

Senior and Disability Services System Upgrade

FY2012 Request: \$2,700,000

Reference No: 50917

AP/AL: Appropriation

Project Type: Information Technology / Systems / Communication

Category: Health/Human Services

Location: Statewide

House District: Statewide (HD 1-40)

Impact House District: Statewide (HD 1-40)

Contact: Arnold Liebelt

Estimated Project Dates: 07/01/2011 - 06/30/2016

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Brief Summary and Statement of Need:

The Division of Senior and Disability Services (DSDS) case management system, known as DS3, was designed and built in house over the last 5 years. Some of the technology used is now obsolete and is difficult to maintain. Continual development to support changing business and regulatory needs has compounded this issue. The system was originally proposed as the means to consolidate the DSDS program waivers into a single database.

Funding:	FY2012	FY2013	FY2014	FY2015	FY2016	FY2017	Total
Fed Rcpts	\$1,350,000						\$1,350,000
G/F Match	\$1,350,000						\$1,350,000
Total:	\$2,700,000	\$0	\$0	\$0	\$0	\$0	\$2,700,000

<input type="checkbox"/> State Match Required	<input checked="" type="checkbox"/> One-Time Project	<input type="checkbox"/> Phased - new	<input type="checkbox"/> Phased - underway	<input type="checkbox"/> On-Going
0% = Minimum State Match % Required		<input type="checkbox"/> Amendment	<input type="checkbox"/> Mental Health Bill	

Operating & Maintenance Costs:

	<u>Amount</u>	<u>Staff</u>
Project Development:	0	0
Ongoing Operating:	0	0
One-Time Startup:	0	0
Totals:	0	0

Additional Information / Prior Funding History:

CH134/SLA2000/ Page 10/Line 9 \$308,200
 CH95/SLA2002/Page 12/Line 12 \$238,000

Project Description/Justification:

Information Technology Capital Project Review Form FY2012

1. Has this project been previously approved?

Yes.

2. What is the purpose of the project?

The Division of Senior and Disability Services (DSDS) case management system, known as DS3, was designed and built in house over the last 5 years. Some of the technology used is now obsolete and is difficult to maintain. Continual development to support changing business and regulatory needs has compounded this issue. The system was originally proposed as the means to consolidate the DSDS program waivers into a single database. The current system state, in conjunction with Federal and state regulation changes along with continued internal program reorganization, substantial program changes and compliance struggle with Center for Medicare and Medicaid Services (CMS) and information security standards have made for a significant backlog in requests for changes to the current system translate into increases to time required to deliver fixes and maintenance costs.

Commercial Off the Shelf (COTS) systems are now available and in use by many states and counties around the country to deliver the functionality that is required in DS3.

Evaluate and determine, from both a program and technical perspective, the feasibility of moving from the in-house developed DS3 system and migrate to a COTS solution.

Procure, migrate, train and focus the build out of the COTS solution to meet the Divisions mission and obligations to its stakeholders.

The Aging Section of DSDS has successfully used a COTS case management system for several years. That same package is now available for disability and waiver management. Ideally the license for this package could be expanded to encompass the entire division.

Goals and Objectives: Objectives for the goal of flexibility with required functionality include 1) alerts for client system involvement; 2) Integrated assessment information linked to client information; 3) Secure external provider access for reporting and tracking service delivery; and 4) Integrated and customizable reporting engine for generating required Federal and State reports of program effectiveness and overall health.

All 4 Medicaid Waiver Programs plus Personal Care Attendant (PCA) must be supported.

1. Must support:

- a. Adults with Physical Disabilities
- b. Older Alaskans
- c. Children with Complex Medical Conditions
- d. Development Disabilities/Mental Retardation
- e. Personal Care Assistance

2. Must support input from other places (examples were senior Grants, Development Disability, and Waitlist)

3. Must manage submitted waiver application from start to finish and provide information for status of waiver at any point in time.

The goal of the ability to provide reports and letters requires:

1. System must be able to automatically affix dates at key input points and at key processing points.

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- 2. Must be able to generate letters based upon key processing points.
- 3. Must provide necessary data for generating performance reports.

Support plan management has 3 objectives:

- 1. Broaden access for providers and participants
- 2. Handle new plan of care
- 3. Handle ADRC and Automated Service Plans.

Project cost:	Capital:			Annual O&M costs or savings
	Prior Years	FY 2012	FY 2013	
General Funds		1,350.0		
General Fund Match				
General Fund Program Receipts				
I/A Receipts (dept. and fund source)				
Other Funds (name and fund number)				
Federal Funds		1,350.0		
Total		\$2,700.0		

- 3. Is this a new systems development project?
 Upgrade or enhancement to existing department capabilities? Yes
- 4. Specifically, what hardware, software, consulting services, or other items will be purchased with this expenditure? (Include a line item breakdown.)

Though costs are shown in FY12 and FY13, funding in the full amount is needed now in order to secure, test, remediate and implement the system.

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	Cost	Cost	
Project Initiation / Planning	148.0		148.0
Requirements Definition	100.0		100.0
Staff Resources Required			0.0
Contractual Staffing Resources Required			0.0
System Design	100.0		100.0
Software Acquisition	850.0		850.0
Software Installation / Programming	360.0		360.0
Hardware / Infrastructure Acquisition	100.0		100.0
Hardware / Infrastructure Installation	30.0	10.0	40.0
Hardware / Infrastructure Testing	15.0	4.0	19.0
System Integration and Testing	115.0	330.0	445.0
Installation and Deployment	30.0	260.0	290.0
System Operation and Maintenance			0.0
Corrective and Adaptive Maintenance		183.0	183.0
Training		65.0	65.0
Total:	\$1,848.0	\$852.0	\$2,700.0

5. How will service to the public measurably improve if this project is funded?

All federal reporting to meet regulatory compliance will be generated by the COTS.

New and existing federal reporting requirements will not require reprogramming or added costs to DSDS but will be part of the COTS support agreement.

Providers will be able to access their clients in a safe, secure and HIPAA compliant fashion on the COTS system.

Service plans and service delivery will be tracked by the provider on the system.

6. Does project affect the way in which other public agencies will conduct their business?

It is not expected that this system will affect the way other public agencies conduct business.

7. What are the potential out-year cost implications if this project is approved? (Bandwidth requirements, etc.)

Personal Services, \$850.0

Software Licensing & Maintenance, \$275.0

8. What will happen if the project is not approved?

Failure to have a fully functional case management system to capture essential data elements, quality assurance factors, and manage eligibility determinations will result in DSDS's failure to meet CMS's requirements for continued Home and Community Based Waiver participation. As a result, Alaska will lose federal funding for some or all of the federal match for this program and qualified Alaskans in

need will lose access to essential services that allow them to remain safely in their homes. Skilled nursing facility admissions would rise. For Medicaid recipients, skilled nursing care is a mandatory covered service. Skilled nursing admissions could quickly exceed existing capacity, leaving Alaskans without essential services and higher hospitalization rates. This case management system is also essential to manage Adult Protective Services, Assisted Living Home placements, the State Plan Personal Care Assistance Program, Nursing Home Admissions and the Traumatic Brain Injury case management program. All of these programs would lose efficacy and efficiency, resulting in delays in services, failure to track protective services activities, all of which increases liability for the State of Alaska and the risk of litigation.

Mission statement: To promote the health and well being of Alaskans.

End Results: Alaskans have access to health care. The physical health of Alaskans is optimized. Alaskans receive the long-term care they need.