

Information Technology Capital Investment Program
Project Status Report

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

From: Vance Dean, IT Director DSS / Mike Gilbert, Finance Director, DSS

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Agency: Department of Social Services

Project: ImpaCT System - Integrated Eligibility Project

Project Manager: Shan Jeffreys/Tyler Nardine

Reporting Period: Project Inception through 12/31/2018

Total Funds Requested: \$54,700,480

Total Funds Allotted to Agency: \$54,700,480

Accumulative Total Capital Fund Expenditures to Date: \$45,803,911

Brief Project Description/Summary:

The Department of Social Services Integrated Eligibility System project will replace the Department's existing 26-year-old Eligibility Management System (EMS). The integrated eligibility platform, once designed, developed, and implemented, will provide a seamless eligibility and enrollment process for Medicaid, CHIP and the CTHIX, and will ultimately be used to determine eligibility for other social service programs (e.g., SNAP, TFA). Specifically, the planned integrated eligibility function will initially address federal requirements for eligibility determinations for advance premium tax credits and reduced cost sharing through the Exchange, MAGI-based eligibility for Medicaid, complete individual responsibility exemption determinations, and coordinate enrollment. This project was divided into Tiers. Tier 1 was standing up the Access Health CT client and worker portals to handle eligibility and enrollment for MAGI Medicaid, MAGI CHIP, QHP, and APTC. Tiers 2 and 3 are directly related to replacing DSS' legacy eligibility system known as EMS. Tier 4 will utilize the existing infrastructure and platforms built in Tiers 1-3 to integrate other CT HHS agencies to achieve an enterprise solution.

Summary of Progress Achieved to Date:

DSS, BEST, and Access Health CT have been working with the Systems Integrator, Deloitte, to continue Tier 1 deployments to extend and refine current functionality and ready the software for integration with Tier 2 and Tier 3 functionality. There have been a number of deployments throughout the first half of 2016, including a March 4, 2016 release to further automate Adult FMAP determinations, include Transitional Medical Assistance (TMA) functionality, implement an Enterprise Master Person Index (EMPI), and to develop much of the functionality required for the integration with Tiers 2 and 3. Another release was deployed in June, 2016 to enhance the system's core legal notice and to leverage concepts and language from the CMS model notices.

Tiers 2 and 3 work, the eligibility system replacement known as ImpaCT, is currently in the implementation phase. There are multiple State teams, Trading Partners, and vendors working in conjunction with Deloitte to design, develop, test, and deploy the ImpaCT system. Significant progress has been realized in the past 6 months including approval of multiple business and technical deliverables and the completion of several key milestones related to Design, Development, Testing, and Training. Specifically, this has included completing the final Business Systems Design and near-completion of all original and extended Design activities, the review and approval of numerous Security deliverables required for Pilot, the successful completion of many environment builds, and the completion of the majority of system development activities. Currently, the team is also nearing completion of the first-pass of User Acceptance Testing (UAT) and is approaching the completion of Conversion testing activities. Further, the training team has approved the Training curriculum, completed the revised Implementation Plan, and completed train-the-trainer activities. Interface testing is planned to conclude in August and the team is preparing for a mock run of system functionality. Below is a brief overview of the current areas of focus including conversion, interfaces, and testing. Conversion Integration Testing (CIT) is expected to conclude by early August. The team is nearing completion of CIT Phase 2 testing and is finalizing validation of penalty data, along with the Case Merge Request Functionality. For CIT Phase 3 the team is finalizing work related to Day Zero interfaces, Interim conversion, and Renewals. Conversion testing will be completed by Mid-August.

Interface Integration Testing (IIT) is also in progress and targeted to complete in August. The team continues to identify mitigation strategies to address challenges with scenario execution and defect remediation. They are progressing with test preparation and data set-up for the remaining interfaces and are developing the EMS changes and infrastructure enhancements necessary to complete the automated end-to-end connectivity testing between ImpaCT/EMS and the Trading Partners.

The UAT team is focused on completing the execution of scenarios for all code received by July 31st. Currently, 99% over 6,600 scenarios have been executed with a pass rate of 93%. Defect remediation will continue through the month of August as will testing with Converted data and regression testing. Defects are prioritized and reviewed on a weekly basis.

