

2024 - 2026 IT Strategic Plan

Agency: 602 Department of Medical Assistance Services

Date: 11/9/2023

Current IT State

In this section, describe the high-level strategy the agency will use to manage existing operational IT investments over the next year to 5 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 5 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 24 – 26 Biennium offers the following IT Strategic Plan (ITSP).

Agency's IT strategy is designed to support Agency's mission and is driven by directions and mandates from Center of Medicare & Medicaid Services (CMS), VITA and State's legislation and priorities. The overall strategy includes maintaining leveraging, re-using current investments where possible, while seeking new and innovative technologies and solutions to reduce cost and provide increased service to citizens as efficiently as possible.

DMAS has adopted the cloud first approach and is the process of developing projects to migrate the applications and databases that are still on premise to a cloud solution.

DMAS's solution strategy is built on a hybrid approach that includes both homegrown and outsourced solution. The agency is actively working on adopting the Agile methodologies to gain development efficiencies.

DMAS is cognizant of its need to integrate and exchange data with State and Federal partners like DSS, VDH, DBHDS, CMS etc. and Coordinates with them when designing and developing core solution that has external impacts.

DMAS is constantly evaluating systems that are no more meeting the agency business needs and takes steps to replace them. For example: DMAS's The Fiscal Agent Services (FAS) solution is a 20 + year old system and is unable to fully support the current business needs. Agency is now working on RFP to find a replacement for this solution.

The decisions to update existing solutions is driven by available budget and competing priorities. An Enterprise Change Management board helps in assigning priority to the request for changes and upgrades. DMAS is also

evaluating leveraging cost saving measures by adopting SAAS and cloud-based solutions.

High-level strategy the agency will use to manage existing operational IT investments over the next year to 5 years. Medicaid Enterprise System (MES) is the core solution that serves Agency's business needs, MES provides integrated solutions for managing members, providers, claims, encounters, pharmacy benefits, appeals, care management, Datawarehouse, data analytics, Frauds and Abuse detection system, Financial Management, Third Party Liability recoveries, Data and Network Integration & Single Sign On and credential management, MES is the transformed Medicaid Management Information System (MMIS) that was in use for the past 20 years. Per direction of CMS DMAS switched from the monolithic MMIS to a modern modular solution in April 2022. DMAS plans to continue leverage this investment in this model for the next 5 years. It will renew or rebid the contracts that will expire during that timeframe. DMAS aligns the roadmap for replacing the existing solutions with its procurement strategy, State's procurement guidelines and budget constraints,

In addition to MES, DMAS also leverages various applications to improve productivity and communications. These include Agency Portal, SharePoint, DocuSign, K2 workflows, Granicus and Managed File Transfers solution (GoAnywhere), SAS. DMAS plans to continue using VITA managed contracts and services to support these applications.

Existing IT (CORE) investments that will require additional funding over the next year to 5 years, such as license renewals, re-competition of current IT contracts, or system enhancements required by the Agency Strategic Plan. Medicaid Enterprise System (MES). This is the Core enterprise system that supports business needs of DMAS. MES includes two groups of applications described below.

Note: Most MES application will require some updates due to DMAS's re-procurement of its managed care organizations (MCO) contracts. This is known as project Eclipse and is described in the next section.

I. Business applications operated and managed by DMAS Information Management Division.

- a. The solutions are hosted at facilities under a VITA contract
- b. The solutions will continue to be managed by a combination of state employees and contractors.
- c. The applications are enhanced as needed.
- d. DMAS periodically evaluate the solutions for replacements or upgrades.
- e. All applications are being evaluated for cloud hosting
- f. Applications under this category are listed below and will need operational funding for the next 5 years

i. EPS – Encounter Processing System: Will require license renewals.

EPS, provides secure Connections to receive and validate Encounters submitted by MCOs and other Trading Partners. EPS validates the data to ensure it is formatted correctly and completely, the data is then supplied to ISS and other MES modules. EPS was developed in-house using DMAS resources and talent and is already CMS certified.

ii. CRMS – Care Management Solution: Will require license renewals.

CRMS, streamlines and standardizes the information exchange among MCOs and DMAS business areas through Member Transition Records. Accessed through the MES portal, a comprehensive set of health records are created and maintained for Behavioral Health and Long-Term Care using eMLS, LOCERI and PACE web applications. Just like EPS, CRMS was developed internally by DMAS.

iii.

iv. FMS – Financial Management Systems: Will require license renewals.

FMS includes:

- a. An internal accounting System: Oracle E-Business Suite (EBS):
- b. Oracle Apex based applications for financial reporting,
- c. Pulse: A system to support the budget division
- d. TPLRS: A oracle forms system to support Third Party liability recoveries. v.

vi. SMART DATA: A SAS based solution for data analytics and reporting: Will require license renewals.

vii.

2) Business applications operated and managed by vendors with oversight being provided by DMAS.

- a. The applications are procured under guidance of the Virginia Public Procurement Act and VITA.
- b. The applications are procured as SAAS solutions.
- c. The applications are periodically enhanced as needed.
- d. DMAS will continue to follow the solution life cycle management best practices and renew or rebid as needed.
- e. These applications support some of the CORE business functions of the agency and are together known as the
- f. The solutions under this category are listed below and will require funding for the next 5 years:

1) Fiscal Agent System (FAS)/MMIS: Will Require Renewal and Rebid.

