

Information Technology Capital Investment Program  
Project Status Report

---

**To:** Information Technology Strategy and Investment Committee  
John Vittner, Office of Policy and Management

**From:** Michael Gilbert

**Email:** mike.gilbert@ct.gov

**Agency:** Department of Social Services

**Project:** Balanced Incentive Program (BIP)

**Project Manager:** Dawn Lambert

**Reporting Period:** Project Inception through 06/30/2018

**Total Funds Requested:** \$1,114,726

**Total Funds Allotted to Agency:** \$1,114,726

**Accumulative Total Capital Fund Expenditures to Date:** \$1,114,726

**Brief Project Description/Summary:**

The Balancing Incentive Program – Automation of Long Term Services and Supports No Wrong Door and Universal Assessment (BIP Project) will streamline the process through which individuals who need Long Term Services and Supports (LTSS) apply for and receive those services, resulting in improved access to community-based, as opposed to, nursing facility care. LTSS are services and supports that help people with functional limitations care for themselves, providing help with things like bathing, dressing, eating, preparing meals, managing medications, walking, housework, and managing finances.

**Summary of Progress Achieved to Date:**

As originally envisioned, the CT Balancing Incentive Program (BIP) had three releases planned over a duration of 20 months.

1. Release 1 – Implemented July 1, 2015 – This release included implementation of an interim Universal Assessment Tool (UA) solution that can be utilized by select members of the BIP community.

The automated UA is being used by the MFP demonstration and the new Community First Choice (CFC) State Plan program. Budget allocations have been developed for CFC. Data from the automated UA has been collected over the first six months and will be analyzed to determine whether or not the current budget allocations are accurate for the CFC program.

1. Release 2 – TBD – The original vision for this release included implementation of the full Universal Assessment Tool solution along with additional system features including tasks and notifications, pre-screen, integration with Long Term Supports and Services (LTSS) websites and financial assessment. Only Release 2 Design activities were a part of the original Deloitte Statement of Work (SOW).
3. Release 3 – TBD – The original vision for this release included implementation of information dashboards and reports for BIP stakeholders along with information exchange from BIP system to current agency systems. The implementation of this Release was not part of the original or subsequent Deloitte SOW.

Due to the delays associated with the deployment of Release 1 and the desire by DSS leadership to re-examine the BIP initiative across releases, further design, development and implementation (DDI) work associated with Release 2 and 3 was placed on hold pending the re-evaluation of scope, vision, and approach. Some of the concerns include coordinating schedules and responsibilities across multiple projects and funding sources, configuration for provider and partner agency systems to communicate with BIP, integration with the current DDI work associated with the Personal Health Record (PHR) system, EMPI and ImpaCT, and the need for a comprehensive way to plan and track DSS-owned activities across BIP components.

DSS leadership continues to work with partner agencies to confirm the approach and timelines for continuation of the BIP initiative. In addition, DSS is working to identify vendors and key personnel for the further system enhancements based on the skill sets required. Lastly, DSS has completed initial work to solicit and document high-level requirements and process flows from five of Connecticut's Health and Human Agencies (Tier 4 Agencies) in order to determine their eligibility and intake requirements. In addition, the Department is currently initiating a full Medicaid Information Technology Assessment (MITA) review which will also help define the appropriate plan for prospective efforts. DSS plans to review the foundational work derived from these efforts in order to determine the feasibility of including BIP within the scope of future efforts. As this longer term MITA solution evolves, the Department is undertaking a few additional adjustments to the existing system to enhance its current functionality pending the broader review.

**6/30/17 Update:**

Updates are nearing completion and the Universal Assessment phase of the system will be fully operational as of 8/7/17. No further IT Capital Investment payments are expected and the project will be complete at that time. Any future work will be completed under the department's Medicaid enterprise solution.

**12/31/17 Update:**

The project is moving to maintenance and operations shortly and this project will be closed in the next submission. We will be developing a close out report for submission to CMS over the coming months.

**6/30/18 Update:**

The CMS close out report is still under development. The IT Capital Investment Fund close out will be completed subsequent to that submission.

**Issues and Risks:**

Work on Release 2 as originally planned and Release 3 has been paused pending a review of the project vision, scope, and approach. Release 2 as originally planned contains many components (Automated Prescreen, Automated Universal Application, Enhanced Universal Assessment, Worker Portal for the No Wrong Door, Consumer Portal for the No Wrong Door, Consumer Profile, Data Services, Reporting, and Supporting Functions). Given the complexity of the system and its integral relationship with ImpaCT, it is critical to look at the various implementation options, including a phased in approach for the different components of BIP. This has the potential to drastically move the timeline of the project.

The delay in the ImpaCT project from August 2015 to the fall of 2016 directly impacts the BIP system timeline due to the integrated nature of the systems. A new timeline will be developed for integration with ImpaCT. ImpaCT is a hugely complicated system, servicing hundreds of thousands of consumers. Its implementation and roll out may take months from the initial implementation to state-wide implementation and resolution of the initial system problems.

The effect of the BIP system on the existing technology of the partner agency systems could exceed original estimates.

**12/31/17 Update:**

No further risks exist and the project is entering the maintenance and operations phase.

**6/30/18 Update:**

No change.

**Next Steps & Project Milestones:**

The Department is still reviewing options for implementation of many of the technology aspects of this project, including the option of including many of the BIP components into the planned "Tier IV" phase of the technology modernization. The next step is for the Project Management Office and project team to review the BIP project vision and scope and determine how it will fit in with the Department's other technology initiatives and Tier IV.

**6/30/17 Update:**

Updates are nearing completion and the Universal Assessment phase of the system will be fully operational as of 8/7/17. No further IT Capital Investment payments are expected and the project will be complete at that time. Any future work will be completed under the department's Medicaid enterprise solution

**12/31/17 Update:**

The project is moving to maintenance and operations shortly and this project will be closed in the next submission.

**6/30/18 Update:**

No change.