Report Title: 2020 - 2022 IT Strategic Plan

Agency: 602 Department of Medical Assistance Services (DMAS)

Date: 7/27/2020

Current Operational IT Investments

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 agencys 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 agencys 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 20 - 22 Biennium offers the following IT Strategic Plan (ITSP). The ITSP focuses on the following areas:

- Program Management Office (PMO) effort to plan for the Medicaid Management Information System (MMIS) Renewal/Procurement Planning.
- · ITS infrastructure modernization and IT services improvements.
- · Office of Compliance and Security (OCS) effort
- . MES Implementation DDI and Operational Support
- . Renewal Procurements and New Procurement for services, and Data Center Migration projects

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 agencys current IT investments. These are requirements and mandates from external sources, such as other agencies or business partners, the agencys 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 agencys 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 agencys 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?

There many factors influencing IT projects at DMAS. MES Program Management Office (PMO) goal is to provide oversight, guidance and direction to the Supplier community and DMAS staff in the projects that make up the replacement of the Medicaid Management Information System (MMIS). Through IT contracts and services, the PMO has been managing the transformation to a modernized Medicaid Enterprise System (MES). The PMO has and will continue to coordinate Supplier activities for services and products that are MITA compliant, CMS' certifiable, and align with DMAS' mission to provide services to the stakeholders of the Commonwealth. The transformation to the Medicaid Enterprise System to be phased in throughout this bi-annual reporting period and the monolithic MMIS will be running concurrently

with MES in some instances. Where possible and without disruption to the overall process, the MMIS functions will be sunset as the MES COTS products are deployed

IT INFRASTRUCTURE TRANSITION

- a. Identify your new projects/work, due dates and if it is mandatory: DMAS has completed MMIS re-procurement and will be continue the MES Implementation project in this biennium. DMAS must have the full transition complete by end of this Biennium. Traditionally, MMIS has been monolithic Legacy system, however MES is a fully modular system that consists of 10 modules that are integrated together by an Integration System Solution. This is a CMS mandated approach.
- b. Identify your existing projects, due dates and if it is mandatory:
- 1, MES Implementation (Including 10 different modules, and 7 vendors) is currently underway and will continue to be worked on during this Biennium. The current target date for completion of this large project is between Q2 2021 to Q4 2021. Some of the Modules such as the Pharmacy Benefit Management Solution, Enterprise Data Warehouse Solution, Encounter Processing System (DMAS IT Built) are already in production andundergoing Phase 2 activities to integrate with the new MES modules.
- 2. Data Center Move DMAS has infrastructure that supports our Oracle Financial applications and we are considering the migration to the new DC or migrate these physical servers to a Cloud Infrastructure. Planned for completion Q4 2020 to Q2 2021
- c. Identify your existing applications and infrastructure, where are the databases for your applications, do the applications have connections with other apps/databases: Our main concern is the to-be Server and Storage solution and the to-be Messaging solution. DMAS has business functions that the infrastructure and applications support which are heavily populated with PII/PHI. It is incumbent that VITA provide IT infrastructure transition solutions that are foundationally SEC525 compliant. Our infrastructure and applications are fully inventoried. DMAS will be prepared to transition existing infrastructure and applications at VITA's schedule. Additionally, we will be actively working with the DMAS business community on those transitions efforts at the appropriate time.
- d. You should also start to consider/plan for any application testing that may be required for transition: Our main concern is the to-be Server and Storage solution and the to-be Messaging solution. DMAS has business functions that the infrastructure and applications support which are heavily populated with PII/PHI. It is incumbent that VITA provide IT infrastructure transition solutions that are foundationally SEC525 compliant. Our infrastructure and applications are fully inventoried. DMAS will be prepared to transition existing infrastructure and applications at VITA's schedule. Additionally, we will be actively working with the DMAS business community on those transitions efforts at the appropriate time. SHARED SECURITY SERVICES DMAS does not plan to use Shared Security Services CLOUD HOSTING APPLICATIONS Yes. DMAS is taking an aggressive approach to use cloud hosting for future solutions. INTERNET UTILIZATION DMAS should see an increase in internet usage based on the way technology is trending. As DMAS is making efforts to put future technologies into the Cloud, initial connectivity will be obtained via dedicated and secure site-to-site VPNs over the COV public Internet. In addition, with the push toward more citizen driven self-services, this will result in increased transactions. This will cause an increase in internet use.

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 agencys 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 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?

- MMIS Renewal/Procurement Planning MES: Department of Medical Assistance Services (DMAS) of Commonwealth of Virginia is undergoing the DDI (Design Development and Implementation) of the newly procured Multi-Module MES as the replacement for the Medicaid Management Information System (MMIS). CMS, the federal agency for Medicaid oversight, is mandating that all states are to follow MITA 3.0, Level 2 (Medicaid Information Technology Architecture) or above for all new MMIS systems. The current DMAS MMIS is at level 1 maturity. CMS is requiring states to reach Level 2 or above to get 90/10 (Federal/State) funding. The current MMIS contract expired on June 30, 2018, and DMAS had completed a Sole Source contract Extension until 06/30/2020 which was approved by CMS and VITA. DMAS is also currently working on further extending the MMIS contract beyond 06/30/2020 for an additional two Base years and two one year extensions as a sole source contract due to the delays being faced on MES DDI Projects. As MMIS is the hub for most current DMAS business function contracts, having a newer core technology and platform is key to support the future contracts of DMAS. This will also keep costs down on integration.
- The current DMAS MMIS has a lot of technology underpinnings that were designed 20 years ago. These technologies are starting to phase out and need replacement or upgrading. A few examples are Sybase for electronic data interchange, hardware stacks and ClaimCheck for the national correct coding initiative. DMAS is planning to implement a new system, as opposed to a take-over of the current MMIS. The new technologies introduced with the new system will allow for DMAS business processes to be better positioned in getting results faster.
- DMAS is planning to investigate and leverage new CommonwealthIT investments in newer technology stacks such as service oriented architecture (SOA). To be most cost effective, DMAS may break the new MMIS into smaller logical chunks to achieve the CMS seven standards and conditions for a future MMIS system. See the link-
- http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Data-and-Systems/Downloads/EFR-Seven-Conditions-and-Standards.pdf. DMAS is planning to investigate whether it makes sense to out-source, in-source or have a hybrid-source model for the new detangled MMIS system.
- The new MMIS will be the technical foundation of DMAS business functions. DMAS will be well positioned to modularize the delivery system of Agency services; bring more competition, flexibility, speed to change; implement new initiatives.
- From an MMIS and MES perspective the following projects are in-progress or scheduled to start and will be completed in the SFY 20 22 Biennium. The current MES Go-Live date is scheduled for June 20, 2020. As of the date of this plan, this date is being recalculated based on the overall MES project delays that have occurred due delays caused by two of the vendors.
- o OPSS/PLMS Operations Services and Plan Management Solution (Contracted to Accenture)
- o PPMS Payment Processing Management System (Contracted to Conduent)
- o PRSS Provider Services Solution (Contracted to DXE)
- o Appeals Contracted to VIP (GO LIVE in August 2020)
- o CRMS Design, Development and Operations will be done internally by DMAS Information Management Division

