

Agency IT Strategic Plan (Form) / 602 DMAS FY14-16 ITSP

IT SUMMARY

General Information		
Item Name:	602 DMAS FY14-16 ITSP	<i>Choose the CTP-prepared Agency ITSP item for the appropriate biennium</i>
Home Portfolio:	602 DMAS IT Strategic Plans	<i>Choose your Agency Portfolio for ITSP</i>
ITSP Biennium:	FY14-16	
Proponent Secretary:	188 Secretary of Health & Human Resources	
Proponent Agency:	602 Department of Medical Assistance Services	
Submitted by:	Administrator, System	
Agency has BRTs or Investments:	Yes	
Has CETR been updated?	Yes	
Date Submitted:		
For additional CETR information, secure link address or CETR access request go to the following VITA website:		
http://www.vita.virginia.gov/oversight/default.aspx?id=349		

About the IT Summary

The purpose of the agency IT Strategic Plan is to establish an agency-wide vision and priorities for agency investments in IT and IT operations so that they promote the achievement of agency’s mission and business outcomes. The IT Plan Summary describes how agency IT strategies, goals, and objectives align with the mission, vision, values, and daily operations identified in the Agency Strategic Plan. This IT Plan Summary identifies the implications outlined in the Agency Strategic Plan and integrates them into implementable objectives and directives.

Current Operational IT Investments

In this section, describe the high-level strategy the agency will use to manage existing operational IT investments over the next year to 6 years. This section should align with identified Business Requirements for Existing Technology (BReTs). At minimum, please address the following questions in your description of your agency’s strategy for managing existing operational IT investments:

- *Are there existing IT investments that will require additional funding over the next year to 6 years, such as license renewals, re-competition of current IT contracts, or system enhancements required by the Agency Strategic Plan?*
- *If there are systems that will no longer support the agency’s business needs, either through poor performance or excessive cost, how does IT leadership in the agency plan to address the issues?*
- *If the agency does not have the staff or funding to meet increasing demand for IT services, how will IT leadership fulfill the requests?*

DMAS has an Agency Mission Statement to provide access to a comprehensive system of high quality and cost effective health care services to qualifying Virginians. Additionally, DMAS has an Agency Vision Statement to become a recognized leader in the administration of health care programs in Virginia and among state Medicaid agencies.

To support the Agency Mission and Vision, DMAS Information Management Division per the 14 – 16 Biennium offers the following IT Strategic Plan (ITSP). The ITSP focuses on the following areas:

- Program Management Office (PMO) effort to plan for the Medicaid Management Information System (MMIS) Renewal/Procurement Planning.
- PMO and IT Services (ITS) collaborative effort with DMAS Office of Data Analytics on the Smart Data initiative.
- ITS infrastructure modernization and IT services improvements.
- Office of Compliance and Security (OCS) effort per an Agency Security Risk Assessment and Business Impact Analysis.
- Chief Solutions Architect (CSA) effort to stream-line Technology Applications Group and modernize aging DMAS applications.

Factors Impacting the Current IT

In this section, the agency will describe the changes in their business environment that will require or mandate changes to the agency's current IT investments. These are requirements and mandates from external sources, such as other agencies or business partners, the agency's customer base, product and service providers, or new federal or state legislation or regulations. Each requirement or mandate from an external source must have a corresponding Business Requirement for New Technology (BRnT) or Business Requirement for Existing Technology (BReT) entered into the CTP. The agency must identify the business value of the change, any important deadlines that must be met, and the consequences if the deadlines are not met. In your discussion, be sure to note whether the proposed enhancements are funded or not.

If the agency's existing current IT investments will not need enhancement due to requirements or mandates from external sources in the foreseeable future, the agency should enter the following text rather than leave the Factors Impacting the Current IT section blank.

• For each mandated change, summarize your agency's response from your Agency Strategic Plan, and is it the opinion of agency IT leadership that the IT portion of the response is adequately funded?

• Do the mandated changes effect IT in other Commonwealth agencies, or in other states? If so, how?

There many factors impacting IT at DMAS.