A critical goal of DSS is to improve health and well-being of Connecticut's low income and disadvantaged populations by making it easy for individual clients and families to be enrolled in the most appropriate and advantageous HHS programs. As we move to a technology solution that will assist DSS to meet this need, it is equally important that we ensure that the solution is well designed, tested, and is operational. Therefore, the ImpaCT team works closely with CMS leadership and reports to the Executive Steering Committee (ESC) on a frequent basis with regard to status and performance. The ImpaCT team also submits weekly updates to our Federal Partners at CMS & FNS and is currently working with an Independent Verification and Validation (IV&V) vendor to secure additional oversight. Operationally the team has an active risk management process in place and monitors the work plan on a weekly basis to prioritize work, make decisions, and keep forward progress on track to go live with Pilot on October 11th.

December 2016 Update:

The ImpaCT team successfully deployed the ImpaCT system on 10/11/2016 as planned. To date, there have been 12 builds to the ImpaCT system to address defects and required changes. Manual efforts and resources remain required across several areas; drawing on resources needed for Wave 1. This has led to Wave 1 being pushed back from January to February, however, there is limited downstream impact on additional waves given Wave 2 was originally planned March. There are also system challenges leading to a high volume of daily Database Change Requests (DCRs) as captured in Issue CTIE-60320, and a number of open High defects. There also remains additional work regarding the disposition of converted cases per Risk CTIE-58370. The push back of Wave 1 will allow additional time for the teams continue to address these areas.

June 2017 Update:

Tiers 2 and 3 work, the eligibility system replacement known as ImpaCT, is currently in the final stages of the implementation phase. There are multiple State teams, Trading Partners, and vendors working in conjunction with Deloitte to deploy the ImpaCT system. The ImpaCT project schedule was adjusted from the original plan to allow optimization of system performance, to separate phases to better disperse benefit centers, and to allow sufficient system stabilization between deployment waves. Significant progress has been realized in the past year including the deployment of ImpaCT in all DSS offices. Specifically, this has included deployment of the ImpaCT Pilot in the Middletown office in October 2016, Wave 1 in Stamford and Torrington in February 2017, Wave 2 in Hartford and Danbury in March, Wave 3 in New Britain, Manchester and Willimantic in April, Wave 4 in Norwich and Waterbury in June, Wave 5 in Bridgeport in July, and Wave 6 in New Haven in August. To date, there have been 1,019,446 clients converted from EMS to ImpaCT and there are 116,104 unconverted clients remaining in EMS following statewide implementation.

Some interfaces components remain outstanding. Thirty-three post-pilot interfaces were originally scheduled during the re-alignment to be deployed to production in April, but incremental deliveries were required to complete all post pilot interfaces. In addition, some Change Requests will be re-planned for post statewide deployment. Performance tuning and optimization were performed during the months of June and July, and have had a positive effect on batch run times as the ImpaCT caseload has increased with each Wave deployment. Performance monitoring will continue through project completion. The team has also prioritized the identification, triage, and fixing of defects through ongoing minor releases deployed in between the Waves.

The ImpaCT project has been highlighted in several best practice presentations to Federal and State audiences, including as a presenter at CMS Zone webinars and at the FNS SNAP NERO conference on PMO practices. The ImpaCT team was also recently awarded the 2017 NSDTA Quality Program Award for excellence in training.

December 2017 Update:

DSS, BEST, and Access Health CT have been working with the Systems Integrator, Deloitte, to continue Tier 1 deployments to extend and refine current functionality as needed. There was one planned Tier-1 Access Health CT release this period (Release 22.2), which was a collection of fixes and enhancements in preparation for Open Enrollment 2018. The DSS focus has been in prioritizing smaller maintenance type releases for defect fixes, changes required due to the uncertainty of the CHIP funding reauthorization, the reduction in the State's FPL threshold for the Medicaid Parents and Caretaker group, and a defect in the determination of the Adult FMAP. The Tier 2 (ImpaCT) Medicaid and CHIP Premium Module has a Tier-1 CHIP component and the development and testing is well underway the implementation has moved from Q4 and is now targeted for February 2018.