- o Ancillary Services: Other infrastructure and software acquisition required by IM Division for managing and implementing MES are being tracked under this project bucket
- o EDWS DDI and Operations: The Enterprise Data Warehouse solution which is a key component of the MES program has been implemented into production as of October 2019, and is currently being supported by OPTUM who delivered this contract. This project will continue to complete the Phase 2 and Phase 3 of the MES Implementation
- o EPS Operations and Integration with MES platform
- o ISS This is core module that provides the Integration services for all the MES modules. This is managed by Deloitte and is currently in production and completing the MES module integrations.
- o PBMS Operations Pharmacy Benefit management solution has been in production since October 2017, and is currently working MES Integration. This module is contracted to Magellan Health
- o Oracle EBS platform migration from CESC data center to Oracle Cloud services. This project will be completed using the VITA service offering through SAIC and Unisys
- · Re-Procurement of expiring contracts and Competitive Negotiated Procurements (RFPs): DMAS will procure the following contracts known as of this reporting date, and these projects will require IT Implementations and integration with the MES Platform.

Dental Benefits Administrator, General Auditing Services, Behavioral Health Services Administrator, Payment Error Rate Measurement (PERM), Service Authorization Services, External Quality Review Organization (EQRO), Fiscal Agent Services (MMIS) Sole Source Contract Extension, Prepayment Analytics, Cover Virginia, Service Authorization and Specialty Services, SUD Services, Justice Involved, Telemedicine.

DMAS is addressing its need to have its workforce to be able to work remotely away from DMAS headquarters by providing a 100% of employees and contractors with Laptops. This is being achieved by actively pursuing regularly rescheduled as well as early refresh. All DMAS employees will have a new laptop (under IronBow) before 12/31/20. EOL (End of Life) for Windows 7 and Widows Server 2008 effects serval of our applications and we are working to migrate those applications to Windows server 2016.

DMAS is planning the implementation of an Agency Enterprise Content Management System. Existing DMAS data will be migrated into the new CMS system. This effort will allow DMAS to reduce its redundant data footprint and allow indexing of the files stored.

DMAS will continue to automate the various manual approval workflow processes; this will greatly improve the efficiency of the tasks related to this within the agency. We have serval K2 workflows in production.

DMAS is planning to build a highly available Tableau Public Server system

DMAS is planning to re-architect our SAS/Smartdata platform

DMAS is working to adhere to EO 19 to support Datacenter move

DMAS is planning on Network Modernization

DMAS is planning on a Oracle Financials (EBS) lift and shift to the Oracle Cloud or private Cloud

DMAS is planning on building a digital searchable library of all its public facing documents

Report Title: Business Requirements For Technology

Agency: 602 Department of Medical Assistance Services (DMAS)

Date: 7/27/2020

BRnT Medicaid Enterprise System (MES) Program		
BRT Type:	Business Requirement for New Technology	
Date Submitted:	3/2/2020	
Mandate:	Yes	
Mission Critical:	Yes	
Description:		

DMAS is replacing its existing Medicaid Management Information System (MMIS) and transforming to a Medicaid Enterprise System (MES).

The MMIS is the mechanized claims processing and information retrieval system which states are required to have by CMS (Centers for Medicare & Medicaid Services). The contract to operate Virginia's MMIS (VAMMIS) ends June 30, 2018. This represents the end of the fourth and final option year that is expected to be exercised on top of the initial four year contract period, or a total of eight years. Virginia must begin the procurement process to replace VAMMIS and acquire a new system so it can continue to:

Enroll recipients and providers

Process claims

Pay the providers, Managed Care Organizations (MCOs) and Administrative Services Organizations (ASOs) that deliver services to members.

CMS requires that the Single State Medicaid agency (DMAS) must operate a federally-certified system in order to qualify for federal financial participation for its Medicaid program. The current VAMMIS system must be replaced to ensure that Virginia will continue to receive the maximum federal funding for its Medicaid program. Virginia received approximately \$4.5 billion in federal funding in SFY 2015.

The Medicaid Enterprise System Program (MES) program will address the business, information, and technical requirements needed to meet Agency needs and Medicaid Information Technology Architecture (MITA) objectives. MITA is an initiative of CMS to establish national guidelines for technologies and processes that improve program administration for the state Medicaid Enterprise System. During a recently completed MITA State Self-Assessment, DMAS reviewed its current systems and operations and began identifying what should be changed and adopted going forward.