The current Fiscal Agent Services (FAS) solution previously known as MMIS, is a core module of the integrated DMAS's Medicaid Enterprise System (MES). The base solution being used was originally implemented in 2003. FAS provides the following high-level functions:

- Managing member information
- Processing claims
- Creating capitation payments
- Maintaining reference data
- Generating payments
- Operational support, including call center and mailroom functions

2) The Enterprise Data Warehouse Solution (EDWS): Will require Modifications and Renewals

EDWS is the main storage repository for data within MES. EDWS receives and supplies data on demand to MES modules through ISS and is the source for data analytics and Tableau dashboards for users. It includes a Fraud and Abuse detection system (FADS), and a Management Reporting Systems (MARS) as well.

3) Integration Services Solution (ISS): Will require Modifications and Renewals

MES is very comprehensive and includes connections to many systems and entities. These connections are managed by the ISS. ISS can be thought of as the central coordinator for all the information flowing through MES. Data flows from module to module in the cloud, with ISS directing the traffic to the right place. ISS includes the MES Portal, A single sign on solution and a MES Intranet.

4) Provider Services Solution (PRSS): Will require Modifications and Renewals

Provides overall management for provider related activities. PRSS connects to all MES modules, and easily maintains and manages the Providers in DMAS's network. For example, Provider Eligibility and Enrollment, and screening are all part of PRSS.

5) Appeals Information Management Systems (AIMS): Will require Renewals and Rebid

The Appeals module includes a new system to automate Appeals processes and make the Appeals Adjudication process easier and faster. Becoming operational in 2021, the new AIMS portal for Appeals replaces an antiquated system automating many processes which were previously handled manually, in a paper-based process.

6) The Pharmacy Benefit Management Solution (PBMS): Will require Renewals and Rebid

PBMS manages pharmacy benefits across the Provider and Member communities. PBMS also shares data with other MES modules while managing pharmacy benefits, drug rebates, transactions, and payments. PBMS is also

CMS certified. PBMS will not have significant changes.

Other Services with IT components

Solution Current Status\Update

Mass Mailing In Production, current vendor is Direct Mail Works\RFP in development

Granicus In Production\No renewal planned

Non-Emergency Medical Transportation (NEMT) Brokerage Services In Production, current vendor is LogistiCare\RFP in development

Fiscal/Employer Agent (F/EA) In Production, current vendor is Consumer Direct Care Network Virginia (CDCN)\RFP in development

Enrollment Broker In Production, current vendor is Maximus\RFP in development

Dental Services In production, RFP awarded to DentaQuest\Implementation in progress

Service Authorizations In production, RFP awarded to Acentra\Implementation in progress

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. 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?

Mandated changes that will impact current IT:

1. EO19

EO19 directs the movement of applications servers to the cloud, as well as improve and consolidate existing technologies and security for existing applications. Currently the DMAS Oracle applications and databases are housed at the QTS data center on Oracle Private Cloud Appliances. Moving to the Oracle Cloud Infrastructure will allow DMAS to reduce its annual Oracle licensing and support fees by approximately one half and realize additional features such as Advanced Security Options. The elimination of the Oracle PCA servers at QTS will also result in some cost reductions.

2. Re-Procure Fiscal Agent Services (FAS)

The current Fiscal Agent Services (FAS) solution previously known as MMIS, is a core module of the integrated Medicaid Enterprise System (MES). The base solution being used was originally implemented in 2003. The contract has been extended multiple time as a Sole Source and as per directive from CMS and the state DMAS must now do a complete bid for this solution.

3. Re-Procure Managed Care Contracts (Project Eclipse)

a. In 2022, DMAS began planning for a procurement of its managed care program that will both build upon the upcoming Cardinal Care program and continue to drive innovation, quality, and accountability for the comprehensive managed care program serving all of Virginia's covered Medicaid and CHIP populations.

b. Implementation is dependent upon General Assembly (GA) funding and approval; however, the Youngkin

administration is targeting July 1, 2024. This timeline includes time for ongoing stakeholder engagement as well as a six-month ramp-up period for readiness as well as CMS, DPB, OAG, DGS, and VITA review prior to go-live.

c. To help identify best-in-class MCOs, DMAS has awarded a contract to a nationally recognized vendor, Boston Consulting Group, to assist with RFP development.

d. Dependent upon the health plans awarded the managed care contracts, this procurement could involve system changes to various vendors and MES modules which may require APD funding.

4. Changes to MES and Enrollment Broker due to Re-procurement of MCO vendors (Project Eclipse).

5. Vendor for MES- PRSS needs to upgrade their platform to the most recent version. This upgrade is important for allowing optimum service and enabling enhancements that DMAS has requested.

6. EDWS solution needs enhancements to the Transformed Medicaid Statistical Information System (T-MSIS) due to CMS mandated changes

7. HHR PRIORITY: Increase Automation for Medicaid Eligibility Determinations and Redeterminations.

DMAS will fund the changes listed above by using a mix of state and federal funds. In addition, DMAS is submitting decision packets to support the modification to the current IT solutions.