The Patient Protection and Affordable Care Act (PPACA), commonly called the Affordable Care Act (ACA) or colloquially Obamacare, is a United States federal statute signed into law by President Barack Obama on March 23, 2010. Law went in to effect on 10/1/2013. Department has to make lot of changes in policy and systems. IT willneed to support those policy changes per changes to the MMIS playform. These changes can be implemented using the Xerox contract hours
Additionally and based on federal mandate, MMIS needs to be ICD 10 compliant by 10/1/2014. As part of the PPACA, implement Hipaa operating Rules 1,2 & 3 provisions and use Xerox contract to implement the changes.

The EDI compliance checking platform is aging and that is impacting IT. DMAS will replace the aging Sybase EDI compliance checking software with Department bought in partnerhsip with VITA called IBM SOA WTX software.

Proposed IT Solutions

In this section, describe the high-level strategy the agency will use to initiate new IT investments over the next year to 6 years in support of the agency strategic objectives documented in your Agency Strategic Plan. The agency does not need to consider specific technologies at this time, however, the strategy should identify how the IT implementation will provide business value to the organization. This section should align with identified Business Requirements for New Technology (BRnTs). At minimum, please address the following questions in your description of your agency's strategy for initiating new IT investments:

• What are the most important solutions, based on the priority assigned to the requirements by the business sponsors in your agency, and what is the approach to achieving these priority solutions?

• If any new IT initiatives will be started in the upcoming budget biennium, is it the opinion of agency IT leadership that it is adequately funded?

• Does the agency's current IT staff have the appropriate skill set needed to support future agency technologies? If not, what skill sets need to be acquired?

• If the agency will be engaged in multiple new IT initiatives, how will agency IT staff and agency subject matter experts be used across the initiatives?

-MMIS Renewal/Procurement Planning

• Department of Medical Assistance Services (DMAS) of Commonwealth of Virginia is planning the renewal of its out-sourced Medicaid Management Information System (MMIS). CMS, the federal agency for Medicaid oversight, is mandating that all states are to follow MITA 3.0, Level 2 (Medicaid Information Technology Architecture) or above for all new MMIS systems. The current DMAS MMIS is at level 1 maturity. CMS is requiring states to reach Level 2 or above to get 90/10 (Federal/State) funding. The current MMIS contract expires June 30, 2018. DMAS is aligning staff, processes, infrastructure and technologies to drive the effort of the new MMIS replacement. As MMIS is the hub for most current DMAS business function contracts, having a newer core technology and platform is key to support the future contracts of DMAS. This will also keep costs down on integration.

• The current DMAS MMIS has a lot of technology underpinnings that were designed 20 years ago. These technologies are starting to phase out and need replacement or upgrading. A few examples are Sybase for electronic data interchange, hardware stacks and ClaimCheck for the national correct coding initiative. DMAS is planning to implement a new system, as opposed to a take-over of the current MMIS. The new technologies introduced with the new system will allow for DMAS business processes to be better positioned in getting results faster.

• DMAS is planning to investigate and leverage new Commonwealth IT investments in newer technology stacks such as service oriented architecture (SOA). To be most cost effective, DMAS may break the new MMIS into smaller logical chunks to achieve the CMS seven standards and conditions for a future MMIS system. See the link-- <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Data-and-Systems/Downloads/EFR-Seven-Conditions-and-Standards.pdf>. DMAS is planning to investigate whether it makes sense to out-source, in-source or have a hybrid-source model for the new detangled MMIS system.

• The new MMIS will be the technical foundation of DMAS business functions. DMAS will be well positioned to modularize the delivery system of Agency services; bring more competition, flexibility, speed to change; implement new initiatives.

-Smart Data

• Department of Medical Assistance Services (DMAS) of Commonwealth of Virginia is currently developing a roadmap to incorporate MITA 3.0 framework into its information architecture and operations. In alignment with MITA requirements, and in an effort to enhance process transparency, automation, and consistency, DMAS has evaluated its existing SAS/analytics infrastructure and found improvement opportunities in the following 4 dimensions:

1) Data Sharing Architecture and Security.