Tiers 2 and 3 work, the eligibility system replacement known as ImpaCT, has entered the stabilization phase. There are multiple State teams, Trading Partners, and vendors working in conjunction with Deloitte to stabilize the ImpaCT system and complete the final interfaces. The ImpaCT project schedule was extended until September 2018 to

complete several agency priorities, including the Premium Payment Module and the New Medicare Card Replacement Project. There are also a number releases scheduled to resolve defects and incorporate priority change requests, and dedicated conversions to move the remaining clients from the legacy EMS system to ImpaCT. Significant progress has been realized since system inception, including the deployment of ImpaCT in all DSS offices. To date, there have been 1,019,446 clients converted from EMS to ImpaCT and approximately 45,000 clients remain in EMS pending conversion.

There are 80 active interfaces in Production, four interfaces (ICD's 45, 58, 87 and 179) are being tested and one interface (ICD 137) is on hold. Of the five newly identified interfaces, one (ICD 194) was implemented, (ICDs 22, 191, 193,) are in development as part of the Department Of Labor CTHires and DSS's Premium Payment Module enhancements, and ICD 80 has not yet started development. In addition, approximately 670 Change Requests are in various stages of Change Control Board approval. The Change Control Board meets weekly to prioritize these Change Requests.

A critical goal of DSS is to improve health and well-being of Connecticut's low income and disadvantaged populations by making it easy for individual clients and families to be enrolled in the most appropriate and advantageous HHS programs. As we move to a technology solution that will assist DSS to meet this need, it is equally important that we ensure that the solution is well designed, tested, and is operational. Therefore, the ImpaCT team works closely with DSS leadership and reports to the Executive Steering Committee (ESC) on a frequent basis with regard to status and performance. The ImpaCT team also submits weekly updates to our Federal Partners at CMS & FNS and conducts detailed monthly meetings on overall project health with these partners as well. The team also receives reports from the Independent Verification and Validation (IV&V) vendor. Operationally, the team has an active project management process in place and monitors the work plan on a weekly basis to prioritize work, make decisions, and promote forward progress. The project schedule is analyzed on a weekly basis for late, slipping, upcoming and critical tasks, as well as any date changes, and all findings are shared with DSS leadership. Program dashboards are created and reviewed weekly with the full ImpaCT project management team and detailed KPI reports are produced on the incidents and defects. Additionally, production incidents and defects, batch performance, and work-in-progress items are tracked and reported on weekly. The ImpaCT project has been highlighted as a best practice by Federal oversight entities, including being highlighted as a presenter at CMS Zone webinars on PMO and Benefits Center approaches and at the FNS SNAP NERO conference on PMO practices. The ImpaCT team was also awarded the 2017 NSDTA Quality Program Award for excellence in training.

June 2018 Update:

Multiple system change requests have been generated since ImpaCT's initial October 2017 pilot office implementation. System change requests are captured in the Project's incident tracking tool, JIRA, and evaluated and weighted for priority and impact. Some functional changes were determined critical to Go Live and, as such, were designed, developed, tested and implemented as part of the original October 2017 Pilot Office automation; an additional 100 CR's, deemed high-priority for post pilot offices, external stakeholders, and/or DSS senior management, were automated in the ten months following; between August 2017 and August 2018, 163 CR's have been automated across all program types and system functionality.

Creating new or modifying existing system interfaces requires a tremendous planning, development, coordination, communication and testing lift. The ImpaCT interface team DSS also worked tenaciously and has delivered the five following seven system interfaces, between August 2017 and June 2018:

1. CTHIRES Online (Change Request CTIE-44395) – Web service interface for real time verification that applicants for benefits meet minimum criteria such as participation in Employment and Training (E&T) programs. _ **COMPLETED**
2. CTHIRES Daily Batch (Change Request CTIE-64426) – Daily batch interface for reconciliation to ensure that applicants for benefits meet minimum criteria such as participation in Employment and Training (E&T) programs. _ **COMPLETED**
3. NEMT (Change Request CTIE-60943) – DSS is in the final stages of negotiating a three year contract for NEMT services with a new vendor effective January 1, 2018. The program is being restructured based on a capitated payment system. This new interface will replace the existing interface with the incumbent vendor. _ **COMPLETED**
4. Premium Lockbox (Change Request CTIE-60263) – The new ImpaCT Premium Module consolidates enrollment and payment tracking for CHIP and SOS clients to minimize delays in providing benefits. The Premium Lockbox portion of the Premium Module provides the interface with the financial institution trading partner for premium payment information. _ **COMPLETED**
5. SSNRI (Change Request CTIE-43085) – The Social Security Number Removal Initiative requires multiple new interfaces with CMS, MMIS and six ImpaCT ASOs to transfer and reconcile HICN and MBI data system wide. _ **COMPLETED**