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 5 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?

1. Patient Access and Interoperability (HITECH):

The CMS Interoperability and Patient Access Final Rule, published in the Federal Register May 1, 2020, is part of a long and ongoing federal government effort to promote and facilitate easier access to electronic health information for patients, providers, and payers. The CMS Interoperability and Patient Access Final Rule and its companion, the Cures Act Final Rule, also published on May 1, 2020, operationalize the interoperability provisions of the Cures Act, with the goal of promoting seamless movement of patient information between payers, providers and patients. To reduce the barriers that impede the efficient exchange of patient health information, the rule will require healthcare payers regulated by DHHS to develop and implement several provisions. The following three provisions will have the greatest impact on DMAS:

- A Patient Access Application Programming Interface (API) that allows patients to easily access their claims, encounter, and clinical information through third-party applications of their choice available on home laptops, tablets,

and smartphones.

- A Provider Directory API to make provider directory information publicly available to help patients find providers for care and treatment.
- A Payer-to-Payer Data Exchange to exchange certain patient clinical data at the patient's request, allowing the patient to take their information with them as they move from payer to payer.

Objectives: CMS has defined three main objectives to be accomplished with this new rule.

- Patient Access – Empowering patients by giving them access to their health information so they can make the best-informed decisions about their care, all while keeping that information safe and secure.
- Connecting Healthcare through Data Exchange – Driving to value-based care by promoting seamless data exchange across the continuum.
- Technology and Standards – Promoting the use of the latest technology and standards to drive innovation and data exchange in healthcare.

2. Outsourcing EDI processing to the MES integrator to reduce risk related inhouse maintenance.

3. An Enterprise Change Management Solution

An Enterprise Change Management solution is urgently needed to remediate the following Audit finding dated 11/16/2021: IM should implement a single change management system to maintain formal documentation of change requests, stakeholder reviews and approvals, development, testing, and implementation actions for all changes to DMAS applications, software, and infrastructure.

4. TPLRS (Third Party Recovery System) enhancements. Implement enhancements to the TPLRS system to provide greater automation, workflows and portal access for citizens. This will streamline and provide efficiencies in the business process that supports liens and receivables related to casualty and estate recoveries.

5. FEDERAL MANDATE: Establish a Comprehensive Critical Incident Management System: This is to establish a comprehensive critical incident management system for the CCC Plus Waiver that meets the requirements of federal 1915 c waiver assurances. Under section 1915 (c) of the Social Security Act, the state must provide for the health and welfare of individuals served. Medicaid agencies are mandated to have a process to elicit information on the health and welfare of individuals served through the program and must comply with the CMS assurances

Notes: Funding, Staffing and SME availability

- DMAS will fund the initiatives listed above by using a mix of state and federal funds. In addition, DMAS is submitting decision packets to support the implementation.
- DMAS will implement the solutions by using a combination of out-sourcing and inhouse development using existing staff. For all new technologies provided by a vendor DMAS plans to build in knowledge transfer and training components in the contracts
- An integrated schedule will be utilized to minimize the impact of the SME availability conflicts.

IT Strategic Plan Budget Tables

Agency:	602 Department of Medical Assistance Services			
Date:	11/9/2023			
Current IT Services				
	Costs Year 1		Costs Year 2	
Category	GF	NGF	GF	NGF
Projected Service Fees	\$3,166,456.71	\$6,419,349.93	\$3,261,450.41	\$6,611,930.43
VITA Infrastructure Changes				
Estimated VITA Infrastructure	\$3,166,456.71	\$6,419,349.93	\$3,261,450.41	\$6,611,930.43
Specialized Infrastructure				
Agency IT Staff	\$5,932,729.47	\$5,932,729.47	\$7,119,275.37	\$7,119,275.37
Non-agency IT Staff	\$1,951,524.86	\$5,854,574.58	\$2,341,829.83	\$7,025,489.49
Cloud Computing Service	\$17,137,135.85	\$51,411,407.55	\$17,993,473.65	\$53,980,420.94
Other Application Costs	\$450,337.78	\$1,351,013.35	\$89,070.11	\$267,210.33
Total:	\$28,638,184.67	\$70,969,074.88	\$30,805,099.37	\$75,004,326.56
Proposed IT Investments				
	Costs Year 1		Costs Year 2	
Category	GF	NGF	GF	NGF
Major IT Projects:	\$2,984,052.72	\$11,311,459.67	\$8,095,151.40	\$50,564,699.15
Non-Major IT Projects:	\$410,000.00	\$2,190,000.00	\$345,000.00	\$1,455,000.00
Agency-Level IT Projects:	\$20,000.00	\$180,000.00	\$25,000.00	\$75,000.00
Major Stand Alone IT Procurements:				
Non-Major Stand Alone IT Procurements:			\$650,000.00	\$650,000.00
Agency-Level Stand Alone IT Procurements:				
Procurement Adjustment for Staffing:				
Total:	\$3,414,052.72	\$13,681,459.67	\$9,115,151.40	\$52,744,699.15

Projected Total IT Budget				
	Costs Year 1		Costs Year 2	
Category	GF	NGF	GF	NGF
Current IT Services	\$28,638,184.67	\$70,969,074.88	\$30,805,099.37	\$75,004,326.56
Proposed IT Investments	\$3,414,052.72	\$13,681,459.67	\$9,115,151.40	\$52,744,699.15
Total	\$32,052,237.39	\$84,650,534.55	\$39,920,250.77	\$127,749,025.71

Business Requirements For Technology

Agency:	602 Department of Medical Assistance Services
Date:	11/9/2023

AIMS - Appeals Information Management System

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/1/2024
Mandate:	
Mission Critical:	Yes

Description:
 AIMS is the MES module for filing and updating citizen appeals in the Virginia Medicaid System. AIMS is being renewed in 2024.