2) Fast Response and efficiency.

3) Audit and Version Control.

4) Automation of Manual Processes.

· Based on the evaluation, DMAS proposes to upgrade the current PC based SAS footprint to an enterprise analytics one. Doing so will provide the organization with a spectrum of tools that will enhance DMAS's capacity to standardize analyses and engage in automated, dynamic reporting complete with user driven options to "slice and dice" the data. Such an environment would allow for automated alerts based on thresholds and benchmarks within the data. The time and resources currently expended on manual processes and slow processing time will be redirected to exploratory analysis, forecasting, prediction, and optimization in support of organizational decision-making. In addition, it will also make the processes transparent through audits and version control. Consistency will be achieved through automation, organization of projects, and change management control. An analytics environment will also allow business users to have secure, easy access to necessary reports and data without programmer intervention. In the future, DMAS also intends to create a data warehouse as part of its data standardization effort (MIITA 3.0 Information Architecture), and these tools will complement the warehouse and create a comprehensive analysis platform.

-DataCenter Reduction

· Department of Medical Assistance Services (DMAS) of Commonwealth of Virginia is reducing its physical DataCenter footprint at its 600 East Broad Street, Richmond, VA headquarters. Leveraging the state-wide DataCenter, CESC, and other hosting options, DMAS is in a position to convert the DataCenter space on the 9th floor to office space to accommodate personnel growth of the Agency.

· The Reduction will consist of the logical and physical removal/move of all server based functionality within the current DMAS DataCenter. Additionally, the tele-communications footprint will be reduced to handle only needed WAN/LAN connectivity.

-Citrix/Remote Working

· DMAS is addressing its need to have its workforce to be able to work remotely away from DMAS headquarters. Currently, 56% of its workforce uses VPN via COV/DMAS issued laptops when away from headquarters. The remaining 44% use a legacy Citrix environment that is being upgraded. The legacy Citrix environment is being upgraded to an Enterprise Application Publishing Service [EAPS] platform. This platform will allow for the publishing of core IT services needed remotely, as well as core DMAS IT applications. The EAPS platform is being designed to accommodate the entire Agency in the event of a COOP scenario.

-Windows 2003 Servers

· DMAS has 11 Windows 2003 servers still in production. With Microsoft ending support of Windows 2003 servers July 2015, DMAS is actively working to retire or migrate to a supported platform. Impacted DMAS applications are Intranet, RightFAX, legacy Citrix, Oracle Environment, SAS production files and GoFileRoom. Each application environment is being address individually per upgrade/improvement in a manner to move it from its current Windows 2003 platform. Lastly, DMAS Windows 2003 servers that will remain in production past end-of-life Microsoft support will have Enhanced Server Operating System Security (ESOSS) applied.

-Managed Print Services

· DMAS is planning to streamline its printing services. Currently, DMAS has 3 contractual relationships to provide printing services to the Agency. Those contracts encompass over 75 print devices of various models. Driven by a usage analysis, DMAS will reduce its printing footprint by 30% and collapse printing services into one contract.

-Faxing Services

· DMAS currently has 17 physical fax machines and a legacy electronic RightFAX environment that handles all its faxes. DMAS is planning to upgrade its legacy RightFAX environment to handle all of its faxes and transition to a paperless fax environment. The effort will be handled in two phases. Phase one will consist of getting the legacy RightFAX environment off of its current Windows 2003 platform and upgrading the RightFAX application. Phase one will also increase the capacity of RightFAX to accommodate for phase two of the effort. Phase two will transition the 17 physical fax machines into the new electronic RightFAX environment.

-Technology Applications Group (TAG) Support

· Department of Medical Assistance Services (DMAS) of Commonwealth of Virginia within its Information Management Division has a contracted TAG Team. DMAS is planning to streamline the TAG Team and bring the support functionality in-house to the Commonwealth.