While the direction will be further developed through RFP development, some key objectives have been identified for the new MES that include:

Continue the development of the Eligibility & Enrollment (E&E) enhancement to address all existing members and to integrate with additional intrastate systems, such as the Commonwealth Authentication System (CAS)

Develop a data warehouse that improves the breadth and quality of data available and provides the information needed to manage, operate, measure and improve the Medicaid Enterprise

Transform the traditional Medicaid Management Information System (MMIS) to a modern Medicaid Enterprise System, including:

- o Pursuing a modular approach to specific business needs where cost-effective robust solutions can easily be integrated, possibly in areas such as claims processing, financial management and pharmacy benefits
- o Identifying ways to further automate and integrate business processes that were not traditionally part of an MMIS but are components of the MES, such as managing member and provider appeals and contractor management
- o Creating provider and member portals that support the 'one stop shop' objective and improve information access and service for all Medicaid related needs
- o Supporting exchanges with federal, State and other entities, including the Health Insurance Exchange (HIX) and Health Information Exchange (HIE)
- Expanding the automation and decision making associated with business processes where feasible and costeffective

Establish a technical architecture that supports the CMS and DMAS vision for current and future services and performance, including items such as SOA architecture, an enhanced content management system that includes reports produced by our business partners, and supporting a variety of user-friendly methods to access information and services in an environment that is scalable, cost-effective, and easily changed and supports innovation and experimentation

Enhance provider enrollment and management to address the multiple relationships providers have with DMAS and its business partners, such as managed care organizations (MCOs)

Collect and integrate all fee-for-service claims in a single repository

Address encounter processing in a manner that recognizes the variety of managed care models and programs, such as risk-based versus administrative services only (ASO)

Collect clinical data for fee-for-service claims to better measure health outcomes and populate electronic health records (EHR)

Adhere to the MITA seven standards and conditions.

The program is sponsored by CMS and DMAS's Agency Director. MES stakeholders include the DMAS Executive Management Team.

The goal is to transition to a modern MES with no disruption in service.

DMAS management will provide the functional leadership for the procurements, and the program will be managed by the DMAS PMO.

BRnT MES Data Warehouse

BRT Type:	Business Requirement for New Technology	
Date Submitted:	3/2/2020	
Mandate:	Yes	
Mission Critical:	Yes	

Description:

The MES Data Warehouse RFP is required to replace and transform the system and services provided in the current MMIS contract. That contract expires in June, 2018. The specific requirement is to acquire a solution that is consistent with the MITA 3.0 Framework.

The RFP will present the requirements with the expectation that vendor solutions will integrate existing software components that require little or no development and where the development and implementation of business requirements is primarily configuration and testing. The business requirement is to create a single source of truth for a historical data storage.

BRnT MES Encounter Processing

BRT Type:	Business Requirement for New Technology	
Date Submitted:	3/2/2020	
Mandate:	Yes	
Mission Critical:	Yes	

Description:

The MES Encounter Processing RFP is required to replace and transform the system and services provided in the current MMIS contract. That contract expires in June, 2018. The specific requirement is to acquire a solution that is consistent with the MITA 3.0 Framework and addresses the needs of several business areas:

- Business Relationship Management
- · Operations Management
- Provider Management.

The RFP will present the requirements with the expectation that vendor solutions will integrate existing software components that require little or no development and where the development and implementation of business requirements is primarily configuration and testing.

BRnT MES Fee for Service and Core Processing

BRT Type:	Business Requirement for New Technology	
Date Submitted:	3/2/2020	
Mandate:	Yes	
Mission Critical:	Yes	

Description:

The MES Fee-for-Service and Core Processing RFP is required to replace and transform the system and services provided in the current MMIS contract. That contract expires in June, 2018. The specific requirement is to acquire a solution that is consistent with the MITA 3.0 Framework and addresses the needs of several business areas:

- Business Relationship Management
- · Care Management
- · Eligibility and Enrollment Management
- · Financial Management (limited)
- · Member Management
- · Operations Management
- · Performance Management
- · Plan Management
- · Provider Management.

The RFP will present the requirements with the expectation that vendor solutions will integrate existing software components that require little or no development and where the development and implementation of business requirements is primarily configuration and testing.

BRnT MES Financial Management

BRT Type:	Business Requirement for New Technology	
Date Submitted:	3/2/2020	
Mandate:	Yes	
Mission Critical:	Yes	

Description:

The MES Financial Management RFP is required to replace and transform the system and services provided in the current MMIS contract. That contract expires in June, 2018. The specific requirement is to acquire a solution that is consistent with the MITA 3.0 Framework and addresses the needs of several business categories:

- · Accounts Receivable Management
- · Accounts Payable Management
- · Fiscal Management
- · Payment and Reporting (limited)

The RFP will present the requirements with the expectation that vendor solutions will integrate existing software components that require little or no development and where the development and implementation of business requirements is primarily configuration and testing.

BRnT MES Integration

BRT Type:	Business Requirement for New Technology	
Date Submitted:	3/2/2020	
Mandate:	Yes	
Mission Critical:	Yes	

Description:

The MES Integration RFP is required to replace and transform the system and services provided in the current MMIS contract. That contract expires in June, 2018. The specific requirement is to acquire a solution that is consistent with the MITA 3.0 Framework.

The RFP will present the requirements with the expectation that vendor solutions will integrate existing software components that require little or no development and where the development and implementation of business requirements is primarily configuration and testing. The business requirement is to integrate the components of the MES solution.

BRnT MES Pharmacy Benefit Management BRT Type: Business Requirement for New Technology Date Submitted: 3/2/2020 Mandate: Yes Mission Critical: Yes

Description:

The MES Pharmacy Benefit Management RFP is required to replace and transform the system and services provided in the current MMIS contract. That contract expires in June, 2018. The specific requirement is to acquire a solution that is consistent with the MITA 3.0 Framework and addresses the needs of several business areas:

- · Business Relationship Management
- · Care Management
- · Eligibility and Enrollment Management
- · Financial Management (limited)
- · Member Management
- · Operations Management
- · Performance Management
- · Plan Management
- · Provider Management.