BRT - Medicaid Dental Program

BRT Type:	Business Requirement for New Technology
Requested Start:	10/12/2022
Mandate:	Yes
Mission Critical:	Yes

Description:
 In September 2018, DMAS requested presentations regarding best practices in Medicaid dental programs to inform staff for the development of a Request for Proposal (RFP) for a dental benefits administrator. Since that time, two major drivers have affected the timeline for all RFPs and many contracts at DMAS: 1) the moving of the Medicaid Enterprise System (MES) implementation date from December 1, 2019 until mid-year 2020, and 2) the recently passed high-risk legislation effective July 1, 2019. (See Code of VA, §2.2-4303.01 for more information). Both drivers have required DMAS as a whole to re-evaluate release dates and timing for all of the agency's upcoming RFPs, as well as existing contract renewals and modifications. Once an anticipated timeline for the Smiles For Children RFP has been formalized, we will communicate to the vendor community through a new future procurement posting. With the anticipated RFP, the Department is again interested in gathering information on the latest industry best practices, technologies, and resources for Medicaid dental health services and supports. DMAS invites providers, plans, and other entities with experience in Medicaid dental health program benefits administration to present and submit (no more than a 20

page document), including appendices, information and resources which available in the Medicaid dental market. Also, the 2020 General Assembly expanded Medicaid Dental coverage to the entire Medicaid population.

BRT - Service Authorization and Specialty Services

BRT Type: Business Requirement for New Technology

Requested Start:

Mandate:

Mission Critical: Yes

Description:

The project will manage the procurement and implementation of a solution for service authorization of all medical and behavioral health services for members enrolled in Virginia's Medicaid, FAMIS Plus, FAMIS and Expansion programs who are not enrolled in managed care, but are receiving services through the fee for service (FFS) delivery system.

The solution will include a dedicated toll-free call center for members, as specified above, and providers; and, specialty behavioral health services for members, as specified above as covered under FFS, including: A toll-free 24/7/365 behavioral health crisis hotline available to Medicaid members not otherwise enrolled in managed care; and, Service Registration of required behavioral health services.

DMAS SD-WAN Upgrade

BRT Type: Business Requirement for Existing Technology

Requested Start: 3/1/2023

Mandate: Yes

Mission Critical: Yes

Description:

Configure existing routers to support SD-WAN capability across all agency locations. This approach prepares agency location(s) with the ability to add additional network capabilities (multiprotocol label switching (MPLS), broadband, wireless (i.e., Cradlepoint)) to take advantage of application-aware routing over private and public networks.

Three step process:

Remote internetwork operating system (IOS) software upgrade on the router.

Remote SD-WAN deployment
Circuit deployment as needed

DMAS Website Modernization

BRT Type:	Business Requirement for New Technology
Requested Start:	6/16/2023
Mandate:	
Mission Critical:	Yes

Description:
The primary objective of the COV Website Modernization and the CMS Virginia.gov projects are to ensure all state sites are on a single common platform and are following required VITA, COV and 508 standards

EDI Services

BRT Type:	Business Requirement for New Technology
Requested Start:	2/1/2024
Mandate:	
Mission Critical:	Yes

Description:
Standard Electronic Data Interchange (EDI) X12 transactions are integral part of DMAS business and are used for processing claims, encounters, payments, eligibility, and member information.
EDI X12 (Electronic Data Interchange) is data format based on ASC X12 standards. It is used to exchange specific data between two or more trading partners.
Center of Medicare and Medicaid Services (CMS) requires DMAS to use these standard transactions when exchanging data with their trading partners that includes Managed Care providers and Fee for Service providers.
At this time the EDI transaction processing is managed using services of the Medicaid Enterprise Systems (MES) Integrator, Fiscal Agent Services (FAS) vendor and DMAS managed EDI compliance software that is hosted on the State's IT infrastructure managed by VITA.
This division of responsibilities creates inefficiencies and it is a risk for DMAS to manage this

infrastructure. The risk is due to lack of knowledgeable resources and an ongoing effort to keep the infrastructure current.

As a part of MES implementation in 2022, DMAS had requested the integrator to propose a comprehensive solution for A-to-Z hosting, management, and support of the EDI processing. Due to time and resource constraints this project was only partially implemented at that time.

This decision package is requesting a onetime funding to support the fully implement this solution. DMAS plans to seek a FFP @90% from CMS for this implementation. The request for General Funds will be 10% of the overall cost.