· The TAG team is primarily focused on developing and maintaining applications that cater to the needs of internal DMAS business functions. The Oracle software stack (Oracle Financials, APEX, WebLogic Server, Forms & Reports, and Oracle Database) is extensively used in the development of these applications by the TAG Team. The Agency's Intranet and Internet is developed and maintained by the TAG team. The TAG team supports multiple applications for multiple divisions within the agency. The upgrades to the software applications are monitored and upgrades are evaluated, scheduled and preformed as needed.

-Application Development

· DMAS is planning the implementation of an Agency Enterprise Content Management System. Existing DMAS data will be migrated into the new CMS system. This effort will allow DMAS to reduce its redundant data footprint and allow indexing of the files stored.

· DMAS is planning to automate the various manual approval workflow processes; this will greatly improve the efficiency of the tasks related to this within the agency.

· DMAS is planning to adhere to a MVC framework for rapid application development and a framework for web services. Implement the industry standard version control, continuous integration solutions to aid the configuration management.

· DMAS is planning to implement a Secure Managed File Transfer solution for the agency.

· DMAS is planning to leverage the IBM SOA suite products (WODM, BPM, WTX and ESB) housed in VITA.

· DMAS is planning to align the application development to comply with CMS Seven Standards and Conditions and MITA initiatives.

· Oracle Financials Upgrade, to include Forms Migration and a project-driven effort to transform into COV Cardinal.

-Security Risk Assessment

Department of Medical Assistance Services (DMAS) of Commonwealth of Virginia is planning an IT Security Risk Assessment (SRA) and Business Impact Analysis (BIA) during the biennium. The SRA and BIA will cover all DMAS IT systems currently hosted by VITA and XEROX

Report Title: Strategic Plan

Agency:

Department of Medical Assistance Services

Date:

9/21/2015

Current IT Services

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Projected Service Fees	\$1,528,755	\$1,609,728	\$1,566,974	\$1,649,971
VITA Infrastructure Changes	\$0	\$0	\$0	\$0
Estimated VITA Infrastructure	\$1,528,755	\$1,609,728	\$1,566,974	\$1,649,971
Specialized Infrastructure	\$0	\$0	\$0	\$0
Agency IT Staff	\$2,253,041	\$1,126,521	\$2,365,693	\$1,182,847
Non-agency IT Staff	\$28,993,620	\$7,742,102	\$25,821,780	\$6,895,133
Cloud Computing Service	\$0	\$0	\$0	\$0
Other Application Costs	\$63,955	\$575,567	\$66,273	\$596,454
Total	\$32,839,371	\$11,053,918	\$29,820,720	\$10,324,405

Proposed IT Investments

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Major IT Projects	\$0	\$0	\$0	\$0
Non-Major IT Projects	\$0	\$0	\$0	\$0
Agency-Level IT Projects	\$0	\$0	\$0	\$0
Major Stand Alone IT Procurements	\$0	\$0	\$0	\$0
Non-Major Stand Alone IT Procurements	\$0	\$0	\$0	\$0
Agency-Level Stand Alone IT Procurements	\$0	\$0	\$0	\$0
Total	\$0	\$0	\$0	\$0

Projected Total IT Budget

Category	Costs Year 1		Costs Year 2		Total Costs
	GF	NGF	GF	NGF	
Current IT Services	\$32,839,371	\$11,053,918	\$29,820,720	\$10,324,405	\$84,038,414
Proposed IT Investments	\$0	\$0	\$0	\$0	\$0
Total	\$32,839,371	\$11,053,918	\$29,820,720	\$10,324,405	\$84,038,414

Report Title: Business Requirements For Technology**Agency:** Department of Medical Assistance Services (DMAS)**Date:** 9/21/2015**BReT for DataCenter Reduction****BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 8/28/2015**Mandate:** No**Mission Critical:** No**Description:**

DMAS currently has a DataCenter on the 9th floor of Agency headquarters. DMAS is reducing the physical footprint of the DataCenter to create more office space for DMAS workers. This reduction will require the move of technology to the Commonwealth DataCenter - CESC.