December 2018 Update:

DSS, BEST, and Access Health CT have been working with the Systems Integrator, Deloitte, on additional Tier 1 deployments to extend and refine current functionality in line with State needs. A significant milestone of this reporting period was the elimination of the residual interface with the legacy eligibility system; all MAGI Medicaid and CHIP enrollments are now sent directly to the new eligibility system (ImpaCT). There were fourteen (14) planned Tier-1 Access Health CT Hotfixes this reporting period (Release 24.0.1 through 24.1.10). Hotfixes included eliminating the copy-forward of non-ESI coverage data, and the update of FPLs in the rules tables. The State also enhanced its CMS CARTS and SEDS reporting capabilities to be more fully compliant with CMS requirements. During this reporting period the State designed and implemented two (2) releases (Release 24 and Release 24.1). Release 25 was under development during this period and is planned for implementation in the following reporting period.

Tiers 2 and 3 work, the eligibility system replacement known as ImpaCT, remains in the stabilization phase. Multiple State teams, Trading Partners, and vendors continue to work in conjunction with Deloitte on stabilization efforts for the ImpaCT system by addressing remaining defects and prioritizing and incorporating system change requests. In parallel, the ImpaCT team also continues to target functional releases to respond to state and federal requests and program changes, to respond to business priorities, and to draw down on the backlog of change requests. Between June 2018 and December 2018, the ImpaCT team delivered three (3) Major Releases, including the successful Child Care deployment, three (3) Minor Releases, and a total of 8 Hot Fix Releases. These releases and hot fixes resolved over 400 defects and 127 Change Requests. Despite these efforts, as of 12/31/2018, there are 739 outstanding Change Requests and 463 unresolved defects, of which 226 are in the production environment. Based on current projections, there will likely be over 500 change requests and 400 defects outstanding at the anticipated March 31st, 2019 project end date. There are also ongoing conversion efforts required to move the remaining clients from the legacy EMS system into ImpaCT. Wave 1 Archive Conversion was executed in the production environment on 8/11/18, successfully converting 378,000 clients into ImpaCT with a 98.6% conversion success rate. However, based on the initial performance test results, DSS changed the original plan to convert all archive clients to ImpaCT to instead use an archive database approach. Due to technical challenges that arose, the archive database approach was tabled and the

Issues and Risks:

Current Tier 1 risks constitute the coordination of future deployments with the Tiers 2 and 3 implementation, while ensuring a successful Open Enrollment 2017.

The ImpaCT Tiers 2 and 3 risks and issues are tracked in a reporting system (JIRA) on a daily basis, and updated frequently. The risks are highlighted to DSS leadership on a weekly basis and reviewed with CMS & FNS on a monthly basis. Listed below is a representative sampling of current risks and issues from the ImpaCT project:

- o CTIE-47094 – Not all functionality delivered to UAT R5 by 6/6.
- o CTIE-46869 - Legacy EMS resources unavailable.
- o CTIE-46775 - Lack of testing resources for ConneCT/ImpaCT integration.
- o CTIE-23645 - The ImpaCT project schedule is late in many areas and there is limited slack remaining.
- o CTIE-46291 - IIT testing delays could jeopardize the targeted 8/5/16 interface completion date.

Mitigations are regularly discussed at the weekly Project Management Meeting and vetted by the project team. Mitigations are then updated and recorded in JIRA and operationalized in work plans. Updates are provided to project leadership on a weekly basis.