Enrollment Broker Services

BRT Type:	Business Requirement for Existing Technology
Requested Start:	5/10/2021
Mandate:	
Mission Critical:	Yes

Description:

DMAS 3rd party vendor to walk members through proper plan sign up

Enterprise Applications Migration

BRT Type:	Business Requirement for Existing Technology
Requested Start:	1/1/2024
Mandate:	Yes
Mission Critical:	

Description:

To upgrade agency Enterprise Applications to meet Executive Order #19 as well as improve and consolidate existing technologies and security for our existing applications

Cloud Hosting

In accordance with Executive Order #19, the agency would like to move the current web infrastructure that hosts the DMAS Agency Website, Cover Virginia, HR Web Portal and DocuSign Web Services to the Cloud from VITA on premise. The current infrastructure comprises of two environments, both development and production and is also supported by disaster recovery. Moving our infrastructure to the Microsoft Cloud would enable us to more easily leverage additional applications that the Microsoft

Cloud offers, more easily allow us to promote code changes from our Microsoft Azure DevOps code repository and would add additional layers of redundancy for our public facing websites.

K2 Workflow System Transition

We are looking to transition from our K2 workflow system to the agency's newly upgraded Oracle Apex system. Doing so would require us to migrate and re-develop multiple applications such as our Finance Invoice Application Workflow, our Finance Purchase Requisitions Workflow and our HCD Onboarding system (TOPS). As the web and office automation team does not have experience with the Oracle Apex system, we would be looking for a new FTE position (Role: Info Tech Spec III Pay band 6) with extensive experience to assist with not only the transition and re-development, but with developing and maintaining new applications.

GitHub Azure DevOps Advanced Security

GitHub Advanced Security for Azure DevOps is an application security testing service that is native to the developer workflow. It empowers developer, security, and operations (DevSecOps) teams to prioritize innovation and enhance developer productivity without sacrificing security. This would allow our applications to be scanned at the code level to clearly identify any security vulnerabilities before deployment of an application. At this time, Microsoft is quoting \$50 per developer per month and we are looking for around 10 licenses which equates to around \$6000 per year.

Enterprise Automation / Scheduling Software

To free up manual time consuming tasks, we would like to introduce an Enterprise Automation / Scheduling application such as UiPath (Robotic Process Automation) to carry out and complete tasks across servers such as data migration, scheduling of repetitive server processes and integration of other agency applications. VITA currently offer the UiPath product in their service catalog. Each process that we automate would cost around \$12,000 per year.

Umbraco Upgrade

To secure \$6000 to implement design changes and a content deployment tool pushing updates from development to production environments for the public facing DMAS Agency Website, Cover Virginia and HCD Web Portal.

Enterprise Change Management Solution

BRT Type:	Business Requirement for New Technology
Requested Start:	1/1/2024
Mandate:	
Mission Critical:	
Description:	

An Enterprise Change Management solution is needed so DMAS can implement a single change management system to maintain formal documentation of change requests, stakeholder reviews and approvals, development, testing, and implementation actions for all changes to DMAS applications (including all MES Modules), software, and infrastructure.

Fiscal Agent Services

BRT Type: Business Requirement for Existing Technology

Requested Start: 11/1/2023

Mandate: Yes

Mission Critical: Yes

Description:

DMAS is planning to rebid the current Fiscal Agent Services (FAS). The procurement will include some critical upgrades. FAS is a module within MES and supports Member Management, Plan Management, Claims Processing and Fiscal Agent Services among others. The Department of Medical Assistance Services (DMAS) is responsible for administering the Virginia Medicaid Program. DMAS administers the state Medicaid program using Medicaid Enterprise System (MES). FAS is a component of MES. FAS is a computerized system that DMAS uses to perform claims processing, member management, plan management, financial and budget services, information retrieval, and program management support. FAS serves 1 in 5 Virginians/ 1.9 million members. It is authorized by Title XIX of the Social Security Act. The guidance set forth in CMS 42 CFR Part 433 applies to the Medicaid Management Information System (MMIS) as well as the Medicaid eligibility determination and enrollment activities as set forth in the Affordable Care Act of 2010. DMAS will develop an RFP, which will require VITA review.

Fiscal/ Emp Agent for Consumer Directed Services

BRT Type: Business Requirement for Existing Technology

Requested Start: 9/1/2023

Mandate: Yes

Mission Critical:

Description:

The responsibilities of the Contractor include: 1) pre-employment services including enrolling Medicaid individuals (employers) and their Personal Care Assistants (employees). This includes requesting criminal records check, child abuse and neglect checks, as well as other state and federally required background checks; 2) processing employee Timesheets; 3) deducting, filing, and paying

state and federal income and employment taxes and other withholdings; 4) paying Personal Care Assistants(employees); 5) providing customer service through a Call Center; 6) providing training on F/EA enrollment and payroll processing procedures to Medicaid Individuals, Services Facilitators or designated entity responsible for supporting the Medicaid Individual in managing their Personal Care Assistants, and 7) providing an electronic visit verification (EVV) system compliant with the 21st Century Cures Act for personal care services mandate.

