Despite $500 million price tag, Obamacare web site still failing

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Three weeks after the October 1 launch of the Affordable Care Act's insurance exchange, users are still reporting problems logging on to the HealthCare.gov web site. The Obama administration has released no official figures on how many people have successfully enrolled for insurance through what is commonly known as Obamacare. The site was taken offline over the weekend for extensive code deployments in an effort to fix the problems.

An investigation by Andrew Couts of Digital Trends estimates the total cost of the HealthCare.gov project at $500 million. To place this in context, Couts points out that this is more than the start-up costs for Facebook, Twitter, Instagram, LinkedIn and Spotify, respectively.

The main contract worth $93.7 million was awarded to CGI Federal Inc., a subsidiary of the Canadian CGI Group, in December 2011. According to a Reuters review of government documents, the contract to build the federal online insurance web site HealthCare.gov rose in potential value from an estimated $94 million in October 2011 to nearly $292 million in April this year. The increased spending coincided with warnings from federal and state officials that the technology underlying the exchanges was in trouble.

In March, Henry Chao, deputy chief information officer (CIO) and deputy director of the Office of Information Services (OIS) in the Centers for Medicare and Medicaid Services (CMS), told an insurance agency meeting that he was "pretty nervous" about the exchanges being ready for the October 1 launch. He warned, "Let's just make sure it's not a third-world experience."

Clearly the site was not ready for launch, as users in the first week were greeted with "Access Denied" and other error messages, or simply were not able to get to the site at all. Others were unable to log in to the site after attempting to register. Some of these issues are due to bugs in the code, where a user will click on something and see an error, or a web form is not filled with the correct content. Others problems are more fundamental and related to scalability issues.

US Chief Technology Officer Todd Park said the government expected HealthCare.gov to draw 50,000 to 60,000 simultaneous users, but instead drew as many as 250,000 simultaneous visits in its opening days. According to the digital marketing site compete.com, week one of enrollment through October 5, 2013 saw 9.5 million visitors to HealthCare.gov. Of these, 5.7 million (60 percent of total visits to the site) visited the marketplace, where after selecting their state they were either directed to continue on the federal site or redirected to their state-run exchange. Another 3.7 million attempting to register found the site either hung or they were confronted with error messages. Just over a million people successfully completed the registration process, which is required before viewing the available plans and subsidies.

According to compete.com, over 196,000 people began the 30-step enrollment process in the first week, with the majority stopping well short of completion. In the end, just 36,000 people—1 percent of all those who attempted to register for the federal exchange—successfully enrolled.

While there was clearly an underestimation in the amount of traffic to the site, the main problem is the requirement to register before proceeding. It is in this registration process, which requires communication to the back-end database servers, where the system appears to be breaking down.

Technical commentators have pointed to the myriad of databases in use to check eligibility for subsidies. According to a diagram produced by Xerox, published

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on the Washington Post technology blog, these include the Center for Consumer Information and Insurance Oversight (CCIIO) for verification of citizenship and income from Social Security and Homeland Security, the Internal Revenue Service for tax credits, Medicaid/CHIP for eligibility rules, state agencies and the Treasury Department.

A comment by Anthony Wing Cosner posted on forbes.com Monday was headlined "Obamacare's web site is crashing because backend was doomed in the requirements stage." Speaking of the "constant server calls" as every user click is sent back to one of the agencies mentioned above for verification, he argues, "Far more efficient than cross checking multiple times with multiple sources during the data intake process would be to take all the data in, validate locally for obvious errors and missing data and then validate with all external agencies once at the end. Or better yet, the external validation could be going on asynchronously in the background while the rest of the information is being entered."

Cosner adds, "The point is that this is not a monumental amount of data to collect from each user. As a frontend exercise it's rather trivial. But it is a mess on the backend, with its intricate dance of server calls and data validation, and these complexities are far harder to sort out."

The methods suggested by Cosner are not new. They encompass a programming methodology known as AJAX, or Asynchronous JavaScript and XML, which has been popular in web programming since at least 2006.

Cosner argues that the flaws apparent to end users of the web site "were present in the project's software requirements documents" and that, "Any project of this complexity—particularly one as contentiously political as this one—is bound to have unresolved conflicts embedded in its initial design." He cites the *USA Today* report that "At least 55 major contractors were involved in creating, managing, or supporting HealthCare.gov," leading to inevitable problems coordinating the different teams.

Despite the growing consensus among technology experts that the so-called data hub is the underlying source of the problems confronting HealthCare.gov, an October 20 blog post of the Department of Health and Human Services, entitled "Doing Better: Making Improvements to HealthCare.gov," claimed:

"Aside from the difficulties since launching the site, there are parts of the overall system that have proved up to the task. The 'Data Hub,' component, which provides HealthCare.gov with information that aids in determining eligibility for qualified health plans, is working. Individuals have been able to verify their eligibility for credits, enabling them to shop for and enroll in low or even no-cost health plans."

The next day President Obama spoke from the White House Rose Garden, asking for people to be patient. The same day a blog appeared on HealthCare.gov headlined "We're listening—and improving every day." The blog includes a number of links designed to address the flaws in the site. One link reads "preview plans and prices," another is labeled "improved calculator" and finally, "You can apply for coverage 4 ways."

These changes are clearly an attempt to reduce traffic to the troubled sign-up and registration process, but in no way address the fundamental underlying problems. Specialists working on the project have reported that the online system requires extensive repairs that will likely not be completed until after the December 15 deadline for people to sign up for coverage starting in January.

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