BReT for Managed Print Services VBS**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 7/17/2014**Mandate:** No**Mission Critical:** No**Description:**

DMAS has entered into a Managed Print Services relationship with Virginia Business Systems [VBS]. MPS procurement encompass the following areas; all networked printers, all high-speed multi-function devices, and all color printing devices.

BReT for MS Server 2003**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 7/16/2015**Mandate:** No**Mission Critical:** Yes**Description:**

The business requirement is that DMAS has to upgrade its 11 MS Server 2003 servers due to end-of-life support from Microsoft.

BReT for New Citrix [EAPS]**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 8/10/2015**Mandate:** No**Mission Critical:** Yes**Description:**

Upgrade of current/legacy Citrix platform to a new Citrix platform called EAPS. Enterprise Application Publishing Service.

BReT for Oracle 10.2 Upgrade**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 7/23/2015**Mandate:** No**Mission Critical:** Yes**Description:**

DMAS Oracle Instances are still in Oracle DB version 10.2 and need to be upgraded.

BReT for RightFAX Upgrade**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 8/10/2015**Mandate:** No**Mission Critical:** No**Description:**

Upgrade of the current DMAS RightFAX platfor to RightFAX v10.

BReT for SQL 2005 Upgrade**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 7/16/2015**Mandate:** No**Mission Critical:** No**Description:**

DMAS needs to upgrade its instantances of SQL 2005 as it is at end-of-life support.

BReT Security Risk Assessment**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 1/22/2015**Mandate:** Yes**Mission Critical:** Yes**Description:**

Assura SOW DMAS Compliance Analysis BIA RA for Requisition No. PR6338507. This procurement will fund a Security Risk Assessment (SRA) and Business Impact Analysis, to be conducted by Assura, a subcontractor of Computer Aid, Inc. This SRA will cover all DMAS systems currently hosted by VITA and XEROX.

BReT Smart Data**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 10/1/2014

Mandate:	No
Mission Critical:	No
Description:	
Move all DMAS/XEROX SAS functionality from current in-house servers to VITA-hosted solution. This investment supports the centralization of sensitive HIPPA data in a server based environment. It improves business process efficiencies, allowing multiple level users to access data. This is a change from DMAS's as is PC SAS which is inefficient and less secure. The move to server based environment will allow more timely and accurate data management reporting.	
BRnT - DMAS Cardinal Implementation	
BRT Type:	Business Requirement for New Technology
Date Submitted:	4/15/2015
Mandate:	Yes
Mission Critical:	No
Description:	
Make the changes needed to use Cardinal as the new State-mandated accounting system (as a replacement of CARS)	
BRnT for Business Process Improvement MFT	
BRT Type:	Business Requirement for New Technology
Date Submitted:	9/8/2015
Mandate:	No
Mission Critical:	No
Description:	
DMAS would like to automate its File Transfers to/from the Agency. Agency is exploring multiple solutions to determine which works best for the Agency. This will improve business processes.	
BRnT for Enterprise Content Management System	
BRT Type:	Business Requirement for New Technology
Date Submitted:	8/12/2015
Mandate:	No
Mission Critical:	Yes
Description:	
Bringing ECM to DMAS via SharePoint.	
BRnT Medicaid Enterprise System (MES) Program	
BRT Type:	Business Requirement for New Technology
Date Submitted:	8/17/2015
Mandate:	Yes
Mission Critical:	Yes

Description:

DMAS is replacing its existing Medicaid Management Information System (MMIS) and transforming to a Medicaid Enterprise System (MES).

The MMIS is the mechanized claims processing and information retrieval system which states are required to have by CMS (Centers for Medicare & Medicaid Services). The contract to operate Virginia's MMIS (VAMMIS) ends June 30, 2018. This represents the end of the fourth and final option year that is expected to be exercised on top of the initial four year contract period, or a total of eight years. Virginia must begin the procurement process to replace VAMMIS and acquire a new system so it can continue to:

- Enroll recipients and providers

- Process claims

- Pay the providers, Managed Care Organizations (MCOs) and Administrative Services Organizations (ASOs) that deliver services to members.

