



# Stage 2 Alternatives Analysis

California Department of Technology, SIMM 19B.2 (Ver. 3.0.8, 02/28/2022)

## 2.1 General Information

1. **Agency or State Entity Name:** 4170 - Aging, Department of

If Agency/State entity is not in the list, enter here with the [organization code](#).

[Click or tap here to enter text.](#)

2. **Proposal Name:** MSSP Case Management System

3. **Department of Technology Project Number (0000-000):** 4170-021

4. **S2AA Version Number:** Version 3

5. **CDT Billing Case Number:** CS0072788

Don't have a Case Number? [Click here to get one.](#)

## 2.2 Submittal Information

1. **Contact Information**

Contact Name: Audrey Kagiya

Contact Email: [audrey.kagiya@aging.ca.gov](mailto:audrey.kagiya@aging.ca.gov)

Contact Phone: 916-283-7131

2. **Submission Type:** Updated Submission (Pre-Approval)

If Withdraw, select Reason: [Choose an item.](#)

If Other, specify reason here: [Click or tap here to enter text.](#)

**Sections Changed if an update or resubmission:** (List all the sections that changed.)

2.6 – Dependencies, 2.8 – Viable Alternatives, 2.9 – Project Organization

**Summary of Changes:** (Summarize updates made.)

[Updated to align with updated FAW. Reduced the number of positions being requested.](#)

3. Attach [Project Approval Executive Transmittal](#) to your email submission.
4. Attach [Procurement Assessment Form](#) to your email submission.
5. **Conditions from Stage 1 Approval** (Enter any conditions from the Stage 1 Business Analysis approval letter issued by CDT or your AIO):

None identified.

## 2.3 Baseline Processes and Systems

1. **Current Business Environment (Describe the current business environment of which the effort will be understood and assessed in 500 words)**

The California Department of Aging (CDA) Multipurpose Senior Services Program (MSSP) Bureau contracts with 37 local MSSP Providers across the state to provide public assistance to eligible older adults. The services provided enable participants to remain in their own home as opposed to being placed in a care facility. Participant program eligibility, care management, and billing are conducted at the MSSP Provider level. The MSSP Bureau is responsible for administering the program and monitoring Provider sites to ensure program requirements are being followed. On a monthly, quarterly, and annual basis, Providers are responsible for reporting program-related data to the MSSP Bureau. Due to differences in Provider business support systems, report files are often sent to CDA in various formats. Once individual reports are received, the data from all Provider sites is manually consolidated, formatted, and reported to the Department of Health Care Services (DHCS) as the designated Medicaid/Medi-Cal state agency.

For detailed program requirements, refer to the MSSP Site Manual located at [https://www.aging.ca.gov/Providers\\_and\\_Partners/Multipurpose\\_Senior\\_Services\\_Program/Site\\_Manual/](https://www.aging.ca.gov/Providers_and_Partners/Multipurpose_Senior_Services_Program/Site_Manual/)

*Tip: Current Environment costs will be asked for in the Financial Analysis Worksheet to be completed in Section 2.12.*

**Attach** relevant documentation to email submission (i.e., business process, workflow, problem analysis, user/stakeholder list, research findings). If these types of documents are not available, please indicate “Not Available,” and explain the reason below:

Not available reason: [Click or tap here to enter text.](#)

2. **Technical Context (Describe the technical environment of which the effort will be understood and assessed in 500 words)**

The Project is proposing to implement a single case management solution that would be utilized by all 37 Provider sites as well as the MSSP Bureau. The system would support MSSP daily operations as well as state-level programmatic reporting requirements all within a single application.

The main business processes to be included as part of the project are:

- Intake – The process of capturing potential participants and pre-screening for program eligibility.
- Application – The process of capturing detailed participant information to facilitate the enrollment into the program or placement on a waitlist until such time services can be provided.
- Enrollment – The process of confirming program eligibility and establishing an agreement between Provider and participant.
- Care Management – The process of creating care plans and managing the services provided to a participant, including regular contacts, reassessments, and recertifications.
- Reporting – Support for enhanced data collection to facilitate state-level programmatic and financial reporting, such as participant and service information, critical incidents, billing, and CDA contractual reporting requirements such as budgets and vendor licensing.