December 2016 Update:

The ImpaCT continues to manage an mitigate is currently addressing the following risks:

- o CTIE-58361: Two key project deliverables remain outstanding.
- o CTIE-45304: ConneCT refresh at risk for Wave 2 due to unapproved design.
- o CTIE-51792: UAT first pass execution beyond planned end date (7/31/2016).
- o CTIE-55895: Not all functionality tested as planned in Test Run deployment.
- o CTIE-47263: EMS data extracts / ImpaCT transition.
- o CTIE-45323: Paper form analysis/revisions for ImpaCT has not been completed.
- o CTIE-58728: Manual Notice review using excessive resource time.
- o CTIE-58370: Disposition of converted cases with benefit mismatch.
- o CTIE-43965: Backlog of Work In Progress (WIP).
- o CTIE-58257: Production defect remediation being slowed to Production due to UAT throughput.
- o CTIE-58369: Interim Conversion request pass rate is considerably lower than
- o CTIE-60073: Production Environment does not currently support persistent sessions.
- o CTIE-60320: The volume of DCRs and affected client records has been high and experienced an increase the week 12/12.

Mitigations are regularly discussed at the weekly Project Management Meeting and vetted by the project team. Mitigations are then updated and recorded in JIRA and operationalized in work plans. Updates are provided to project leadership on a weekly basis.

June 2017 Update:

Current Tier 1 risks constitute the coordination of future deployments with the Tiers 2 and 3 implementation, while ensuring a successful Open Enrollment in 2017. The team is also monitoring delays to the Premium Payment module. These risks and issues are tracked via a reporting system (JIRA) on a daily basis, and updated frequently. Listed below is a representative sampling of the current risks and issues from the Tier 1 integration efforts:

- o CTIE-69478 - Delay in design confirmation puts Premium Module delivery at risk.

The ImpaCT Tiers 2 and 3 risks and issues are also tracked in the same reporting system (JIRA) on a daily basis, and updated frequently. The risks are highlighted to DSS leadership on a weekly basis and reviewed with CMS & FNS on a monthly basis. Listed below is a representative sampling of current risks and issues from the ImpaCT project:

- o CTIE-68302 – ImpaCT open defects continue to remain steady despite regular releases.
- o CTIE-60073 – Production environment does not currently support persistent sessions.
- o CTIE-63289 - The Post-Pilot interface deployment schedule continues to slip due to capacity issues.
- o CTIE-60320 - The volume of DCRs and affected client records is high.
- o CTIE-66867 – State ImpaCT resources are not scheduled on ImpaCT project through SFY 2018.

December 2017 Update:

Current Tier 1 risks constitute the coordination of future deployments with the Tiers 2 and 3 implementation. The team is also monitoring delays to the Premium Payment module. These risks and issues are tracked via a reporting system (JIRA) on a daily basis, and updated frequently. Listed below is a representative sampling of the current risks and issues from the Tier 1 integration efforts:

- o CTIE-77581 - Conversion for Premium Module - premium benefit history extracts with med-cutover discrepancies.
- o CTIE-69478 - Delay in design reviews and sign-off puts Premium Module delivery at risk (S05 notice).

The ImpaCT Tiers 2 and 3 risks and issues are also tracked in the same reporting system (JIRA) on a daily basis, and updated frequently. The risks are highlighted to DSS leadership on a weekly basis and reviewed with CMS & FNS on a monthly basis. Listed below is a representative sampling of current risks and issues from the ImpaCT project:

- o CTIE-75989 - ImpaCT project may be unable to realize all requested functionality and enhancements by October 2018.
- o CTIE-75990 - Several scheduled releases have missed planned delivery dates, requiring re-planning and ongoing adjustments to delivery schedule.
- o CTIE-77909 - ImpaCT teams and resources required to support related ongoing DSS initiatives creating capacity concerns.
- o CTIE-68302 – ImpaCT open defects continue to remain steady despite regular releases.
- o CTIE-60320 - The volume of DCRs and affected client records is high.
- o CTIE-65112 - There are many Change Requests remaining post statewide implementation.

Mitigations are discussed at the tri-weekly Project Management Meeting and vetted by the full project team. Mitigations are then updated and recorded in JIRA and operationalized in work plans. Updates are provided to project leadership on a weekly basis. Risks and issues are also presented to CMS and FNS on a monthly basis and detailed progress reports are shared across multiple areas.

