to pay claims when they could be used for much more. Medicaid systems are packed with valuable information and patterns about consumption, services, outcomes, treatment regimens, and prescription drugs. Why not empower providers with tools to access patient data and decision support for better preventive and chronic care management? Why not provide enhanced information to enrollees for consumer directed care programs? Each of these is a solid advancement in reform, however, if each of the three main Medicaid categories do not work together to create, manage and evaluate the programs, systematic improvement is impossible. Advancing IT reform alone is not enough—states must take the next step to use the new information effectively, and thus administer the Medicaid program as a system, rather than a disparate collection of programs tied together by a budget authority. For example, we know that less than 20 percent of the Medicaid population consumes more than 70 percent of Medicaid expenditures. This population is characterized by multiple chronic conditions and disabilities.

This is also a population that is typically receiving services across the health care spectrum but providers from the aging system, acute care system and mental health system do not have access to patient information outside of their silo. Coordinating care for the most expensive population will lead to higher quality, a reduction in duplicative services, better outcomes and overall lower costs. Even if administrators focus only on this relatively small population, they would address 70 percent of the costs in the Medicaid system. And, in this case, costs would be reduced not through charging more or denying access, but rather by coordinating care and improving outcomes.

Interoperable healthcare IT systems are critical to uniting the three core Medicaid constituencies—they link together policy, administration and healthcare delivery. Once created, this information can be used to increase efficiency and change behaviors that will lead to lower costs, better quality care and more healthy Americans. To achieve this goal, decades-old mainframe Medicaid IT systems must be replaced with systems built on today's standards. Creating EMRs is futile if the system in which they are managed is not improved. Today, Medicaid possesses the rudimentary technology systems and a robust set of data that is continuously updated, yet it is rarely used for anything other than paying claims. This lack of planning and insufficient information sharing means Medicaid systems do an insufficient job managing patient care while valuable information that can help states and providers improve patient outcomes sits stunningly underused in data warehouses.

With relatively minimal effort, administrative, claims, eligibility and other existing data sets can be used to make the patient the unit of analysis, rather than segmented programs. Electronic Medicaid health records can then be developed and, in nearly real-time, this data can both create a dashboard giving administrators a detailed look at the

overall system, while at the same time doctors and hospitals and other providers would have access to patient specific records about diagnosis, previous visits and drugs. What is Medicaid spending the most money on? Who is it spending the most money on? How much money is wasted on duplication? How much money is wasted on non-optimal care settings? What would the impact be if existing care was simply managed better? This data exists today, but not in a way that is shared among Medicaid departments or organized in a meaningful manner. Simply creating EMRs does not solve this problem.For example, with evidence-based data and predictive modeling, providers could devise a strategy to improve the health of 240 Medicaid patients on their caseload with chronic diabetes. They could make informed decisions about treatment plans; actively engaging the patients in their own care. States could even be so bold as to incent physicians for improving the health of these patients. By presenting this information to providers in an easy-to-use Web portal, physicians could more easily identify patients that cost a lot to manage, helping them get a better idea of who their patients are and how they can solve their medical problems. Everybody wins in this scenario: patients receive better care and Medicaid runs more efficiently and more effectively. EMRs play a role, but they are only part of the solution—it is the backend Medicaid Management Information Systems that are critical to developing a successful HIT strategy for Medicaid.EMRs alone will not solve the nation's Medicaid crisis. Medicaid must develop an integrated approach leveraging technology to maximize existing data to make informed decisions about policy, administration and patient care. The dialogue around EMRs is good, but it is the tip of the iceberg—the industry must open a dialogue to look at how MMIS has the potential to link policy, administration and healthcare delivery to reduce costs and improve care. Forward thinking states like Michigan, Maine and Washington have adopted this approach and are emerging as the standard bearers for the future of Medicaid.