The RFP will present the requirements with the expectation that vendor solutions will integrate existing software components that require little or no development and where the development and implementation of business requirements is primarily configuration and testing.

BRT - Medicaid Dental Pro	gram
BRT Type:	Business Requirement for New Technology
Date Submitted:	2/28/2020
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 - Predictive Analytics

BRT Type:	Business Requirement for New Technology	
Date Submitted:	10/10/2019	
Mandate:	Yes	
Mission Critical:	No	

Description:

DMAS recognizes the risk that some providers may bill incorrectly due to either negligence or malice. DMAS would like to mitigate that risk by conducting predictive analytics to find these occurrences and patterns in order to pend and verify claims instead of paying and then trying to recover. This will require a system that can interface with other DMAS resources to have sufficient data input to the process. It will also demand additional resources to execute these processes.

BRT - Service Authorization and Specialty Services

BRT Type:	Business Requirement for New Technology
Date Submitted:	2/26/2020
Mandate:	No
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.

BRT-Active Shooter Detection System

BRT Type:	Business Requirement for New Technology	
Date Submitted:	2/13/2020	
Mandate:	No	
Mission Critical:	Yes	

Description:

DMAS is leading an enterprise procurement for an Active Shooter Detection System. This is a system that can detect an active shooter scenario that is taking place in real time. It will immediately report the incident to the local police department and other appropriate first responders.

Report Title: IT Strategic Plan Budget Tables Agency: 602 Department of Medical Assistance Services (DMAS)

Date: 7/27/2020

	Curre	nt IT Services		
	Costs Yea	ar 1	Costs Yea	ar 2
Category	GF	NGF	GF	NGF
Projected Service Fees	\$1,805,472.00	\$3,660,229.00	\$1,859,636.00	\$3,770,036.00
VITA Infrastructure Changes	\$0.00	\$0.00	\$0.00	\$0.00
Estimated VITA Infrastructure	\$1,805,472.00	\$3,660,229.00	\$1,859,636.00	\$3,770,036.00
Specialized Infrastructure	\$0.00	\$0.00	\$0.00	\$0.00
Agency IT Staff	\$2,622,859.00	\$5,091,432.00	\$2,675,316.00	\$5,193,261.00
Non-agency IT Staff	\$962,522.00	\$8,009,962.00	\$962,522.00	\$8,009,962.00
Cloud Computing Service	\$0.00	\$0.00	\$0.00	\$0.00
Other Application Costs	\$27,637,909.00	\$43,274,547.00	\$25,210,689.00	\$21,414,119.00
Total	\$33,028,762.00	\$60,036,170.00	\$30,708,163.00	\$38,387,378.00
		l IT Investments		
	Costs Yea	ar 1	Costs Year 2	
Category	GF	NGF	GF	NGF
Major IT Projects	\$1,081,952.00	\$9,737,562.00	\$0.00	\$0.00
Non-Major IT Projects	\$0.00	\$0.00	\$0.00	\$0.00
Agency-Level IT Projects	\$0.00	\$0.00	\$0.00	\$0.00
Major Stand Alone IT Procurements	\$5,625,000.00	\$16,875,000.00	\$5,625,000.00	\$16,875,000.00
Non-Major Stand Alone IT Procurements	\$0.00	\$0.00	\$0.00	\$0.00
Agency-Level Stand Alone IT Procurements	\$0.00	\$0.00	\$0.00	\$0.00
Procurement Adjustment for Staffing	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$6,706,952.00	\$26,612,562.00	\$5,625,000.00	\$16,875,000.00
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	Costs Yes	I Total IT Budget	Costs Yea	ar 2
Category	GF Costs 1C	NGF	GF Costs 1C	NGF
Current IT Services	\$33,028,762.00	\$60,036,170.00	\$30,708,163.00	\$38,387,378.00
Proposed IT Investments	\$6,706,952.00	\$26,612,562.00	\$5,625,000.00	\$16,875,000.00
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Report Title: IT Strategic Plan Projects

Agency: 602 Department of Medical Assistance Services (DMAS)

Date: 7/27/2020

Projects Medicaid Enterprise System (MES) Program

Oversight and Governance Category: Category 1: High/High

Investment Business Case Approval

DMAS is replacing its existing Medicaid Management Information System (MMIS) and transforming to a Medicaid Enterprise System (MES).

The MMIS is the mechanized claims processing and information retrieval system which states are required to have by CMS (Centers for Medicare & Medicaid Services). The contract to operate Virginia's MMIS (VAMMIS) ends June 30, 2018. This represents the end of the fourth and final option year that is expected to be exercised on top of the initial four year contract period, or a total of eight years. Virginia must begin the procurement process to replace VAMMIS and acquire a new system so it can continue to:

- · Enroll recipients and providers
- · Process claims
- · Pay the providers, Managed Care Organizations (MCOs) and Administrative Services Organizations (ASOs) that deliver services to members.

CMS requires that the Single State Medicaid agency (DMAS) must operate a federally-certified system in order to qualify for federal financial participation for its Medicaid program. The current VAMMIS system must be replaced to ensure that Virginia will continue to receive the maximum federal funding for its Medicaid program. Virginia received approximately \$4.5 billion in federal funding in SFY 2015.

The Medicaid Enterprise System Program (MES) program will address the business, information, and technical requirements needed to meet Agency needs and Medicaid Information Technology Architecture (MITA) objectives. MITA is an initiative of CMS to establish national guidelines for technologies and processes that improve program administration for the state Medicaid Enterprise System. During a recently completed MITA State Self-Assessment, DMAS reviewed its current systems and operations and began identifying what should be changed and adopted going forward.

