



Advance Planning Document

A Plan to Modernize DDS IT Systems Supporting HCBS Waivers

Department of Developmental Services

December 20, 2010

Advance Planning Document

What is an Advance Planning Document or APD?

Formal request filed with Centers for Medicaid and Medicare Services (CMS) for enhanced reimbursement of funding to modernize a state's IT systems that support HCBS Waiver operations. DDS would be eligible to receive up to:

- 90% Federal reimbursement for development (equipment and personnel)
- 75% Federal reimbursement for ongoing maintenance
- 50% Federal reimbursement for administration

APDs require permission from The Office of Policy and Management (OPM)

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An APD consists of two applications—a Planning APD (PAPD) and an Implementation APD (IAPD) application that describe:

Desired IT application modules to be included

Underlying technical architecture they will operate within

Integration points among the various application modules

Interface with DDS private providers

All associated costs

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The overall APD process –*DDS Application Integration Project (AIP)*—will be divided into four phases:

Phase 1: Development of the Planning Advanced Planning Document (PAPD) describes in high level terms the desired integrated application environment DDS is planning. The PAPD will be submitted to CMS and, if approved, will require the subsequent development and submission of a more detailed IAPD.

Phase 2: Development of the Implementation Advanced Planning Document (IAPD) describes more fully the technical development of the various applications and their interfaces within the department's IT architecture; discusses exploration and evaluation of alternative IT solutions to address DDS's needs; and provides extensive cost benefit analyses of the selected IT solution. The IAPD will be submitted to CMS and, if approved, will require the development and submission to CMS of a RFP to secure the Technical Vendor developer for the AIP.

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Phase 3: Technical Vendor RFP will be issued if the IAPD is approved by CMS and the funding requirements once proposed, are approved by OPM. The issuance of the RFP will require closely coordinated work with CMS, CT Department of Information Technology (DOIT) and OPM to develop and issue the Technical Vendor RFP, including development of criteria to evaluate potential Technical Vendors. Also included in this phase are RFP review, rating and selection of a Technical Vendor, as well as vendor contract development and negotiation.

Phase 4: Implementation of the DDS AIP will include all application development, testing, deployment, debugging, independent validation, verification and quality oversight throughout design, development and implementation of the AIP.

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DDS will secure the services of a project management consultant with APD and IT expertise who will be available throughout the life cycle of this project. The initial request is for Phases 1 & 2, and if necessary, CMS and OPM approvals and funding are secured at the end of Phase 2, DDS will seek additional consultant services for Phases 3 & 4.

The timeline for this project is multi-year. Phases 1 & 2 are expected to be completed by July 2011 and Phase 3 by January 2012. Phase 4 Implementation (i.e. application development) occurs over several years and will address various applications modules in priority order.

Advance Planning Document

Ongoing Communication

APD Steering Committee

Legislative Rate Study Committee Report

Trades

Regional Leadership Forums

Executive Briefs

Provider Council

Webcast

Families and consumers

Business Drivers

Meet CMS Waiver Assurances

Reduce/Eliminate Redundant Data Entry

Applications follow DDS Business Workflow

Increase Efficiency Through Improved Technology and Integration

Improve Access to Information for all DDS Stakeholders

- DDS Staff
- Providers
- Consumers
- Families

Universal Features Envisioned For All Applications

Secure Web-based Applications All applications will be web-based, i.e., accessible to all authorized users through a secure internet connection.

Integrated Applications All applications will be integrated so that data generated and updated in one application will automatically populate and be utilized by all other relevant applications. Historical records will maintained and archived.

HIPAA secure environment All applications and communication between and among authorized users will take place in a secure web based environment via a username and password. This will eliminate the need for the Tumbleweed solution for regular business users.

Role-based Access (DDS, private provider, families and consumers, other business associates) DDS staff, provider staff, families and consumers, as well as other business associates, as applicable, will have access only to the applications and only for those consumers and data that has been administratively authorized as appropriate based on their role and business function.

Universal Features Envisioned For All Applications

Search Functionality All applications will feature a search function by individual DDS # or consumer name, as well as aggregate “caseload or equivalent.” This will also accommodate searching for Providers and their related programs and services. Consumer data will be associated with Providers, services and service locations.

Notification All applications will have a notification feature in which designated users are notified of critical information based on their role and function within each application. This will enable users to prepare for and/or respond to work issues within their area of responsibility.

Issues Tracking, Remediation and Verification All applications will have an issues tracking feature as deemed appropriate to the application function, will provide a means to develop remediation plans to open issues, and track and verify completion of remediation for individual issues and aggregation of data.

