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

From: Dennis Mitchell

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Agency: Department of Developmental Services
Project: DDS HCBS Waiver Case Management System

Project Manager: TBD

Reporting Period: Project Inception through 06/30/2019

Total Funds Requested: $2,825,906

Total Funds Allotted to Agency: $1,030,507

Accumulative Total Capital Fund Expenditures to Date: $870,910

Brief Project Description/Summary:
The State of Connecticut's Department of Department of Developmental Services (DDS), is modernizing its existing Home and Community Based Services (HCBS) application and technology infrastructure environment. The project goal is to create an integrated application system utilizing a modular application framework built upon ASP.NET Microservices. The system would address DDS business processes supporting Consumer Service Planning, Resource Allocation, Fiscal and Resource Management, Quality Management, and Incident Management. In addition there would be a business analytics and reporting capability created utilizing SQL Server Reporting Services and Tableau.

Summary of Progress Achieved to Date:

Current Progress:

- The agency has continued to make progress on migrating the IP6 Authorizations Application from Microsoft Access to .NET/SQL Server. Over the past six months, the Microsoft Access application has been sunsetted and the .NET application has been formally adopted

- We are ready to deploy a .NET solution that allows partners to submit critical incident reports electronically (via a REST API). All of the data submissions are fully validated. In the next several weeks, we will be working with two software vendors to help them develop and test software clients for our REST APIs.

- DDS has been working with Pulselight to develop a solution that enables DDS to identify missing critical incident reports. We are in Phase 3 (of 4) of the project, where Pulselight is developing an algorithm to match MMIS claims data with submitted critical incident report.

- DDS has made significant progress on a project to modernize the Planning Resource Allocation Team application (currently on VB6 in Citrix). The database and REST service layer are 90% complete and tested. The user interface work is on sprint 7 (of 10).The DDS IT Manager has continued training his application development staff in enterprise programming techniques on the ASP.NET platform. All developers are now able to create REST service APIs. All developers are now learning user interface development.

Previous Progress:

- *CMS Funding Approved.*
- *Project Charter, Project Management Plan, Cost Performance Summary Report, Risk Dashboard and Issues Tracker Report, High Level Timeline, High Level Tech Requirements, and High Level Business Requirements completed.*
- *Procured RPF Project Manager and developed RFP (ready to publish)*
- *DDS formally asked CMS and received a no-cost six (6) month extension (IAPD-U).*
- *Published Request for Information to determine if there are new products and/or vendors   available in the HCBS domain since project conception.*
- *DDS has completed the organizational and business processes assessment.*
- *DDS developed an Access Database Migration strategy, procured resources, and began migrating MS Access backend data and reports to the existing MS SQL/MS SSRS Database Platform in preparation for modernization.*
- *DDS developed a BI Analytics Strategy, procured software, gathered detail requirements, procured consultant developer, and developed dashboards in the 4 major business domains in preparation for modernization. Currently finalizing work on these deliverables.*
- *DDS receiving technical asisstance from DSS to identify next-steps in updating CMS to allow DDS to proceed with modular implementaiton of the program.*
- DDS hired a new IT Manager to oversee the HCBS Case Management Project. The new DDS IT Manager and DDS business managers reached out to DSS to determine how to proceed with the HCBS Case Management Project.

- DSS informed DDS that the IAPD for the HCBS Case Management project was no longer valid. Apparently, the State failed to submit required reports to CMS.
- DSS has offered to allow DDS to assume responsibility for one of its Shared Services projects, which are funded through CMS. In accomplishing DSS's project goals, DDS might be able to accomplish some goals of the HCBS Case Management Project.
- The DDS IT Manager has been researching technologies and procurement vehicles for moving forward with the HCBS Case Management Project.
- Project staff are nearing completion of a "minimum viable product" (MVP) version of the IP6 application. The IP6 application manages service authorizations and payments. The MVP will allow users to migrate from the existing Microsoft Access application to the ASP.NET platform. After rolling out the MVP, project staff will have to address enhancements to address various mission critical features with the new version of the application.
- The DDS IT Manager identified two additional modernization projects requiring immediate attention. Both projects involve migrating obsolete VB6 applications (running in Citrix) to the ASP.NET platform. The first project, PRAT, supports vetting of resource allocation requests by the persons we serve. The second project, IP6 Budgets, supports various functions complementary to the main IP6 application. Residing on the current VB6 platform, the applications are not maintainable. Project staff have already created business requirements and some design documents for the PRAT application
- The DDS IT Manager is working with OPM, DSS, and the state CIO to identify solutions for Incident Reporting. A "backend" solution is needed to integrate critical incident data in DDS's database with claims data from MMIS (DSS) and possibly notifications from Project Notify (DSS). A "frontend" solution is needed for allowing remote entry (or uploading) of incident reports
- The agency has made significant progress on migrating the IP6 Payments Application from Microsoft Access to .NET/SQL Server. The entire payment process was developed, tested, and deployed to production, as were many bug fixes. Some enhancements supporting new legislatively mandated or policy-mandated updates were implemented, as well. Numerous reports were migrated from Access to SQL Server Reporting Services, including some reports that are now made available online to providers.
- The DDS IT Manager has been training his application development staff in enterprise programming techniques on the ASP.NET platform. As part of the training, the developers are making progress in migrating the first of two VB6 applications. So far, the developers have created application code to communicate with the database. Next, the developers will create a REST service API for the application. Finally, the user interface will be created.
- The DDS IT Manager worked with OPM and DSS to secure federal funding for a solution that addresses an Office of the Inspector General Audit Finding that DDS was under-reporting critical incidents. Among other things the new solution will use MMIS claims data to identify missing critical incident reports.

Issues and Risks:

Issues

- Without significant funding, modernization is proceeding at a slower place than is desired by executive management.

Risks

- (None at this time)

Next Steps & Project Milestones:

- Finish modernization of the PRAT application (currently on VB6/Citrix)
- Finish working with Pulselight to produce the analytic solution for critical incidents.
- Work with Therap (and possibly other vendors) to begin automated electronic submissions of critical incident reports.
- Modernize the IP6 Budget System (currently on VB6/Citrix), migrating all functionality to an ASP.NET application (backed by microservices)
- Build a .NET application (backed by microservices) to replace the existing Individual Plan (currently a Microsoft Word form).
- Continue modernizing the IP6 Authorizations and IP6 Payments systems -- focusing on tasks to increase data quality, streamline processes, and integrate with other systems.