While the direction will be further developed through RFP development, some key objectives have been identified for the new MES that include:

- · Continue the development of the Eligibility & Enrollment (E&E) enhancement to address all existing members and to integrate with additional intrastate systems, such as the Commonwealth Authentication System (CAS)
- · Develop a data warehouse that improves the breadth and quality of data available and provides the information needed to manage, operate, measure and improve the Medicaid Enterprise
- · Transform the traditional Medicaid Management Information System (MMIS) to a modern Medicaid Enterprise System, including:
- o Pursuing a modular approach to specific business needs where cost-effective robust solutions can easily be integrated, possibly in areas such as claims processing, financial management and pharmacy

benefits

- o Identifying ways to further automate and integrate business processes that were not traditionally part of an MMIS but are components of the MES, such as managing member and provider appeals and contractor management
- o Creating provider and member portals that support the 'one stop shop' objective and improve information access and service for all Medicaid related needs
- o Supporting exchanges with federal, State and other entities, including the Health Insurance Exchange (HIX) and Health Information Exchange (HIE)
- Expanding the automation and decision making associated with business processes where feasible and cost-effective
- · Establish a technical architecture that supports the CMS and DMAS vision for current and future services and performance, including items such as SOA architecture, an enhanced content management system that includes reports produced by our business partners, and supporting a variety of user-friendly methods to access information and services in an environment that is scalable, cost-effective, and easily changed and supports innovation and experimentation
- · Enhance provider enrollment and management to address the multiple relationships providers have with DMAS and its business partners, such as managed care organizations (MCOs)
- · Collect and integrate all fee-for-service claims in a single repository
- · Address encounter processing in a manner that recognizes the variety of managed care models and programs, such as risk-based versus administrative services only (ASO)
- · Collect clinical data for fee-for-service claims to better measure health outcomes and populate electronic health records (EHR)
- · Adhere to the MITA seven standards and conditions.

The program is sponsored by CMS and DMAS's Agency Director. MES stakeholders include the DMAS Executive Management Team.

The goal is to transition to a modern MES with no disruption in service.

DMAS management will provide the functional leadership for the procurements, and the program will be managed by the DMAS PMO.

Planned Project Start Date: 12/21/2015	Planned Project End Date: 9/30/2018

Estimated Costs:	Lotal		Nongeneral Fund
Project Cost	\$6,236,518.00	\$623,651.80	\$5,612,866.20
Estimated project expenditures first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated project expenditures second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

MES MMIS Fiscal Agent Services Bridge Procurement

The MMIS current Fiscal Agent, Conduent, will, as a fallback contingency, continue to provide select business functions (Claims, Reference, Payment, and FileNet prociessing and provider enrollment) until Accenture is ready to provide OPSS & PLMS operations. Notionally, this would involve a sole-source contract for 2 years, followed by one optional contingency year.

MES Program Enterprise Architect Procurement

DMAS Information Management has an immediate need for an Enterprise Architect. IM would like to procure the services of Rajan Gopalakrishnan.

Roles and Responsibilities include:

Enterprise Architect Roles and Responsibilities:

- · Extensive knowledge of HIPAA X 12, NCPDP D.0, ICD 10, MITA 3.0, SOA technologies, web services, JAVA, RDBMS, Work flow products, Share point, HL7, Legacy programming.
- · Extensive Knowledge of IBM Enterprise Service Bus, WTX, MQ.
- · Extensive Knowledge of Medicaid Encounter processing.
- · Extensive Knowledge in the Medicaid business processes.
- · Extensive knowledge on integration of heterogeneous systems.
- · Developing/Deploying service enabled logic to Websphere ESB.
- · Developing aggregate web services, mediations to provide real time transactions.
- · Employing ESB capabilities appropriately from service discovery and availability.
- · Thorough knowledge of both standard and agile SDLC methodologies.
- · Knowledge of emerging development tools and integration architecture and use of these tools in a distributed environment.
- · Demonstrated ability to design, develop and test solutions for complex solutions while meeting user and agency needs.
- · Demonstrated ability to work independently and to effectively communicate with all levels of an organization (peers, subordinates and superiors), external agencies, CMS, VITA and vendors

Period of Performance: Anticipated period of performance is from 2/1/16 begin date through project completion or until hours exhausted.

MES Program IV&V Services Procurement

Procure IV&V services for the MES Program and all of the qualifying component projects, to be conducted throughout the MES Program lifecycle, designed to satisfy the IV&V requirements of both the Commonwealth IT Project Management Standards, and the Federal CMS requirements. This competitive procurement qualifies for CMS 90/10 funding.

MES RFP Assistance Procurement

The contractor will provide experienced resources to assist in the development, tracking and validation of requirements for the RFP procurement project.

The tasks include:

· Provide Business Architect Analyst (BAA) support to assist in joint application requirements sessions that are MITA 3.0 knowledgeable, CMS 7 Standards and Conditions knowledgeable, Medicaid and MMIS

knowledgeable, and MITA Business Processes knowledgeable.

- · BAA should be able to conduct joint application requirements sessions with multiple business units. The BAA is responsible to capture all requirements as well as to include additional industry requirements. After BAA requirements validation, Final requirements will be approved by the PMO.
- · Risk Assessment report on requirements
- · Supplier will provide an Online Requirements Tracking Tool that allows for weekly reporting and downloads. Tool should be able to provide traceability to MTIA business processes or unique business processes. The tool should be capable of tracing to CMS' MITA Enterprise Certification Toolkit (MECT) checklist.
- · BAA will compile final requirements, validate against business processes, and present final work product.
- · BAA will be required to provide content for overview of various business areas of the RFP.
- · BAA can be assigned up to 2 RFP tracks.
- · Conduct an evaluation of the draft RFPs. Make recommendations for the drafts.