Universal Features Envisioned For All Applications

Document Management The Application Integration Project will also feature document management services, i.e., role based access to scanned and electronically stored and cataloged documents, such as consumer evaluations and clinical reports.

Reports Management All applications will be further enhanced by standard report functions for each individual application and cross functionally with other applications in this integrated system. The integrated nature of this IT system will allow for production of reports across various data sets without the need to create separate downloads from various data bases. This will also include the ability to create ad hoc reports as needed and may include data extracts for Provider use. All reports will be produced as pdf files which can be saved and emailed.

Integrated Application Environment

DDS Integrated Application Environment Future Vision to Support HCBS Waiver

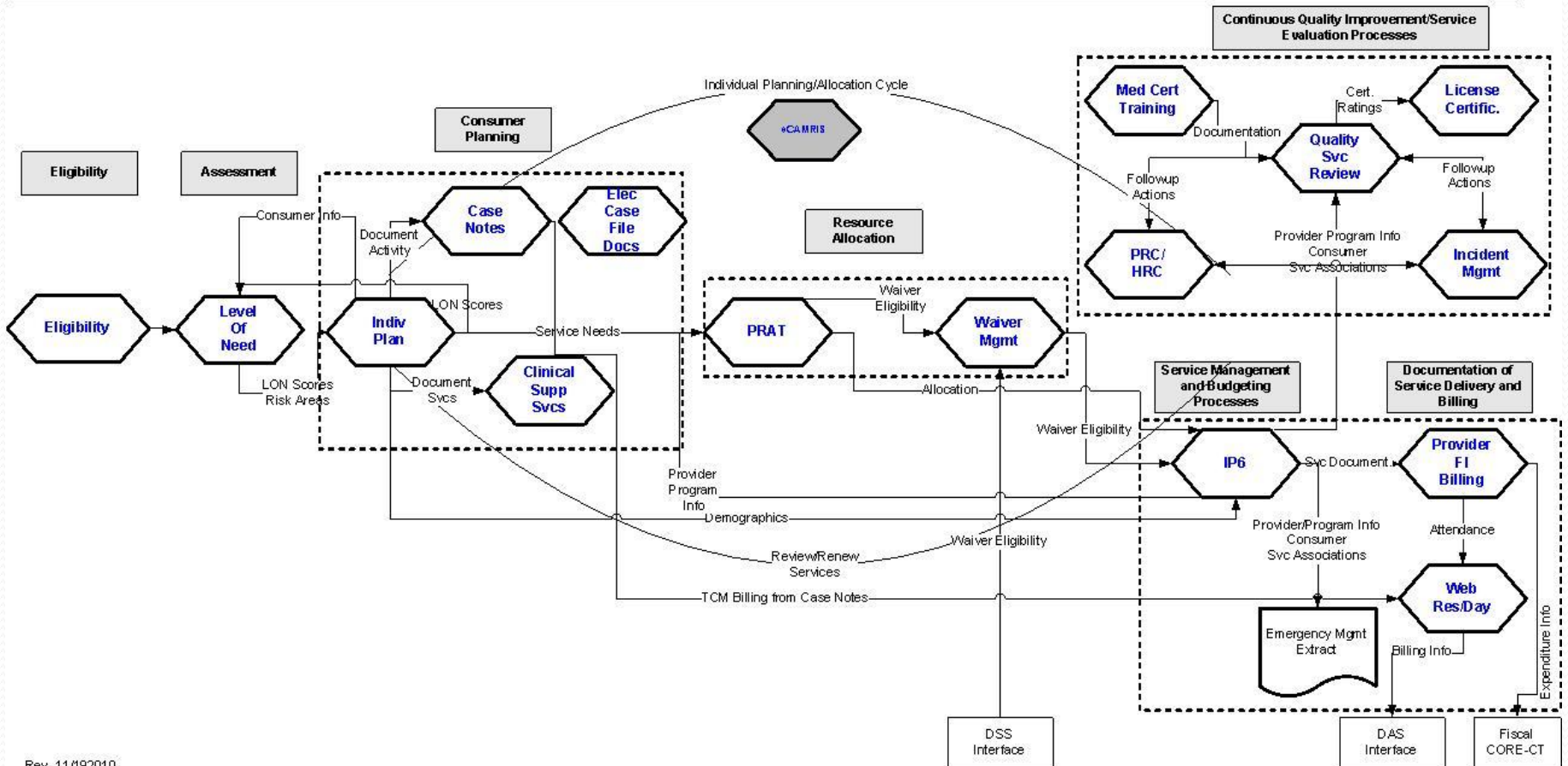
November 2010

Universal Features

Integrated Applications
Role-Based Access
(DDS, Providers, Consumers, Families)