**Attach** relevant documentation to email submission (i.e., logical system environment diagrams, system interactions, business rules, application flows, stakeholder information, data flow charts). If these types of documents are not available, please indicate “Not Available,” and explain the reason below:

Not available reason: [Click or tap here to enter text.](#)

### 3. Data Management (Enter the information to indicate the data owner and custodian of the current system, if applicable.)

Data Owner Name: [Denise Likar](#)

Data Owner Title: [Deputy Director](#)

Data Owner Business Program area: [Home and Community Living](#)

Data Custodian Name: [Philip Wright](#)

Data Custodian Title: [Database Administrator](#)

Data Custodian Technical area: [Application Development and Database Administration](#)

Security - Data Classification and Categorization [Yes](#)

Security – Privacy

Threshold & Impact Assessment. [No](#)

### 4. Existing Data Governance and Data

a) Do you have existing data that must be migrated to your new solution?

**Answer** (Unknown, Yes, No): [Yes](#)

If data migration is required, please rate the quality of the data.

Select data quality rating: [No information available](#)

- b) Does the Agency/state entity have an established data governance body with well-defined roles and responsibilities to support data governance activities?

**Answer** (Unknown, Yes, No): No

If Yes, include the data governance organization chart as an attachment to your email submission.

- c) Does the Agency/state entity have data governance policies (data policies, data standards, etc.) formally defined, documented, and implemented?

**Answer** (Unknown, Yes, No): No

If Yes, include the data governance policies as an attachment to your email submission.

- d) Does the Agency/state entity have data security policies, standards, controls, and procedures formally defined, documented, and implemented?

**Answer** (Unknown, Yes, No): Yes

If Yes, attach the existing documented security policies, standards, and controls used to your email submission.

- e) Does the Agency/state entity have user accessibility policies, standards, controls, and procedures formally defined, documented, and implemented?

**Answer** (Unknown, Yes, No): No

If Yes, attach the existing documented policies, accessibility governance plan, and standards used to the email submission.

## 5. Security Categorization Impact Table

**Consult** the [SIMM 5305-A Information Security Program Management Standard - Security Categorization Impact Table](#).

**Attach** a table (in PDF) that categorizes and classifies the agency/state entity's information assets related to this effort (e.g., paper and electronic records, automated files, databases requiring appropriate protection from unauthorized use, access, disclosure, modification, loss, or deletion). Each information asset for which the agency/state entity has ownership responsibility shall be inventoried and identified.

## 6. Security Categorization Impact Table Summary

**Consult** the [SIMM 5305-A Information Security Program Management Standard - Security Categorization Impact Table](#) to provide potential impact levels of the following areas:

Confidentiality: Medium

Integrity: Medium

Availability: Medium

## 7. Technical Complexity Score: 1.6

(Attach a [SIMM Section 45 Appendix C](#) with Business and Technical Complexity sections completed to the email submission.)

## 2.4 Requirements and Outcomes

At this time in the project planning process, requirements and outcomes should be documented and indicative of how the Agency/State Entity envisions the final solution. This shall be accomplished either in the form of mid-level requirements (predictive methodology)/business capabilities or representative epics and user stories (adaptive methodology) that will become part of the product backlog. The requirements or representative epics and user stories must tie back to the Objectives detailed in the Stage 1 Business Analysis. Regardless of which tool/method is used, an understanding of the following, at a minimum, must be clearly articulated:

- Functional requirements
- Expected user experience(s)
- Expected system outcome
- Expected business operations (e.g., How do you envision operations in the future?)
- Alignment to the project's objectives identified in Stage 1
- Product ownership (e.g., Who owns these requirements?); and
- Verification of need(s) fulfillment (e.g., How will success be measured?)

*Tip: If providing requirements, the recommended range of requirements is between 50 and 100.*

**Attach** Requirements and/or Outcomes narratives, mid-level requirements, and/or epics/user stories to submission email.