The expected duration of the assignment is 5 months.

MES Test Support Tool Procurement

DMAS needs to obtain the IBM Rational (DOORs) products for requirement and testing needs for the MES Program. The COTS product will be installed and configured on a server without any product customization. Note that there is an exception request that has been approved for cloud hosting. The CIO approval letter and DMAS response is uploaded. Also, DMAS plans to purchase this software off of an existing state contract.

MES Workflow Automation Procurement

DMAS needs to obtain a workflow automation tool to use in conjunction with SharePoint (or SharePoint substitute) to automate internal workflows as well as the future interoperability with MES contractor workflows.

MMIS Services Procurement

Services are needed to augment the DMAS team to develop 5 RFPs and one statement of work. A contractor will be used to develop the RFPs, provide architecture input to concept of operations, a security architect will provide input to the security plan, and resources will be used to assist in assessing the supplier responses.

MES Data Warehouse

Oversight and Governance Category: Category 1: High/High

Project Initiation Approval

The data warehouse solution will provide the DMAS Agency with the ability to accomplish improved business operations through data integration, creation of data quality standards, data and business process documentation, creation of a repeatable framework, and increased security.

The Enterprise Data Warehouse Solution (EDWS) provides the functionalities listed below, but not limited to:

- Data Standardization
- Interoperability and integration
- Secure Data Exchange

- Promote industry best practices
- Efficient and effective data sharing
- Support integration of clinical and administrative data
- · Promote seamless information flow between systems without barriers such as source of program sponsorship, geography, etc.

Project Approach: The goal of DMAS in this procurement is to select an EDWS that serves as a central repository for all of DMAS's relevant data that will enable timely, accurate and consistent information and ultimately, empower the decision makers to make the most informed decisions possible. DMAS's goal is to implement an EDWS that complies with the Seven Conditions and Standards, as mandated by CMS, in order to provide timely data to help improve the delivery of Medicaid services. The use of the EDWS to provide integrated Medicaid-related program data will provide the State's Medicaid Program with an enhanced ability to gain insights into outcomes and anticipate future needs. Ultimately, the EDWS is expected to facilitate users in answering vital questions relating to the Medicaid program.

The DMAS EDWS project will require multiple phases, each releasing new capabilities, including improved data quality and analytical competences. The EDWS will be built using a multi phase approach.

- Phase 1: Build data management foundation and convert historical data
- Phase 2: Establish extract and load process for NEW SYSTEMS
- Phase 3: Advanced and Improved Data Sharing

Specific solution: Through this procurement process DMAS has identified the Optum Triple Aim Analytic Services (OTAAS) solution provided by the vendor Optum. OTAAS is an integrated commercial off the shelf (COTS)-based health care data warehouse and innovative analytic platform. It provides analytics already being used by government and commercial payers in order to achieve their Triple Aim goals targeting better care, better health and lower cost. With OTAAS, DMAS can fulfill all the objectives of the EDWS and support the MES goals. OTAAS combines a centralized enterprise data warehouse with integrated analytics and reporting capabilities that serve business imperatives across state programs. The solution is aligned to all three MITA Framework architectures: Business; Information; and Technical. The architectural design is based on best practices such as the use of open standards and COTS. Each of the individual components of our OTAAS solution for the EDWS, whether they are hardware, application, or network-related, is architected and integrated using a HIPAA-compliant security framework and business-hardened, fault-tolerant redundancy.

Customer: DMAS Data Analytics Directorate, FInance & Policy, Program Integrity and Operations, Contract Management (Managed Care) and other departments within the agency.

Benefits: The data warehouse solution will provide the DMAS Agency with the ability to accomplish improved business operations through data integration, creation of data quality standards, data and business process documentation, creation of a repeatable framework, and increased security.

Planned Project Start Date: 7/31/2017	ll.	7/2/2020	oject End Date:
		General	Nongeneral

Estimated Costs:	Lotal		Nongeneral Fund
Project Cost	\$27,572,361.50	\$3,083,278.00	\$27,749,503.00
Estimated project expenditures first year of biennium:	\$0.00	\$0.00	\$0.00

Estimated project expenditures second year of biennium:	\$0.00	\$0.00	\$0.00
Project Related Procurements			
There are no procurements for this project			
MES Data Warehouse Procurement			
Procure Data Warehouse services and tools as a component o	f the MES Progra	am.	
MES Program Staffing Procurement			
Information Management has an immediate need to procure to III) to support the (a) Medicaid Enterprise Services (MES) Enthe (b) MES Integration Solution Services (ISS) Project.			
MES Integration			
	<u></u>		
Oversight and Governance Category: Category 1: High/High	Project Initiati	on Approval	
This is a component project within the DMAS MES Program The purpose of the ISS project is to contract with a contractor a self-contained, SOA-based communication broker, which probelow, but not limited to: Ø Communication Services	who will provid		
 Ø Document Transfer Services Ø Document Management Services Ø Information Exchange Services Ø File Transfer Services Ø Data Transfer Services Ø Information Viewing Services 			
The solution will serve as a hub to integrate various modules projects listed below. In addition the ISS project will provision Management solution for the Agency. Finally the integrator wand configuration/change management support for the MES	n a Single Sign (vill provide and n	On (SSO) and Ide	entity
 Ø Core Services Solution (CSS) Ø Enterprise Data Warehouse Solution (EDWS) Ø Financial Management Solution (FMS) Ø Pharmacy Benefit Management Solution (PBMS) 			
Planned Project Start Date: 10/26/2017		Planned Project 6/26/2020	End Date:
			6/1

Estimated Costs:			Nongeneral
		Fund	Fund
Project Cost	\$27,571,704.00	\$2,670,747.00	\$24,036,717.00
Estimated project expenditures first year of biennium:	\$0.00	\$0.00	\$0.00
Estimated project expenditures second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

MES Integration Procurement

Procure integration services and tools to incorporate and implement all of the components of the MES Program.