Bruce Greenstein is vice president of healthcare with CNSI, a Rockville, Md.-based firm that provides IT business solutions for government and commercial enterprises. He is former head of the Centers for Medicare and Medicaid Services Office of Waivers and Demonstrations and was the associate regional administrator for Medicaid in the Boston Regional Office of CMS. Bruce may be reached at bgreenstein@cns-inc.com.

Census Picks Harris to Lead 2010 Support Effort

Census Bureau officials have awarded a five-year contract worth nearly $600 million to Harris to support the 2010 Decennial Census. The contract revolves around the use of mobile computers in the field to collect data.Under the deal, Melbourne, Fla.-based Harris will lead a team providing information technology infrastructure, hardware, software and services to support nearly 500 local bureau offices nationwide. The company’s efforts will support the 500, 000 or so handheld devices that are expected to be used as part of the Field Data Collection Automation program.

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program, the bureau wants to automate the collection of field data and its delivery to information systems in near real time. “We are revolutionizing the Census, ” the bureau’s director, Louis Kincannon, said in a prepared statement. Harris will serve as systems integrator and provide overall program management. On its team are:Accenture, which will provide mobile computing applications and enterprise support systems.

Dell, which will provide office computing equipment.High Tech Computer, which will also supply mobile computing equipment.Unisys, which will provide nationwide support and service for the field offices.Sprint, which will provide telecommunications services.

Oracle, which will provide database support.Client Network Services Inc., which will provide engineering and field technical support.Headstrong, which will support the enterprise architecture development for the decennial census.In 2002, the bureau awarded Harris an eight-year, $210 million contract to integrate the bureau’s Master Address File and Topologically Integrated Geographic Encoding and Referencing databases as part of the a project to improve the accuracy of the data

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Harris Corporation Selects CNSI as a Subcontractor in the 2010 Census Field Data

Collection Automation Program

ROCKVILLE, MD – CNSI, a fast growing, innovative provider of IT business solutions for government and commercial enterprises, today announced that it has been selected by Harris Corporation (NYSE: HRS), as a subcontractor, for the U.S. Census Bureau Field Data Collection Automation (FDCA) program. CNSI is to provide engineering services and technical support for local and regional offices as part of the five-year, $600 million FDCA program that was awarded to Harris in March.

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Previously field data was collected by hundreds of thousands of enumerators traveling door to door using paper address lists, maps and questionnaires. Once collected, papers were

transported to processing centers where it was manually keyed into the system—a time consuming process with high costs and potential for errors in data entry. The U.S. Census Bureau will improve the process in the upcoming 2010 Census using the latest mobile technology to digitally capture information collected during interviews and transmit it back to processing centers in near real time. GPS mapping technology will be used to provide electronic maps and lists making it easier for the more than 500, 000 enumerators conducting interviews to quickly and accurately reach their destinations.CNSI will support the FDCA program in Largo, MD. At this facility, CNSI will be responsible for supporting integration and test activities During the 2010 Census, CNSI will provide IT support personnel to maintain and troubleshoot hardware and software.

About CNSI

Founded in April 1994, CNSI is a premier provider of IT business solutions for government and commercial enterprises. Based in Rockville, Md., CNSI delivers technology and resource expertise that improve the efficiency and productivity of IT systems.Focused on supporting clients that ensure the safety, health, and efficiency of the nation, CNSI serves customers such as the Department of Homeland Security, Federal Aviation Administration, Department of Energy, and several state Medicaid agencies. Over the last 10 years, CNSI has earned top industry honors and regular inclusion in the Inc. 500, VAR Business 500, and the Techway Fast 50 lists for consistently high revenue growth. Additional information about CNSI can be obtained by visiting http://www.cns-inc.com, emailing vmehta@cns-inc.com or calling (301) 634-4600.

CNSI Names Veteran IT Executive Rodger Blevins Senior Vice President of Federal Programs

ROCKVILLE, MD – CNSI, a fast growing, innovative provider of IT business solutions for government and commercial enterprises, today named Rodger Blevins senior vice president for federal programs. Blevins will play a critical role in providing strategic direction and overall program management to ensure technical quality assurance and customer satisfaction for CNSI information technology service delivery.