## 2.5 Assumptions and Constraints

Relevant assumptions and constraints help define boundaries and opportunities to shape the scope and complexity of the project.

**Assumption:** [Waiver Renewal](#)

**Description/Potential Impact:** The MSSP waiver will expire in June 2024. It is anticipated that the Centers for Medicare and Medicaid (CMS) will approve the MSSP waiver renewal with a dependency on this project and a plan to have state-level staff resources conduct eligibility determinations. CMS provides federal approval and federal funding for the MSSP. If this project is denied, it will jeopardize the MSSP waiver program as a whole and the state's ability to provide essential services to the public.

**Constraint:** [Federal Requirements](#)

**Description/Potential Impact:** All mid-level business requirements have been captured. It is not yet known if additional requirements may be needed to obtain CMS approval, certification, and funding support. Any required changes will follow the Change Control Management process.

*TIP: Copy and paste to add Assumptions/Constraints with Descriptions/Impacts as needed.*

## 2.6 Dependencies

Dependencies are elements or relationships in a project reliant on something else occurring before the function, service, interface, task, or action can begin or continue.

**Dependency Element:** [Funding](#)

**Dependency Description:** The MSSP is seeking project funding beginning FY 25/26. If funding is not approved, the project will be placed on hold until funding is available. Potential re-work associated planning activities completed to date (e.g., business process documentation, requirements, project management plans, schedule, and project cost estimates) due to the delay and increase to overall project costs is expected.

*TIP: Copy and paste to add Dependency Elements and Descriptions as needed.*

## 2.7 Market Research

Market Research ([CDT Market Research Guidelines](#)) determines whether products or services available in the marketplace can meet the business needs identified in this proposal. Market Research can also determine whether commercial practices regarding customizing/modifying products or tailoring services are available, or even necessary, to meet the business needs and objectives of the business.

Before undertaking a Market Research approach. Contact your PAO Manager to schedule a collaborative review to review planning to date and discuss the procurement approach.

1. **Project Management Methodology:** [Hybrid](#)
2. **Procurement approach recommended:** [Standard Procurement](#)
3. **Market Research Approach**

Provide a concise narrative description of the approach used to perform market research.

Over the course of approximately 4 months, the Project conducted market research by conducting internet research, evaluated solutions via leveraged agreements, and collaborated with DHCS on their existing waiver program system. In addition, the Project surveyed all 37 MSSP Providers to obtain information regarding existing case management systems, as well as any products that may have been evaluated in the past. Twelve vendors with potential solutions were identified during market research (Aledade, AssureCare, Bonterra/Social Solutions, CareAccess, Epic, FEI Systems, HealthCare IT Leaders, NetSmart, Protech Solutions, RTZ, Salesforce, WellSky). A Request for Information was sent to nine vendors who responded to CDA's request. Taking into consideration the feedback received from Providers as well as internal CDA staff experiences with vendors/products, and analyzing vendor responses against business program requirements, the potential vendor list was scaled down to the four vendor solutions (AssureCare, Bonterra, Protech and RTZ). Market research and vendor solution analysis will continue to be discussed and vetted

by key stakeholders (Enterprise Architecture, Information Security, Budgets, Procurement/Contracts, business program owner and SMEs), project sponsors and CDA leadership. However, all agree with the recommendation to pursue a COTS/SaaS solution. A specific product/solution has not yet been determined as CDA would like to utilize Stage 3 as the opportunity to evaluate the top solution candidates in more detail before final selection.

The results of our market research findings are summarized in the attached analysis document.

#### 4. Market Research Artifacts

Market Research Artifacts can include internet research, collaboration with other governmental entities, or other documentation.

**Attach** Market Research artifacts to the email submission.

## 2.8 Viable Alternative Solutions

The CDT expects Agencies/state entities to conduct a thorough analysis of all feasible alternatives that will meet the proposal's objectives and requirements. Agencies/state entities should provide at minimum the three (3) most viable solutions, one (1) of which could be leveraging and/or enhancing the existing solution (if applicable).