General Provider Auditing Services

BRT Type: Business Requirement for Existing Technology

Requested Start: 6/4/2021

Mandate: Yes

Mission Critical:

Description:

DMAS is planning to select a qualified contractor to perform audits of all DMAS service providers that participate in the Virginia Medicaid program. DMAS provides Medicaid to individuals through two programs: a program utilizing contracted managed care organizations (MCO) and fee-for-service (FFS), which is the standard program for Medicaid and SCHIP (FAMIS). The Contractor shall be responsible for auditing both in-state and out-of-state providers that provide services to both Medicaid and FAMIS

InterQual Software

BRT Type: Business Requirement for Existing Technology

Requested Start: 11/5/2023

Mandate:

Mission Critical:

Description:

InterQual software - DMAS is seeking to purchase a license agreement for products consisting of clinical criteria sets and standards designed to measure medical necessity, appropriate utilization, and quality of care for specific traditional healthcare services. These criteria sets will be used as a screening guideline with respect to medical appropriateness of care for Virginia Medicaid members. DMAS users include OCMO, PO, and Appeals.

Managed Care Contract Re-Procurement (Eclipse)

BRT Type:	Business Requirement for Existing Technology
Requested Start:	7/1/2023
Mandate:	Yes
Mission Critical:	Yes

Description:

DMAS intends to re-procure services provided by Managed Care organizations for administering the Medicaid program managed by the Agency. The procurement will result in multiple awards.

MES Pharmacy Benefit Management - Renewal

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/1/2022
Mandate:	Yes
Mission Critical:	Yes

Description:

This MODIFICATION #5 is entered into pursuant to the provisions of the original contract dated March 21, 2017 and is hereby incorporated into and made an integral part of the original contract # 10035 for a Pharmacy Benefit Management Solution that was awarded to Magellan Medicaid Administration, Inc.

Non-Emergency Medical Transportation (NEMT)

BRT Type:	Business Requirement for Existing Technology
Requested Start:	1/1/2024
Mandate:	Yes
Mission Critical:	

Description:

Overall objective of ensuring eligible members receive high quality, appropriate, safe, and cost-effective Non Emergency Medical Transport (NEMT) services. The solution must provide an effective and highly efficient operation that takes advantage of technology; reduces the administrative burden on NEMT providers, facilities, other service providers, and members; and provides flexible operations

that will allow the State to react to program changes in a timely manner; This is ~\$80M of transportation services over the course of the contract, but... If any vendor other than the incumbent wins the RFP competition, there may be an effort to stand up the new service. If the incumbent wins, it will be mostly a non-event. This is not an "IT System" but the winning vendor will provide some sort of website or app whereby beneficiaries can get the transportation they need. At the very least, there is some PII that needs to be safeguarded.

Oracle Cloud Migration

BRT Type:	Business Requirement for New Technology
Requested Start:	1/1/2024
Mandate:	Yes
Mission Critical:	

Description:

Migrate Oracle Applications to Oracle Cloud Infrastructure
 EO19 directs the movement of applications servers to the cloud, as well as improve and consolidate existing technologies and security for existing applications. Currently the DMAS Oracle applications and databases are housed at the QTS data center on Oracle Private Cloud Appliances. Moving to the Oracle Cloud Infrastructure will allow DMAS to reduce its annual Oracle licensing and support fees by approximately one half and realize additional features such as Advanced Security Options. The elimination of the Oracle PCA servers at QTS will also result in some cost reductions.

Patient Access and Interoperability (PAI)

BRT Type:	Business Requirement for New Technology
Requested Start:	1/1/2024
Mandate:	Yes
Mission Critical:	

Description:

The CMS Interoperability and Patient Access Final Rule operationalize the interoperability provisions of the Cures Act, with the goal of promoting seamless movement of patient information between payers, providers and patients.

To reduce the barriers that impede the efficient exchange of patient health information, the rule will require healthcare payers regulated by DHHS to develop and implement several provisions. The following three provisions will have the greatest impact on DMAS:

1. A Patient Access Application Programming Interface (API) that allows patients to easily access

their claims, encounter, and clinical information through third-party applications of their choice available on home laptops, tablets, and smartphones.

2. A Provider Directory API to make provider directory information publicly available to help patients find providers for care and treatment.

3. A Payer-to-Payer Data Exchange to exchange certain patient clinical data at the patient's request, allowing the patient to take their information with them as they move from payer to payer. DMAS will conduct an RFP for this procurement. Depending on the RFP response, DMAS has initiate a project for this.

Printing, Mailing, and Distribution Services

BRT Type: Business Requirement for Existing Technology

Requested Start: 10/1/2023

Mandate:

Mission Critical: Yes

Description:

DMAS needs to re-bid the Printing, Mailing, and Distribution Services. The current contract expires on 06/30/24, The services supports all of MES/MMIS mailing requirements.

PRSS - Provider Services Solution

BRT Type: Business Requirement for Existing Technology

Requested Start: 12/1/2023

Mandate: Yes

Mission Critical: Yes

Description:

PRSS is the MES module that provider enrollment and maintenance functions for provider services. Applicable contract modifications and renewals.