Secure Web-Based Applications
HIPAA Secure Environment
Search Functionality

Issue Notification/Remediation
Document Management
Reports Management



Application Overview

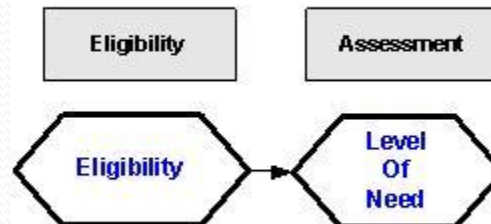
All applications will operate within the existing DDS IT architecture and universal application features.

DDS Client Eligibility

Eligibility database tracks eligibility application status, decisions, and appeals.

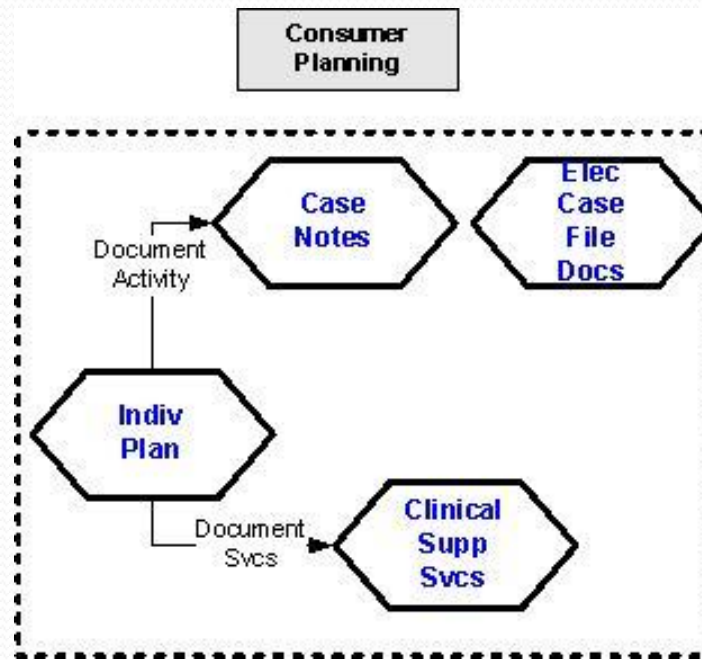
Assessment

Level of Need (LON) database to conduct LON assessments for determination of consumer level of supports based on individual need. Identifies risk areas for planning and serves as basis for resource allocation.



Application Overview

Consumer Planning



Application Overview

Consumer Planning

Individual Planning (IP) electronic record for DDS consumers' individual plan goals, objectives, action plans, and periodic reviews.

Clinical Support Services electronic record for DDS consumers' health and behavior support plans.

Case Notes database for case manager, nurse and behavior support staff case notes.

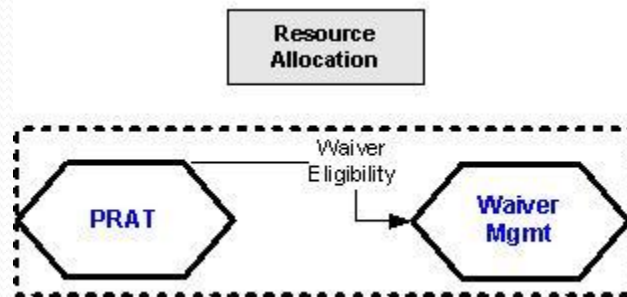
Electronic Case File electronic file of consumers' various documents, evaluations, reports, etc., that are scanned and cataloged into system replacing current paper case record.

Application Overview

Resource Allocation

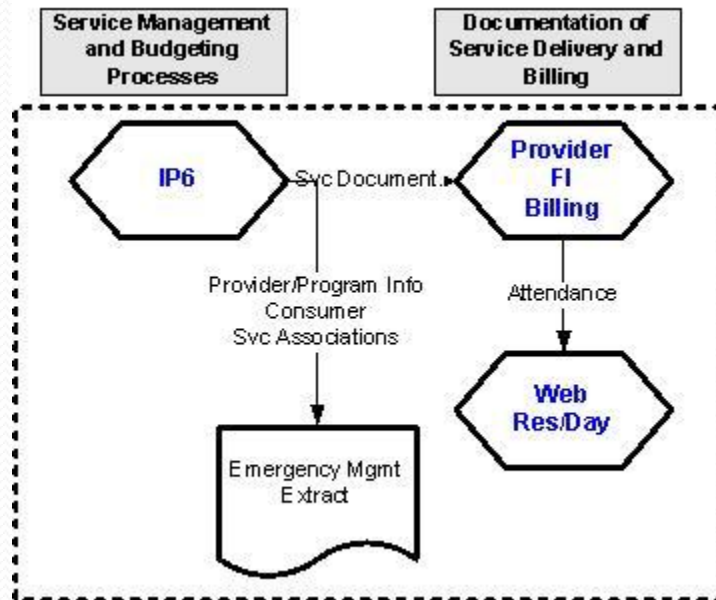
Planning and Resource Allocation (PRAT) database tracks and calculates individual resource allocation based on LON score. Service allocation functions apply to requests for both new and additional services