ROCKVILLE, MD – CNSI, a fast growing, innovative provider of IT business solutions for government and commercial enterprises, today named Rodger Blevins senior vice president for federal programs. Blevins will play a critical role in providing strategic direction and overall program management to ensure technical quality assurance and customer satisfaction for CNSI information technology service delivery. His primary focus will be on supporting operational and business expansion goals in the federal sector to include work with such agencies as the Department of Defense, the Intelligence Community, the Department of Agriculture, the State Department, the Department of Justice, the Department of the Interior, the Department of the Treasury, the Federal Deposit Insurance Corporation, the U.S. Securities and Exchange Commission and the National Aeronautics and Space Administration.”My ultimate goal is to have CNSI recognized as a leader in providing innovative technology solutions within the federal sector, ” said Blevins. “Building successful partnerships between public and private organizations is a critical component to helping our government work more efficiently. In addition to supporting existing programs, I

look forward to expanding CNSI's federal practice into areas such as information assurance and federal financial management systems."

"CNSI prides itself on providing customers with customized technology solutions that solve their problems and increase efficiency, " said CNSI President B. Chatterjee. "But no technology project can succeed without talented, experienced staff to design and manage the work. Rodger brings a quarter century of IT management experience to CNSI and we look forward to the expertise he will provide our new and existing federal customers."Prior to joining CNSI, Blevins served as senior vice president and chief technology officer for Catapult Technology, Inc. In this role, he was the force behind Catapult increasing its federal IT annual revenues by 400% over his four year tenure.

During his career, Blevins has held a number of senior management positions both within the federal government and private industry. He graduated from the government's Federal Executive Institute in the spring of 1995 and has a proven track record leading large IT operational organizations and spearheading federal-wide initiatives. In 2001, Blevins led his company in proposing, designing, and implementing one of the first e-Government initiatives that provided electronic workflow processing, automated forms integrated with electronic/digital signature, and PKI authentication technology for the National Institute of Standards and Technology (NIST). In addition, he served on the President's Council for Integrity and Efficiency, participating in a number of government-wide IT security audits. During his federal career, Blevins' efforts and initiatives for enhancing and securing IT within the federal government have been well-recognized. The Secretary of the Treasury and the Director of the Secret Service presented him with awards for his efforts on U.S. Customs systems and law enforcement task forces at the Bureau of Alcohol, Tobacco, and Firearms as well as the Secret

Service.Blevins holds a bachelor’s degree in Computer Science, with a minor in Business Management, from the University of Maryland.

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Should you sign-up for CNSI’s 401k Plan?

Jyoti Gujral, CNSI’s Financial and Benefits Specialist will be discussing the benefits of enrolling and answer any specific questions regarding both the traditional and the Roth 401k plans. Enrollment forms will be available at the meeting so you can sign-up immediately.WHEN: Thursday, March 23rdTIME: 2pmWHERE: Gaither Drive Conference Room (new, large room)

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Efficiency is Medicaid's Next Evolutionary Frontier

In 2003, Medicaid eclipsed Medicare as the largest payer of healthcare claims in the United States and continues to grow rapidly. By 2005, the 40th anniversary of Medicaid, policy makers and politicians alike began to tell us the program was unsustainable.Last year, Medicaid consumed 25 percent of states' budgets and yet costs are still expected to rise 12 percent by year's end. Why?

In 2003, Medicaid eclipsed Medicare as the largest payer of healthcare claims in the United States and continues to grow rapidly. By 2005, the 40th anniversary of Medicaid, policy makers and politicians alike began to tell us the program was unsustainable.