June 2018 Update:

The DSS project team continues to adhere to internal processes to manage and mitigate risk. DSS Project Management, KPMG First Data and Deloitte closely monitor progress on the known risk areas and watch influences on other areas that could potentially impact the system or client service.

Next Steps & Project Milestones:

December 2018 Update:

Currently, the Tier 1 team is working on the implementation of Release 25, scheduled for March 22, which includes a version upgrade of the Federal Data Services Hub (FDSH) Verify Lawful Presence (VLP) interface and implementation of Step 2 and Step 3 of this interface. The risks and issues are tracked via the project reporting system JIRA, and are updated as needed.

The ImpaCT Tiers 2 and 3 risks and issues are also tracked in JIRA on a daily basis, and updated weekly and often multiple times per week as progress is made. The risks are presented to DSS leadership on a weekly basis and reviewed with CMS & FNS in detail on a monthly basis. Listed below is a representative sampling of current risks and issues from the ImpaCT project active from July 1 – December 31 2018:

- CTIE-75990: Several scheduled releases and hot fixes have missed their planned delivery dates, requiring re-planning and ongoing adjustments to delivery schedule.
- CTIE-88388: Environment issues reported across multiple environments impacting in-flight activities.
- CTIE-83473: ImpaCT project may be unable to convert all remaining EMS clients within original timeline.
- CTIE-65112: There are many Change Requests remaining post statewide implementation.
- CTIE-77909: ImpaCT teams and resources required to support related ongoing DSS initiatives creating capacity concerns.
- CTIE-65110: Technology resource constraints (human and technical) continue to impact in-flight releases.
- CTIE-89010: The quality of deliverable submissions has resulted in a greater number of submissions per deliverable and longer review times.
- CTIE-68302: ImpaCT open defects continue to remain steady despite regular releases.
- CTIE-61265: There has been a consistently high volume of defects assessed as 'high' by DSS.
- CTIE-60320: The volume of DCRs and affected client records remains steady.

Mitigations are continually updated and recorded in JIRA by the PMO and operationalized in work plans following DSS approval of new approaches and work.

Tier 1 will continue with several planned deployments. Release 20 is planned for August 12, 2016 to address issues and enhance functionality in time for Open Enrollment 2017. An additional Release is tentatively planned for September 23, 2016 to activate the functionality necessary for Tier 1 to communicate with Tiers 2 and 3 in real time.

The ImpaCT Pilot is on track for a go-live date of October 11th, 2016. In the interim, there are numerous upcoming milestones that the team will realize including the completion of UAT testing and defect resolution, completion of IIT Testing and defect resolution, establishing connectivity with Trading Partners and securing sign-off, completion of performance testing, AHCT switch activation, completion of a full mock run, ConneCT moving to production, providing Go-No-Go decision to CMS and finally, the ImpaCT move to production. Additionally, the team will prepare for onsite visits from CMS & FNS. ImpaCT Wave 1 and Wave 2 will follow from 1/10/2017 through 3/1/2017 and from 3/14/2017 through 4/3/2017, respectively.

December 2016 Update:

During upcoming period, the ImpaCT team will continue to focus on system and production support, and Field Office support. In addition, the team will continue to plan, test and deploy releases and patches as necessary to fix defects. Additionally, efforts will continue with regard to planning and implementing Wave 1 and with elaborating work plan tasks and activities for future planned waves. The ImpaCT team will also work toward finalization of a number of deliverables including:

- D.1.9.c - Implementation Review
- D.3.4.g.iv - Database Vulnerability Assessment Report
- D.3.4.g.v - Network Level Vulnerability Assessment Report
- D.4.5 - Operations and Maintenance Manual
- D.7.a IIT Test Support Completion
- D.ImpaCT-003 Database Monitoring Test Summary Report
- D.ImpaCT-007-04 Database Monitoring Deployment Guide
- D.ImpaCT-007-05 Database Monitoring Operations Playbook.

June 2017 Update:

Tier 1 will continue with several planned deployments. This will include Release 22 in the fall of 2017 which will be focused on AHCT functionality. Next, in January of 2018 the team is targeting Release 23 which will focus on the Premium Payment module. Currently, there is also an interim release being discussed for September that will help set the Stage for Release 22.