Waiver Management database tracks waiver enrollment of DDS consumers and monitors enrollment status including annual renewal of eligibility.



Application Overview

Service Management and Budgeting



Application Overview

Service Management and Budgeting

IP-6 database for section 6 (the budget/service description) of the Individual Plan to automate the overall budgeting function based on individual consumer allocations for approved services. It will allow case managers to develop budgets and any subsequent modifications based on changing needs specified in the consumer's IP, authorize services, and manage ongoing expenditures of the approved budget. The application will track consumer placements/services not funded by DDS.

Also included are features a service management function consisting of a master catalog of available services and providers who are qualified to provide these services.

Application Overview

Documentation of Service Delivery and Billing

Web Res/Day database to automate billing information on services delivered and document the delivery of those services (scope, type, frequency and duration) within the budgeted funds and service units. Application will provide a means to reconcile a consumer's allocated services with actual delivery and show progress towards meeting identified IP goals.

Fiscal Intermediary (FI) billing data are also included in the application.

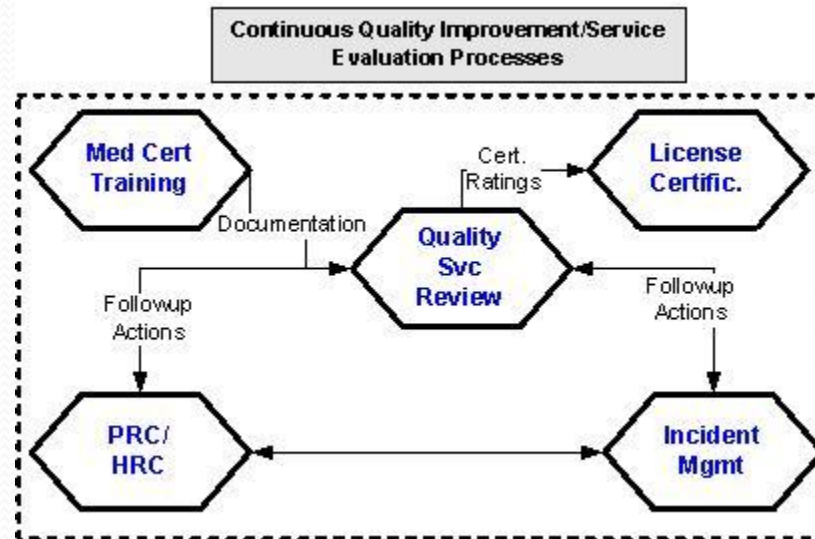
Application Overview

Emergency Management

Will continue to be an up-to-date database that is extracted from the data “warehouse” and is available off-line, in the event the web/network system is not functioning during an emergency event.

Application Overview

Continuous Quality Improvement/Service Evaluation Processes



Application Overview

Continuous Quality Improvement/Service Evaluation Processes

Medication Administration Certification database tracks certification and re-certification status of all public and private personnel certified to administer medications as well as status of trained non-licensed staff.

Quality Service Review (QSR) database to schedule and conduct quality reviews of consumers' services at individual and provider levels. Includes ability to remediate/follow up on quality indicators that are not met and close open issues. QSR serves as the basis for provider certification.

Licensing and Certification database to track licensing/certification status for all providers.

PRC/HRC (Program Review/Human Rights) database to track status of Program Review/Human Rights approvals, qualifications, periodic reviews, Tardive Dyskinesia screenings.

Incident Management database for dispersed incident data entry; development and tracking of follow-up action plans. Includes all categories of incidents—critical incidents, abuse neglect, and death reporting.

Next Steps

Ongoing communication

- Legislative Rate Study Committee Report
- Regional Leadership Forums
- Executive Briefs
- Provider Council
- Trades

Hire and orient Project Management consultant

Meetings with DSS-MMIS staff

Preliminary discussion with CMS

Draft PAPD

More information...

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