### 1. Viable Alternative Solution #1

**Name:** **Commercial Off-the-Shelf (COTS)/Software as a Service (SaaS)**

**Description:** A COTS/SaaS solution is a generally available product that would be configured according to CDA requirements. Some enhancement/customization is anticipated. This alternative includes the procurement of annual software subscription licenses and one-time implementation services. It is anticipated implementation, from project kick-off through project go-live, will take approximately 18 months. This alternative also budgets for professional services from the primary solution vendor after project go-live to support training, minor change requests or enhancements/customization in anticipation of changes to program requirements and/or regulations. 1.0 new IT staff resource will be required to assist with project implementation as well as ongoing operational support.

**Why is this a viable solution?** Please explain:

This option provides the best overall value for CDA. It leverages a generally available product that has already been designed and developed to meet the healthcare services market and it significantly reduces project complexity compared to a custom-developed application. This alternative has the ability to satisfy program requirements in a timely manner. It greatly reduces the implementation timeframe compared to a custom solution.

#### Approach

Increase staff – new or existing capabilities: **Yes**

Modify the existing business process or create a new business process: **Yes**

Reduce the services or level of services provided: **No**



Utilize new or increased contracted services: [Yes](#)

Enhance the existing IT system: [No](#)

Modify Statute/Policy/Regulations: [No](#)

Please Specify: [Click or tap here to enter text.](#)

Create a new IT system: [Yes](#)

Other: [Choose Yes or No. Specify: Click or tap here to enter text.](#)

## Architecture Information

**Business Function(s)/Process(es):** Refer to section 2.3.2 and attached “8a - 4170-021 MSSP Case Management\_MSSP As-Is\_Process\_Diagram.pdf” and “8b - 4170-021 MSSP Case Management\_Provider\_As-Is\_Process\_Diagram.pdf”.

*TIP: Copy and paste or click the + button in the lower right corner to add business processes with the same application, system, or component; COTS/Cloud Technology or custom solution; runtime environment; system interfaces, data center location; and security.*

### Conceptual Architecture

Attach a copy of the conceptual architecture to your email submission.

Refer to “7 - 4170-021 MSSP Case Management Conceptual Architecture.pdf”.

**COTS/SaaS/Cloud Technology or Custom:** [COTS/SaaS/Cloud Technology](#)

Name/Primary Technology: [Cloud-based](#)

*TIP: Copy and paste or click the + button in the lower right corner to add system software information if the application, system, or component uses additional system software.*

**Explain Existing System Interfaces:** [Currently, there are no direct interfaces between MSSP Provider case management systems and third-party applications. All interactions are conducted manually.](#)

### Explain New System Interfaces:

[The Project is requiring Web Service APIs – The case management solution shall support the ability to upload MSSP Provider data to support required programmatic and fiscal reporting requirements in the event a Provider has not migrated to the new system and the solution must support the ability to export data should the need arise to share data with an external system for historical or analytical reporting \(e.g., data warehouse\).](#)

[The Project also seeks a solution that preferably has the following interfaces:](#)

- [DHCS’ Medi-Cal Eligibility Determination System \(MEDS\) - The MEDS is the system of record for Medi-Cal demographic, eligibility, and coverage data. A standard requirement of the overall care management process is for care managers to confirm participant eligibility and coverage before case management and service provision begins, and to adjust it as necessary in reaction to changes in the participant’s eligibility status. In addition, MEDS supports member contact information inquiries. Member contact](#)



information is used to designate the organization responsible for providing care management to the waiver participant based on his/her address of residence.

- DHCS' California Medicaid Management Information System (CA-MMIS) – DHCS is the fiscal intermediary for MSSP. The case management solution shall support the ability to send Provider billing data electronically to DHCS' CA-MMIS for claims payment processing.