CMS requires that the Single State Medicaid agency (DMAS) must operate a federally-certified system in order to qualify for federal financial participation for its Medicaid program. The current VAMMIS system must be replaced to ensure that Virginia will continue to receive the maximum federal funding for its Medicaid program. Virginia received approximately \$4.5 billion in federal funding in SFY 2015.

The Medicaid Enterprise System Program (MES) program will address the business, information, and technical requirements needed to meet Agency needs and Medicaid Information Technology Architecture (MITA) objectives. MITA is an initiative of CMS to establish national guidelines for technologies and processes that improve program administration for the state Medicaid Enterprise System. During a recently completed MITA State Self-Assessment, DMAS reviewed its current systems and operations and began identifying what should be changed and adopted going forward.

While the direction will be further developed through RFP development, some key objectives have been identified for the new MES that include:

- Continue the development of the Eligibility & Enrollment (E&E) enhancement to address all existing members and to integrate with additional intrastate systems, such as the Commonwealth Authentication System (CAS)

- Develop a data warehouse that improves the breadth and quality of data available and provides the information needed to manage, operate, measure and improve the Medicaid Enterprise

- Transform the traditional Medicaid Management Information System (MMIS) to a modern Medicaid Enterprise System, including:

- o Pursuing a modular approach to specific business needs where cost-effective robust solutions can easily be integrated, possibly in areas such as claims processing, financial management and pharmacy benefits

- o Identifying ways to further automate and integrate business processes that were not traditionally part of an MMIS but are components of the MES, such as managing member and provider appeals and contractor management

- o Creating provider and member portals that support the "one stop shop" objective and improve information access and service for all Medicaid related needs

- o Supporting exchanges with federal, State and other entities, including the Health Insurance Exchange (HIX) and Health Information Exchange (HIE)

- o Expanding the automation and decision making associated with business processes where feasible and cost-effective

- Establish a technical architecture that supports the CMS and DMAS vision for current and future services and performance, including items such as SOA architecture, an enhanced content management system that includes reports produced by our business partners, and supporting a variety of user-friendly methods to access information and services in an environment that is scalable, cost-effective, and easily changed and supports innovation and experimentation

- Enhance provider enrollment and management to address the multiple relationships providers have with DMAS and its business partners, such as managed care organizations (MCOs)

- Collect and integrate all fee-for-service claims in a single repository

- Address encounter processing in a manner that recognizes the variety of managed care models and programs, such as risk-based versus administrative services only (ASO)

- Collect clinical data for fee-for-service claims to better measure health outcomes and populate electronic health records (EHR)

â€¢ Adhere to the MITA seven standards and conditions.

The program is sponsored by CMS and DMASâ€™s Agency Director. MES stakeholders include the DMAS Executive Management Team.

The goal is to transition to a modern MES with no disruption in service.

DMAS management will provide the functional leadership for the procurements, and the program will be managed by the DMAS PMO.

BRnT MES Data Warehouse

BRT Type: Business Requirement for New Technology

Date Submitted: 9/2/2015

Mandate: Yes

Mission Critical: Yes

Description:

blurb about the business need for data warehouse capabilities...

BRnT MES Integration

BRT Type: Business Requirement for New Technology

Date Submitted: 9/2/2015

Mandate: Yes

Mission Critical: Yes

Description:

#Integration services that will design connectivity between interface

Report Title: Appendix A 14 - 16 Report

Agency: Department of Medical Assistance Services
(DMAS)

Date: 9/21/2015

Agency Head Approval:

No

Budget Category: Major Projects				
HIPAA Upgrade Code Set (ICD-10)				
Oversight and Governance Category: Category 2: High/Medium or High/Low or Medium/High				
Appropriation Act/Funding Status			Project Initiation Approval - Partially Funded GF/NGF	
The Centers for Medicare and Medicaid Services (CMS) has passed regulation requiring that the ICD-10 version of Code Set be implemented. DMAS will have to plan and implement the new version in order to remain HIPAA compliant and continue to receive and send electronic data. Implementation of the changes will require modification to the MMIS for the ICD- 10 version, and extensive provider outreach and trading partner testing.				
Planned project start date:	2/6/2012	Planned project end date:	1/30/2015	
PPEA Involvement:	No			
Estimated Costs:	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source
Project Cost (estimate at completion):	\$12,730,355			
Estimated project expenditures first year of biennium:	\$142,210	\$14,221	\$127,989	
Estimated project expenditures second year of biennium:	\$810,132	\$81,013	\$729,119	
Service Area			Weight	
602 DMAS 49900 Administrative and Support Services			Primary	
Project Related Procurements				
ICD-10 EDI Compliance Software Replacement.				
Procurement Description:	Staff Aug position			
Planned Delivery Date:	7/1/2015			
Smart Data Project				
Oversight and Governance Category: Category 4: Low/Medium, Low/Low				
Appropriation Act/Funding Status			Investment Business Case Approval -	
This investment supports the centralization of sensitive HIPPA data in a server based environment. It improves business process efficiencies, allowing multiple level users to access data. This is a change from DMAS's as is PC SAS which is inefficient and less secure. The move to server based environment will allow more timely and accurate data management reporting.				
Planned project start	7/20/2015	Planned project end date:	10/31/2016	

date:				
PPEA Involvement:				
Estimated Costs:				
	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source
Project Cost (estimate at completion):	\$3,395,636	\$339,563	\$3,056,072	
Estimated project expenditures first year of biennium:	\$0	\$0	\$0	
Estimated project expenditures second year of biennium:	\$3,395,636	\$339,563	\$3,056,072	Non-general - Federal
Funding Required:				
	Total	General	Nongeneral	Nongeneral Funding Source
Funding required for first year of biennium:	\$0	\$0	\$0	
Funding required for second year of biennium:	\$3,395,636	\$339,563	\$3,056,072	Non-general - Federal
Service Area			Weight	
There are no service areas for this project.				
Project Related Procurements				
Smart Data Procurement				
Procurement Description:	Move all DMAS/XEROX SAS functionality from current in-house servers to VITA-hosted solution. This investment supports the centralization of sensitive HIPPA d			
Planned Delivery Date:	10/30/2015			

Budget Category: Non-Major Projects

DMAS Cardinal Implementation Project

Oversight and Governance Category: Category 4: Low/Medium, Low/Low

Appropriation Act/Funding Status

Investment Business Case Approval -

This is a mandated project that requires DMAS to utilize the new Cardinal accounting system as a replacement for CARS.

Planned project start date:	5/15/2015	Planned project end date:	5/13/2016
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PPEA Involvement:

Estimated Costs:	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source
Project Cost (estimate at completion):	\$776,350	\$388,175	\$388,175	
Estimated project expenditures first year of biennium:	\$290,482	\$145,241	\$145,241	Non-general - Federal
Estimated project expenditures second year of biennium:	\$485,868	\$242,934	\$242,934	Non-general - Federal

Funding Required:	Total	General	Nongeneral	Nongeneral Funding Source
Funding required for first year of biennium:	\$290,482	\$145,241	\$145,241	Non-general - Federal
Funding required for second year of biennium	\$485,868	\$242,934	\$242,934	Non-general - Federal

Service Area

Weight

602 DMAS 49900 Administrative and Support Services

Primary

There are no procurements for this project.

Report Title: Appendix A 14 - 16 Report

Agency: Department of Medical Assistance Services
(DMAS)

Date: 9/21/2015

Agency Head Approval:

No

There are no major procurements for this agency.

Stand Alone Non-Major Procurements

Procurement Name:	Managed Print Services VBS Procurement		
Procurement Description:	DMAS has entered into a Managed Print Services relationship with Virginia Business Systems [VBS]. MPS procurement encompass the following areas; all networked printers, all high-speed multi-function devices, and all color printing devices.		
Procurement Planned Start Date	7/25/2014	Procurement Planned Completion Date	11/28/2014
		Appropriation Act Status	
Service Area			Weight
There are no service areas for this project.			