In ImpaCT, following the Wave 6 deployment, there are approximately 116,104 unconverted clients remaining in EMS. The project team is working on a plan to convert these remaining individuals in a series of catch-up waves. They will also define a strategy and schedule to disposition all cases with a Benefit Mismatch, complete outstanding change requests, implement remaining interfaces, implement Premium Module, and work toward an integrated HHS system.

December 2017 Update:

Tier-1 will implement Release 23 in February 2018, which has a focus on the components needed to support the ImpaCT 5.0 Premium Payment module. Tier-1 teams will also continue to support the reduction in Tier-1 (MAGI) clients that are sent to the legacy systems versus being sent to the new ImpaCT eligibility system. As of January 2018 around 95% of the MAGI population has been converted and the plan is to sunset the legacy CHIP system in March 2018 (post the deployment and stabilization of the ImpaCT Premium Payment Module). The FDSH RIDP interface will be upgraded in February 2018 and plans are being developed to upgrade to the latest version of the FDSH VLP interface.

In ImpaCT, Release 5.0.0 to deploy the Premium Payment Module is scheduled for 2/23, followed by Release 6.0.0 on 3/23 to support the New Medicare Care Replacement Project. The project team will work on evaluating conversion rule changes to convert individuals remaining in EMS in a series of targeted interim conversions. They will also continue to prioritize defects and outstanding change requests for inclusion in future releases, work toward disposition of all cases with a Benefit Mismatch, operationalize remaining interfaces, and work toward an integrated HHS system.

June 2018 Update:

In July, the ImpaCT team will deploy Release 7.0 which will address 94 defects and 43 change requests. During upcoming months, the ImpaCT team will continue to focus on system and production support. In addition, they will test and deploy Major Release 8.0.0 and related patches as necessary to fix 156 defects and implement 58 Change Requests. They will also deploy Hot Fix 7.0.2 (expedited build requested by DSS business) to update language on the PRF notice. The team will focus on completing Summer EBT activities and scheduling and completing activities related to converting the remaining EMS clients to ImpaCT. The infrastructure team will continue work on environment automation and evaluating the timeline to perform other necessary technical upgrades, and an additional migration will be performed on the EMPI databases.

December 2018 Update:

The Tier-1 team will implement Release 25 in March 2019. Release 25 is a collection of enhancements that includes upgrading the current FDSH VLP interface to version 37, implementing VLP Steps 2 and 3, adding pregnancy as a Special Enrollment Period and updating alimony eligibility rules per the Tax Cut and Job Acts of 2017.

For the ImpaCT project, Release 10.0.0 to deploy 40 change requests along with 103 defects is currently scheduled to deploy into production on 2/1. Release 11.0.0 to deliver 41 change requests and 103 (92 ImpaCT and 11 Child Care) defects is also scheduled for a 3/22 deployment. Additionally, there is a minor release to automate the Summer EBT process scheduled for 4/26, and Release 11.2.0 (Technology Product Upgrade) is scheduled for 5/3/19. The project team will continue to convert individuals remaining in EMS in a series of archive and targeted interim conversions. The project team will also conduct an affinity analysis to prioritize defects and outstanding change requests for inclusion in future releases, work toward disposition of all remaining cases with a Benefit Mismatch, and continue to work toward an integrated HHS system. The ImpaCT team will work with Agency partners on a ConneCT Refresh in February, and work to support EMPI upgrades as needed. Additionally, changes to waivers are expected that will need to be addressed by the business. The ImpaCT PMO is working with DSS leads to prepare for a Post-Operational Review required by CMS. This review will likely include an onsite visit and require the presentation of evidence across six (6) areas, and a possible system demonstration. This review is likely to be scheduled in the May time frame. Perhaps most importantly, the ImpaCT teams and PMO are conducting detailed Lessons Learned analyses as the ramp-down of project resources continues. Each ImpaCT team is also working closely with DSS to manage knowledge transition processes as the project continues the ongoing transition of numerous responsibilities and tasks to DSS and internal roles. Several transition tools have been developed and DSS is leading weekly planning meetings to prepare for additional upcoming transitions of various ImpaCT elements to DSS.