**Data Center Location of the To-be Solution:** [Commercial data center](#)

If Other, specify: [Click or tap here to enter text.](#)

## Security

### Access

Public: [No](#)

Internal State Staff: [Yes](#)

External State Staff: [No](#)

Other: [Yes](#) Specify: [External MSSP Providers](#)

**Type of Information** (Select Yes or No for each to identify the type of information that requires protection. See the SAM Section 5305.5 for more information.)

Personal: [Yes](#)

Health: [Yes](#)

Tax: [No](#)

Financial: [No](#)

Legal: [No](#)

Confidential: [Yes](#)

Other: [No](#) Specify: [Click or tap here to enter text.](#)

**Protective Measures** (Select Yes or No to identify the protective measures used to protect information.)

Technical Security: [Yes](#)

Physical Security: [Yes](#)

Backup and Recovery: [Yes](#)

Identity Authorization and Authentication: [Yes](#)

Other, specify: [Click or tap here to enter text.](#)

**Total Viable Alternative #1 Solution Cost** (copy from FAW – Executive Cost Summary tab, cells E7 through E11):

Planning Costs: [\\$932,341](#)

One-Time (Project) Costs: \$8,365,997

Total Future Ops. IT Staff OE&E Costs: \$4,197,345

Total Proposed Cost: \$13,495,683

Annual Future Ops. Costs (M&O): \$3,139,351

## 2. Viable Alternative Solution #2

**Name:** Shared Service

**Description:** This alternative leverages an existing AssureCare MedCompass COTS/SaaS application utilized by the Department of Health Care Services (DHCS). This option benefits from having a solution already in production, assumes solution functionality meets CDA's minimum viable product requirements, and minimal configuration will be required to support CDA go-live business requirements. Some enhancement/customization is anticipated. This alternative includes the procurement of annual software subscription licenses and one-time implementation services. It is anticipated implementation, from project kick-off through project go-live, will take approximately 15 months. This alternative also budgets for professional services from the primary solution vendor after project go-live to support training, change requests or enhancements/customization in anticipation of changes to CDA MSSP program requirements and/or regulations. 1.0 new IT staff resource will be required to assist with project implementation as well as ongoing operational support.

**Why is this a viable solution?** Please explain:

The solution was originally designed and configured to support other DHCS waiver programs. At a high-level, the functionality needed to support the MSSP is similar but after reviewing the DHCS solution and evaluating it against CDA's MSSP requirements, it was determined that system enhancements would need to be made and adjustments and/or business process changes would be required for the solution to work for MSSP. Compared to a standalone system, more time and resources across departments would be needed when planning and deploying future changes to ensure other non-CDA programs are not impacted and our ability to react to programmatic changes in a timely manner would be constrained.

### Approach

Increase staff – new or existing capabilities: Yes

Modify the existing business process or create a new business process: Yes

Reduce the services or level of services provided: No

Utilize new or increased contracted services: Yes

Enhance the existing IT system: No

Modify Statute/Policy/Regulations: No

Please Specify: [Click or tap here to enter text.](#)

Create a new IT system: No

Other: No Specify: Click or tap here to enter text.

## Architecture Information

**Business Function(s)/Process(es):** The business functions/processes included are the same as those identified in Alternative #1.

*TIP: Copy and paste or click the + button in the lower right corner to add business processes with the same application, system, or component; COTS/Cloud Technology or custom solution; runtime environment; system interfaces, data center location; and security.*

## Conceptual Architecture

Attach a copy of the conceptual architecture to your email submission.

**COTS/SaaS/Cloud Technology or Custom:** COTS/SaaS/Cloud Technology

Name/Primary Technology: AssureCare MedCompass

*TIP: Copy and paste or click the + button in the lower right corner to add system software information if the application, system, or component uses additional system software.*

**Explain Existing System Interfaces:** Currently, there are no direct interfaces between MSSP Provider case management systems and third-party applications. All interactions are conducted manually.

**Explain New System Interfaces:** The Project is requiring Web Service APIs – The case management solution shall support the ability to upload MSSP Provider data to support required programmatic and fiscal reporting requirements in the event a Provider has not migrated to the new system and the solution must support the ability to export data should the need arise to share data with an external system for historical or analytical reporting (e.g., data warehouse).