Last year, Medicaid consumed 25 percent of states' budgets and yet costs are still expected to rise 12 percent by year's end. Why? Because demand for healthcare services continues to increase while the current Medicaid system is riddled with inefficiencies as it serves more than 53 million Americans and spends over $330 billion a year.However, huge portions of the population visit doctors' offices, hospitals and emergency rooms and are treated as if they have no medical history – in many cases because they do not. There is no record of medications they take, visits to the hospital or previous

tests administered that could be applied to provide better, more efficient care.

Each of the millions of Medicaid enrollees consumes services from several different divisions within state Medicaid agencies – medical care, mental health long term care and others. However, Medicaid is not administered in a way that makes it easy for these different divisions to communicate with each other – every time a patient is seen by a different provider offering services for a different division, they create new patient information and keep it separate from the other divisions. This is not only extremely inefficient – exacerbating the fact that less than 25 percent of the Medicaid population is spending more than 70 percent of the program's budget – but it also fails to leverage existing health data to improve processes, increase efficiencies and ultimately provide better care.

Since the 1965 inception of the Medicaid program, the most common mechanisms for reducing costs have been: 1) cutting eligibility, 2) cutting reimbursement and/or 3) cutting benefits. However, none of these options has ever been an effective long-term approach because cost cutting deprives people of care they need, which is not a very good move for an organization whose mission is to focus on the wellbeing of citizens, not just the bottom line.

A fourth and too often overlooked option to empower Medicaid reform is leveraging technology to increase efficiency. Information technology can have a significant impact on Medicaid reform, but it must become a useful tool for the provider community in a way that does not take more effort than it is going to be worth.

Medicaid Revolution through IT EvolutionCurrently, only a few states are thinking about ways to improve the utility of their Medicaid IT systems. Why? In order to convince Medicaid CIOs to implement a more integrated system that treats patients

holistically, there must be a change in mindset. This represents a new risk: paying claims is a necessity, but keeping electronic patient records is optional.With relatively minimal effort, administrative, claims, eligibility and other existing data sets can be used to make the patient the unit of analysis, rather than segmented programs. Electronic Medicaid health records can then be developed and, in nearly real-time, this data can create a dashboard giving administrators a detailed look at the system, patient by patient. What is Medicaid spending the most money on? Who is it spending the most money on? How much money is wasted on duplication? How much money is wasted on less than optimal care settings? What would the impact be if existing care was simply managed better?

This data exists, just not in a way that is shared among Medicaid departments or organized in a meaningful manner. Since we know that 25 percent of Medicaid enrollees spend more that 70 percent of total costs, we could start with that population – focusing on the patients who need the most care.

By incorporating predictive modeling technology and clinical decision support derived from evidence-based medicine, states can turn existing claims payment data into valuable information that tells a story about a patient past in order to improve their future. But it is not good enough to keep this information within Medicaid walls. Patients, providers and medical institutions need access to this information so they can become part of the solution.Interim stepsBy presenting this information to providers in an easy-to-use Web portal, physicians, hospitals, labs and other providers could more easily identify patients who cost a lot to manage as well as garner a better idea of their patients' needs and how they can solve their healthcare problems. Everybody wins in this scenario: patients receive better care and Medicaid runs more efficiently and more effectively.

Transforming Medicaid management information systems into more

than sophisticated claims payment systems is a long term goal that has the potential to revolutionize Medicaid and enable reform. And, because this is a complex move, intermediary steps can be taken; we may be years away from ubiquitous electronic Medicaid records, but the information needed to make these basic IT changes exists today. Ultimately it comes down to aligning objectives and better communication within health and human services agencies. Technology is the platform for this change and until it comes, Medicaid patients, providers and taxpayers will continue to suffer.

CNSI Vice President of Healthcare, Bruce Greenstein helps states achieve increased efficiency through creating leading-edge IT infrastructure. Before joining CNSI, Greenstein was the Associate Regional Administrator for Medicaid and Children’s Health in the Boston Regional Office of Centers for Medicare and Medicaid Services (CMS).