SAS - Migration to Cloud

BRT Type: Business Requirement for New Technology

Requested Start: 1/1/2024

Mandate:	Yes
Mission Critical:	
Description:	
This request is for the SAS VIYA analysis application and accompanying services required for transitioning from a server-based platform to a cloud-based platform, as mandated by VITA Executive Order 1089.	
Security	
BRT Type:	Business Requirement for Existing Technology
Requested Start:	1/1/2024
Mandate:	
Mission Critical:	
Description:	
2024 Security Updates	
Testing Tools	
BRT Type:	Business Requirement for New Technology
Requested Start:	1/1/2024
Mandate:	
Mission Critical:	
Description:	
DMAS IM Team request to provision a Test Management Tool. The tool will serve as a repository to save all testing related artifacts.	
TPL Case Tracking	
BRT Type:	Business Requirement for New Technology
Requested	10/3/2022

Start:	
Mandate:	
Mission Critical:	
Description:	
DMAS is seeking to implement a (Third Party Liability) TPL tracking solution to automate the process for intake of Liens and their case management.	

Commonwealth Projects >= \$250,000.00

Agency:	602 Department of Medical Assistance Services
Date:	11/9/2023

Medicaid Dental Program

Category 4 Project Initiation Approval

The objective of the project is simply to implement the new Dental services solution by July 1, 2023. Implied with that objective is to ensure continuity of service during the implementation phase and seamlessly integrate with the Medicaid Enterprise System (MES) solution. Specifically, MES integration includes establishing API-based data exchange with Provider Management Services and Encounter Processing Services.

The winning vendor will provide Project Management resources and services for the implementation. DMAS will also have a project manager who will work in concert with the vendor PM to accomplish all activities and deliverables required to ensure a successful project, such as training and organizational change management. The project is complete when the new Dental Services solution is implemented; ongoing operations is out of scope for the project.

Project Start Date	9/30/2020	Project End Date	11/30/2023
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$2,588,449.75	\$1,165,349.22	\$1,165,349.37
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

Medicaid Dental Program - Procurement

Service Authorization and Specialty Services

Category 4 Project Initiation Approval

This project is to implement the Service Authorization Services for DMAS. This replaces the existing solution and combines both FFS and BHSA Service Authorizations. This is an existing and will continue to be an outsourced business function.

Project Start Date	10/1/2020	Project End	12/31/2023
--------------------	-----------	-------------	------------

		Date	
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$494,428.00	\$250,000.00	\$400,000.00
Estimated first year of biennium:	\$250,000.00	\$50,000.00	\$200,000.00
Estimated second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

There are no procurements for this project

TPL Tracking Solution			
Category 3		Investment Business Case Approval	
(Third Party Liability) TPL Tracking Solution would provide efficiency and automation to an existing manual process for tracking LIENS requests and communications with OAG and Citizens.			
DMAS will engage with Salesforce with Incapsulate to design, configure and implement and integrate the COTS intake solution. Rather than a traditional waterfall methodology, the implementation will follow an Agile/Waterfall Hybrid, with phased functionality being introduced into production over time.			
Project Start Date	11/15/2022	Project End Date	9/29/2023
Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	\$700,000.00		
Estimated first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

There are no procurements for this project

Commonwealth Procurements >= \$250,000.00

Agency:	602 Department of Medical Assistance Services
Date:	11/9/2023
Stand Alone Procurements:	
Procurement Name:	Active Shooter Detection System Procurement
Procurement Date	5/15/2020
Procurement Description:	<p>Hardware, software and infrastructure to implement and operate a system that detects a gunshot and indicates approximately where the gunshot occurred. Depending on the solution, it may also automatically send out an emergency message to first responders and/or people in the building.</p> <p>The VITA procurement will result in a VITA enterprise contract from which all agencies can write an SOW. DMAS is the lead agency and intends to write an SOW for implementing the solution and 4-5 of operation.</p>
Procurement Name:	Enrollment Broker Services - Procurement
Procurement Date	11/1/2028

<p>Procurement Description:</p>	<p>High Level: Replace DMAS 3rd party vendor to walk members through proper plan sign up</p> <p>Competitive RFP (4yr contract plus 3 optional years)</p> <p>The Department of Medical Assistance Services (DMAS) is soliciting proposals from qualified firms for the education and enrollment of Medicaid eligible members into the Virginia Medicaid mandatory and voluntary Managed Care Programs. Duties of the Supplier shall include operating as the department's Enrollment Broker (EB), along with other enrollment related activities. The selected EB will operate a statewide call center providing managed care education and MCO choices and quality driven customcustomer service, update and maintain the Virginia Managed Care and Commonwealth Coordinated Care Plus (CCCP) web sites with ready access to information 24/7; conducting health status assessment surveys on newly enrolled managed care members; call monitoring, tracking and reporting telephone statistics in support of contract performance and quality standards; creation and revision of MCO comparison charts; and resolution of eligibility, enrollment and complaints.</p> <p>CMS Requirement</p>
<p>Procurement Name:</p>	<p>EQRO (External Quality Review Org) - Procurement</p>
<p>Procurement Date</p>	<p>1/30/2026</p>
<p>Procurement Description:</p>	<p>Health Services Advisory Group, Inc. (HSAG) HSAG is an existing vendor - Independent contractor to review quality activities (EQRO). Work is mainly around federal reporting, provide an overview of quality activities. Vendor will do reporting on DMAS behalf and work with Managed Care Organizations (MCOs). Current contract ends 31 Jan 2022 and needs to be renewed through Bidding Process. The contract is for 8 years of which 4 years is core.</p> <p>This is a Center for Medicaid Services (CMS) requirement and DMAS will conduct an RFP.</p>
<p>Procurement Name:</p>	<p>Fiscal Agent Services (FAS) & MMIS - Rebid</p>
<p>Procurement Date</p>	<p>12/1/2022</p>
<p>Procurement Description:</p>	<p>DMAS is planning to rebid and takeover the current Fiscal Agent Services (FAS) from Conduent. The procurement can include some critical upgrades. FAS is a module within MES and supports Member Management, Plan Management, Claims Processing and Fiscal Agent Services among others.</p> <p>VAMMIS is the Virginia Medicaid Management Information System. The Department</p>