The Project also seeks a solution that preferably has the following interfaces:

- DHCS' Medi-Cal Eligibility Determination System (MEDS) - The MEDS is the system of record for Medi-Cal demographic, eligibility, and coverage data. A standard requirement of the overall care management process is for care managers to confirm participant eligibility and coverage before case management and service provision begins, and to adjust it as necessary in reaction to changes in the participant's eligibility status. In addition, MEDS supports member contact information inquiries. Member contact information is used to designate the organization responsible for providing care management to the waiver participant based on his/her address of residence.
- DHCS' California Medicaid Management Information System (CA-MMIS) – DHCS is the fiscal intermediary for MSSP. The case management solution shall support the ability to send Provider billing data electronically to DHCS' CA-MMIS for claims payment processing.

**Data Center Location of the To-be Solution:** Commercial data center

If Other, specify: [Click or tap here to enter text.](#)

## Security

### Access:

Public: [No](#)

Internal State Staff: [Yes](#)

External State Staff: [Yes](#)

Other: [Yes](#) Specify: [External MSSP Providers](#)

**Type of Information** (Select Yes or No for each to identify the type of information that requires protection. See the SAM Section 5305.5 for more information.)

Personal: [Yes](#)

Health: [Yes](#)

Tax: [No](#)

Financial: [No](#)

Legal: [No](#)

Confidential: [Yes](#)

Other: [No](#) Specify: [Click or tap here to enter text.](#)

**Protective Measures** (Select Yes or No to identify the protective measures used to protect information.)

Technical Security: [Yes](#)

Physical Security: [Yes](#)

Backup and Recovery: [Yes](#)

Identity Authorization and Authentication: [Yes](#)

Other, specify: [Click or tap here to enter text.](#)

**Total Viable Alternative #2 Solution Cost** (copy from FAW – Summary tab, cell AL33):

Total Proposed Cost: [\\$12,424,909](#)

## 3. Viable Alternative Solution #3

**Name:** [Custom](#)

**Description:** [This alternative includes the development of a new case management system from the ground up. The CDA would contract out the development and implementation services to a third-party vendor. It is anticipated implementation, from project kick-off through project go-live,](#)

will take approximately 34 months. This alternative also budgets for 8.0 new IT staff resources to assist with project implementation as well as ongoing operational support.

**Why is this a viable solution?** Please explain:

The option provides CDA with a fully customized solution. However, a fully customized solution comes at a much higher costs and the CDA is not resourced to support the development, implementation, or ongoing maintenance of a new system of this size. It is estimated the CDA would need to hire 11.0 contractors to complete the software development lifecycle and onboard 8.0 additional new IT staff to provide project implementation and ongoing support. Also given the high risk associated with a greenfield software development effort and that a mature market already exists for healthcare case management systems, the CDA does not support this option.

## Approach

Increase staff – new or existing capabilities: [Yes](#)

Modify the existing business process or create a new business process: [Yes](#)

Reduce the services or level of services provided: [No](#)

Utilize new or increased contracted services: [Yes](#)

Enhance the existing IT system: [No](#)

Modify Statute/Policy/Regulations: [No](#)

Please Specify: [Click or tap here to enter text.](#)

Create a new IT system: [Yes](#)

Other: [No](#) Specify: [Click or tap here to enter text.](#)

## Architecture Information

**Business Function(s)/Process(es):** [The business functions/processes included are the same as those identified in Alternative #1.](#)

*TIP: Copy and paste or click the + button in the lower right corner to add business processes with the same application, system, or component; COTS/Cloud Technology or custom solution; runtime environment; system interfaces, data center location; and security.*

## Conceptual Architecture

Attach a copy of the conceptual architecture to your email submission.