The role of an Integration Service Vendor (Integrator) in a Medicaid Enterprise system is to provide secure data exchange between the application modules within an agreed upon SLA using canonical data format, standards and protocols.

The Integrator will develop SOA based services based on the design principles as prescribed by MITA (e.g. Standardized Contract, Loose Coupling, Abstraction, Reusability, Autonomy, Statelessness, Discoverability and Composability).

MES MMIS Fiscal Agent Extend Services Procurement

In support of the MES Program, the need has arisen for the current MMIS Fiscal Agent (Conduent) to continue providing MMIS services until June 30, 2019. The current Conduent contract cannot be extended beyond June 30, 2018, therefore a NEW, sole source contract is being negotiated rather than pursuing a contract modification/extension. Note that the new Conduent contract will be for one years at approximately \$60M per year, with a contingency year added at the same rate. The contract will combine MMIS, E&E, Provider Enrollment and Cover VA.

MES Program Staffing Procurement

Information Management has an immediate need to procure the services for two Project Managers (PM Level III) to support the (a) Medicaid Enterprise Services (MES) Enterprise Data Warehouse (EDWS) Project and the (b) MES Integration Solution Services (ISS) Project.

MES Workflow Automation Procurement

DMAS needs to obtain a workflow automation tool to use in conjunction with SharePoint (or SharePoint substitute) to automate internal workflows as well as the future interoperability with MES contractor workflows.

MES Encounter Processing

Oversight and Governance Category: Category 1:	Project Initiation Approval
High/High	1 Toject Initiation Approvai

This is a component project within the DMAS MES Program. The objective is to develop an in-house

DMAS solution for processing encounters from managed care and administrative services contractors. The system will give DMAS more control over the processing approach and schedule for encounters, and will segregate that processing from the fee-for-service claims system.

The EPS will leverage the technical environment already in place, including the DMAS EDI Gateway that was implemented in December, 2015. The EDI Gateway will be used to collect encounters using HIPAA standard formats, and enforce compliance edits. The EDI Gateway will pass encounters to the EPS for further validation. The EPS project includes creating the needed environments, i.e. hardware and software, to develop, test, and operate the encounter processing solution.

The EPS will validate and process encounters. Encounter processing status and results will be captured and made available to submitters and business owners. Encounters will be loaded to the Enterprise Data Warehouse Solution (EDWS) and available for analysis and reporting.

The EPS will be developed, operated and maintained by DMAS using its existing internal development staff and an operations support staff to be created. It will support all current and future DMAS programs that require encounter processing, including:

- Medallion 3.0
- Non-Emergency Transportation
- Behavioral Health
- Dental
- Consumer Directed services
- Managed Care for Duals (CCC, MLTSS)

The EPS will incorporate a Business Rules Engine (IBM Operational Decision Manager (ODM)) to support a configurable approach to defining edits, which will make future changes more efficient (quicker and less expensive). By hosting and maintaining the EPS, DMAS will significantly reduce the cost of operating the EPS in the years to come, as well as avoid the need to reprocure the EPS in the future.

Planned Project Start Date: 8/17/2016	Planned Project End Date: 12/31/2020

Estimated Costs:	Lotal		Nongeneral Fund
Project Cost	\$10,699,009.00	\$1,030,853.00	\$9,277,671.00
Estimated project expenditures first year of biennium:	\$819,514.00	\$81,952.00	\$737,562.00
Estimated project expenditures second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

There are no procurements for this project

MES Encounter Processing Procurement

Procure Managed Care Processing services and tools as a component of the MES Program.

* * * Note: As of 2/2/16, DMAS is NOT planning on conducting a procurement for Encounter Processing; rather, that functionality will either be developed in-house, or it may be incorporated into a vendor solution offering. * * *

MES Fee for Service and Core Processing

Oversight and Governance Category: Category 1: High/High

Project Initiation Approval

Planned Project End Date:

The MES Modular Core Services Solution (MCSS) project addresses many of the business requirements that will comprise the MES solution, as mandated by CMS through the MITA 3.0 Framework.

The MES Fee-for-Service and Core Processing RFP is required to replace and transform the system and services provided in the current MMIS contract. This project will implement vendor-supplied solutions. The specific requirement is to acquire a solution that is consistent with the MITA 3.0 Framework and addresses the needs of several business areas:

- · Business Relationship Management
- · Care Management
- · Eligibility and Enrollment Management
- · Financial Management (limited to Medicaid and not addressing agency General Ledger which is being address by a separate project)
- · Member Management
- · Operations Management
- · Performance Management (to be addressed by RFP 2016-05 Electronic Data Warehouse)
- · Plan Management
- · Provider Management.

The associated RFPs' will present the requirements with the expectation that vendor solutions will integrate existing software components that require little or no development and where the development and implementation of business requirements is primarily configuration and testing.

Planned Project Start Date: 10/13/2017		1/31/2020	
Estimated Costs:			Nongeneral Fund
Project Cost	\$78,132,905.00	\$9,013,290.00	\$79,119,615.00
Estimated project expenditures first year of biennium:	\$10,000,000.00	\$1,000,000.00	\$9,000,000.00
Estimated project expenditures second year of biennium:	\$0.00	\$0.00	\$0.00
	•		

Project Related Procurements

There are no procurements for this project

MES Fee for Service and Core Processing Procurement

- i. Procure system and professional services and tools as a component of the MES Program that address business processes in the following business areas:
- · Business Relationship Management
- · Care Management
- · Eligibility and Enrollment Management
- · Financial Management (limited)
- · Member Management
- · Operations Management
- · Performance Management

- Plan Management
- Provider Management.