	<p>of Medical Assistance Services(DMAS) is responsible for administering the Virginia Medicaid Program. DMAS administers the state Medicaid program using VAMMIS.</p> <p>VAMMIS is a computerized system that DMAS uses to perform claims processing, information retrieval, and program management support. DMAS contracts with Conduent to maintain the Virginia Medicaid Management InformationSystem (VAMMIS) and perform provider enrollment and claims processing services.</p> <p>VAMMIS serves 1 in 5 Virginians/ 1.9 million members. It is authorized by Title XIX of the Social Security Act. The guidance set forth in CMS 42 CFR Part 433 applies to the Medicaid Management Information System (MMIS) as well as the Medicaid eligibility determination and enrollment activities as set forth in the Affordable Care Act of 2010.</p> <p>VAMMIS is hosted on Conduent’s IBM Mainframe server. The database production system servers that the VAMMIS program utilizes are located at a hardened data center in East Windsor, NJ and FIS's Little Rock, AR Data Center. TheVAMMIS mainframe platform is located at FIS in Little Rock, Arkansas.</p> <p>DMAS will develop an RFP, which will require VITA review.</p>
--	---

Procurement Name:	Fiscal Agent Services - Rebid 2024
-------------------	------------------------------------

Procurement Date	9/20/2036
------------------	-----------

Procurement Description:	<p>DMAS is planning to rebid the current Fiscal Agent Services (FAS). The procurement will include some critical upgrades. FAS is a module within MES and supports Member Management, Plan Management, Claims Processing and Fiscal Agent Services among others. The Department of Medical Assistance Services (DMAS) is responsible for administering the Virginia Medicaid Program. DMAS administers the state Medicaid program using Medicaid Enterprise System (MES). FAS is a component of MES. FAS is a computerized system that DMAS uses to perform claims processing, member management, plan management, financial and budget services, information retrieval, and program management support. FAS serves 1 in 5 Virginians/ 1.9 million members. It is authorized by Title XIX of the Social Security Act. The guidance set forth in CMS 42 CFR Part 433 applies to the Medicaid Management Information System (MMIS) as well as the Medicaid eligibility determination and enrollment activities as set forth in the Affordable Care Act of 2010. DMAS will develop an RFP, which will require VITA review.</p>
--------------------------	---

Procurement Name:	Fiscal/ Emp Agent for Consumer Directed Services
-------------------	--

Procurement Date	12/30/2023
------------------	------------

Procurement	The responsibilities of the Contractor include: 1) pre- employment services including
-------------	---

Description:	enrolling Medicaid individuals (employers) and their Personal Care Assistants (employees). This includes requesting criminal records check, child abuse and neglect checks, as well as other state and federally required background checks; 2) processing employee Timesheets; 3) deducting, filing, and paying state and federal income and employment taxes and other withholdings; 4) paying Personal Care Assistants(employees); 5) providing customer service through a Call Center; 6) providing training on F/EA enrollment and payroll processing procedures to Medicaid Individuals, Services Facilitators or designated entity responsible for supporting the Medicaid Individual in managing their Personal Care Assistants, and 7) providing an electronic visit verification (EVV) system compliant with the 21st Century Cures Act for personal care services mandate.
Procurement Name:	Managed Care Contract Re-Procurement (Eclipse)
Procurement Date	1/31/2024
Procurement Description:	<p>DMAS intends to re-procure services provided by Managed Care organizations for administering the Medicaid program managed by the Agency. The procurement will result in multiple awards.</p> <p>The Virginia Medicaid agency will hire nationally recognized consultants with expertise in the managed care field to assist in drafting the request for proposals. The agency also plans to seek input from the General Assembly, Medicaid members, health care providers, other state agency representatives and community stakeholders on the design of the new managed care program.</p> <p>This is a zero cost procurement. This investment has been added to the IT Portfolio to ensure appropriate reviews of the IT components. IT components consist of RFP review, contract reviews, ECOS reviews, etc.</p>
Procurement Name:	Medicaid Dental Program - Procurement
Procurement Date	12/1/2020
Procurement Description:	Competitive procurement for replacement Medicaid Dental vendor. This PGR was previously approved by the CIO on October 2, 2020 with PGR number 20-142 for 49 million. This is to update the reviews and approval due to age.
Procurement Name:	Printing, Mailing, and Distribution Services
Procurement Date	2/29/2024
Procurement Description:	DMAS needs to re-bid the Printing, Mailing, and Distribution Services. The current contract expires on 06/30/24, The services supports all of MES/MMIS mailing

requirements.

DMAS will conduct an RFP for this.