

GAO Highlights

Highlights of [GAO-15-238](#), a report to congressional requesters

Why GAO Did This Study

The Patient Protection and Affordable Care Act required the establishment of health insurance marketplaces to assist individuals in obtaining health insurance coverage. CMS, a component of HHS, was responsible for establishing a federally facilitated marketplace for states that elected not to establish their own. This marketplace is supported by an array of IT systems, which are to facilitate enrollment in qualifying health plans. These include Healthcare.gov, the website that serves as the consumer portal to the marketplace, as well as systems for establishing user accounts, verifying eligibility, and facilitating enrollment.

GAO was asked to review CMS's management of the development of IT systems supporting the federal marketplace. Its objectives were to (1) describe problems encountered in developing and deploying systems supporting Healthcare.gov and determine the status of efforts to address deficiencies and (2) determine the extent to which CMS applied disciplined practices for managing and overseeing the development effort, and the extent to which HHS and OMB provided oversight. To do this, GAO reviewed program documentation and interviewed relevant CMS and other officials.

What GAO Recommends

GAO is recommending that CMS take seven actions to implement improvements in its requirements management, system testing, and project oversight, and that HHS improve its oversight of the Healthcare.gov effort. HHS concurred with all of the recommendations.

View [GAO-15-238](#). For more information, contact Valerie C. Melvin at (202) 512-6304 or melvinv@gao.gov.

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HEALTHCARE.GOV

CMS Has Taken Steps to Address Problems, but Needs to Further Implement Systems Development Best Practices

What GAO Found

Several problems with the initial development and deployment of Healthcare.gov and its supporting systems led to consumers encountering widespread performance issues when trying to create accounts and enroll in health plans:

- **Inadequate capacity planning:** The Centers for Medicare & Medicaid Services (CMS) did not plan for adequate capacity to support Healthcare.gov and its supporting systems.
- **Software coding errors:** CMS and its contractors identified errors in the software code for Healthcare.gov and its supporting systems, but did not adequately correct them prior to launch.
- **Lack of functionality:** CMS had not implemented all planned functionality prior to the initial launch of Healthcare.gov and its supporting systems.

Since the initial launch, CMS has taken steps to address these problems, including increasing capacity, requiring additional software quality reviews, and awarding a new contract to complete development and improve the functionality of key systems. After it took these actions, performance issues affecting Healthcare.gov and its supporting systems were significantly reduced.

In addition, CMS did not consistently apply recognized best practices for system development, which contributed to the problems with the initial launch of Healthcare.gov and its supporting systems.

Requirements were not effectively managed: Requirements management helps ensure that a project's plans and work products are aligned with the needs of users. However, CMS did not always ensure that requirements were approved and were linked to source and lower-level requirements. As a result, CMS was hindered in ensuring that expected functionality for the system was delivered.

System testing was inconsistent. Testing is essential for ensuring that a system operates as intended. However, Healthcare.gov and its supporting systems were not fully tested prior to launch, and test documentation was missing key elements such as criteria for determining whether a system passed a test. Thus, CMS's assurance that these systems would perform as intended was limited.

Project oversight was not effective. Oversight includes monitoring a project's progress and taking corrective actions when its performance deviates from what is planned. However, CMS's oversight was limited by an unreliable schedule, lack of estimates of work needed to complete the project, unorganized and outdated project documentation, and inconsistent reviews of project progress.

As it has undertaken further development, CMS has made improvements in some of these areas, by, for example, establishing new requirements management processes and improving test documentation. However, weaknesses remain in its application of requirements, testing, and oversight practices. In addition, the Department of Health and Human Services (HHS) has not provided adequate oversight of the Healthcare.gov initiative through its Office of the Chief Information Officer. The Office of Management and Budget's (OMB) oversight role was limited, and GAO has previously recommended that it improve oversight of IT projects' performance.