Service Authorization and Specialty Services

Oversight and Governance Category:

Investment Business Case Approval

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.

The services will be procured through a competitive RFP which will include ECOS requirements.

Planned Project Start Date: 3/31/2020 Planned Project End Date: 12/31/2020

Estimated Costs:	Lotal		Nongeneral Fund
Project Cost	\$250,000.00	\$50,000.00	\$200,000.00
Estimated project expenditures first year of biennium:	\$250,000.00	\$50,000.00	\$200,000.00
Estimated project expenditures second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

Service Authorization and Specialty Services - Procurement

This is a procurement for 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.

The services will be procured through a competitive RFP which will include ECOS requirements.

Medicaid Dental Program

Oversight and Governance Category: Category 2: High/Medium or High/Low or Medium/High

Investment Business Case Approval

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 reevaluate 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.

Planned Project Start Date: 6/30/2020

Planned Project End Date: 6/30/2021

Estimated Costs:	lotal		Nongeneral Fund
Project Cost	\$1,000,000.00	\$100,000.00	\$900,000.00
Estimated project expenditures first year of biennium:	\$1,000,000.00	\$100,000.00	\$900,000.00
Estimated project expenditures second year of biennium:	\$0.00	\$0.00	\$0.00

Project Related Procurements

Medicaid Dental Program - Procurement

Competitive procurement for replacement Medicaid Dental vendor.

Cover VA Implementation Project

Oversight and Governance Category: Category 2: High/Medium or High/Low or Medium/High

Project Initiation Approval

Implement the Cover Virginia (CoverVA) Operations service. The Cover Virginia Operations will be primarily composed of a Medicaid/FAMIS State-Wide Call Center, an eligibility Central Processing Unit (CPU) for Medicaid/FAMIS eligibility determinations, and a Cover Virginia Incarcerated Unit (CVIU) with a call center and eligibility staff that works with correctional facilities, as well as hosting and maintaining the Cover Virginia Websites and domains. These operational units will include the necessary supporting operations such as: a mailroom; systems support; quality control assurance; training; website development operations; appeals; and other resources.

Planned Project Start Date: 4/20/2020

Planned Project End Date: 6/30/2021

Estimated Costs:			Nongeneral Fund
Project Cost	\$10,265,182.00	\$3,000,000.00	\$9,000,000.00
Estimated project expenditures first year of biennium:	\$12,000,000.00	\$3,000,000.00	\$9,000,000.00
Estimated project expenditures second year of biennium:	\$0.00	\$0.00	\$0.00
Project Related Procurements There are no procurements for this project			

Report Title: IT Strategic Plan Procurements Agency: 602 Department of Medical Assistance Services (DMAS) Date: 7/27/2020

Stand Alone	Procurements:
Procurement Name:	Cover Virginia Call Center Operations
	DMAS is soliciting proposals from qualified firms to serve as a Cover Virginia (CoverVA) Operations Contractor. The Cover Virginia Operations will be primarily composed of a Medicaid/FAMIS State-Wide Call Center, an eligibility Central Processing Unit (CPU) for Medicaid/FAMIS eligibility determinations, and a Cover Virginia Incarcerated Unit (CVIU) with a call center and eligibility staff that works with correctional facilities, as well as hosting and maintaining the Cover Virginia Websites and domains. These operational units will include the necessary supporting operations such as: a mailroom; systems support; quality control assurance; training; website development operations; appeals; and other resources. Qualified organizations shall be capable of operating a comprehensive, state-wide operation that is primarily
	composed of a Call Center, Eligibility Unit, a Pregnant Women Unit, and a Cover Virginia Incarcerated Unit, as well as hosting and maintaining the Cover Virginia Website, and all necessary supporting operations. Specific details about this procurement are in the enclosed Request for Proposal (RFP) 2020-03.
Procurement Date:	1/3/2020
Procurement Name:	Granicus/GovDelivery Service
	The Granicus/GovDelivery service is a secure marketing- automation platform that will enable DMAS to connect with consumers and stakeholders. The agency will be able to engage with specific segments of potential members and increase that audience using text-to-subscribe and social media promotion, motivating interested citizens to visit the CoverVA website for information and future enrollment opportunities.
Procurement Date:	6/20/2020
Dan arrana and	
Procurement Name:	Predictive Analytics - Procurement
Procurement Description:	The purpose of this work is to establish a program using prepayment analytics to mitigate the risk of improper payments to providers of services that are paid through the Department's fee-for-service and managed care delivery systems as a result of fraud, abuse, or errors. Such program shall identify providers and claims with a high likelihood of fraud, abuse, or error and prevent payments on potentially fraudulent claims from being made until such claims have been validated.
	DMAS envisions the Predictive Analytics solution to be a third-party, cloud-based proprietary system and associated service which uses Commonwealth PHI and billing data to obtain the output, which is then used to achieve the desired business outcomes.
Procurement Date:	4/1/2020
Procurement Name:	Sole Source: Extend Cover VA Services with Conduent
	Sole Source Procurement: (Sole Source Authorization uploaded). DMAS is conducting an RFP to replace the current Cover VA services, however due to delays, DMAS needs to continue current operations for the Cover VA Services with Conduent in the interim until the new contract can be awarded and the Contractor is ready for go live. The DMAS Cover VA Services contract performs several business support functions for the agency, to include but not limited to the following: Operation of a Call Center for the Medicaid and CHIP programs, facilitate transition of incarcerated individuals into the Medicaid system, operation of the Cover

	VA Central Processing Unit (CPU), and other business operation services. This is a Base 9-month contract, plus One (1) 6-month renewal option.
Procurement Date:	6/30/2020
Procurement Name:	Active Shooter Detection System Procurement
Description.	DMAS is leading this procurement. It is anticipated that this solution would be useful to most or all Commonwealth agencies.
Procurement Date:	5/15/2020
Procurement	