**COTS/SaaS/Cloud Technology or Custom:** [Custom](#)

Name/Primary Technology: [.Net, SQL Server](#)

*TIP: Copy and paste or click the + button in the lower right corner to add system software information if the application, system, or component uses additional system software.*

**Explain Existing System Interfaces:** [Currently, there are no direct interfaces between MSSP Provider case management systems and third-party applications. All interactions are conducted manually.](#)

**Explain New System Interfaces:** The Project is requiring Web Service APIs – The case management solution shall support the ability to upload MSSP Provider data to support required programmatic and fiscal reporting requirements in the event a Provider has not migrated to the new system and the solution must support the ability to export data should the need arise to share data with an external system for historical or analytical reporting (e.g., data warehouse).

The Project also seeks a solution that preferably has the following interfaces:

- DHCS' Medi-Cal Eligibility Determination System (MEDS) - The MEDS is the system of record for Medi-Cal demographic, eligibility, and coverage data. A standard requirement of the overall care management process is for care managers to confirm participant eligibility and coverage before case management and service provision begins, and to adjust it as necessary in reaction to changes in the participant's eligibility status. In addition, MEDS supports member contact information inquiries. Member contact information is used to designate the organization responsible for providing care management to the waiver participant based on his/her address of residence.
- DHCS' California Medicaid Management Information System (CA-MMIS) – DHCS is the fiscal intermediary for MSSP. The case management solution shall support the ability to send Provider billing data electronically to DHCS' CA-MMIS for claims payment processing.

**Data Center Location of the To-be Solution:** Other

If Other, specify: Microsoft Azure Government environment.

## Security

### Access:

Public: No

Internal State Staff: Yes

External State Staff: No

Other: Yes Specify: External MSSP Providers

**Type of Information** (Select Yes or No for each to identify the type of information that requires protection. See the SAM Section 5305.5 for more information.)

Personal: Yes

Health: Yes

Tax: No

Financial: No

Legal: No

Confidential: Yes

Other: No Specify: Click or tap here to enter text.

**Protective Measures** (Select Yes or No to identify the protective measures used to protect information.)

Technical Security: [Yes](#)

Physical Security: [Yes](#)

Backup and Recovery: [Yes](#)

Identity Authorization and Authentication: [Yes](#)

Other, specify: [Click or tap here to enter text.](#)

**Total Viable Alternative #3 Solution Cost** (copy from FAW – Summary tab, cell AL50):

Total Proposed Cost: [\\$21,298,591](#)

## 2.9 Project Organization

Project planning includes the process of identifying how and when specific labor skill sets are needed to ensure that the proposed project has sufficient staff with the appropriate knowledge and experience by the time the project moves into execution. All staff identified in the following sections should be included in the Financial Analysis Worksheet to be completed in Section 2.12.

### 1. Project Organization Chart:

**Attach** the Project Organization Chart to your email submission.

### 2. Is the department running this project as a matrixed or projectized organization?

[Matrixed](#)

In each of the following sections, provide a concise description of the approach to staffing the proposed project including contingencies for business/program, IT, or administrative areas to maintain ongoing operations in conjunction with the proposed project.

#### 1. Administrative

[The project has redirected 1.0 Procurement and Contracts Analyst to conduct procurement activities and 1.0 Procurement and Contracts Manager to oversee the procurement process. Additional STP/DGS assistance will be sought for any solicitation above CDA's purchasing authority. Contract management activities will be supported by the Project Manager. 1.0 Budget Specialist has also been assigned to assist with financial analysis and ongoing budget/cost management activities. Cost management activities will be supported by the Project Manager and Business Analyst.](#)

#### 2. Business Program

[The project has redirected 1.0 Product Owner, 1.0 Business Lead, and 4.0 Business Subject Matter Experts from the MSSP Bureau. In addition to internal CDA staff resources, the project will leverage 8.0 external MSSP Provider Subject Matter Experts during the planning phase. It](#)



is anticipated that the same Provider sites will continue to provide resources as needed to support project implementation activities.

### **3. Information Technology**

The project has redirected 1.0 Project Manager and has an Inter-Agency Agreement in place for 1.0 full-time Business Analyst. The current agreement supports the timeline associated with Alternative 2 and would require a contract extension/amendment for Alternative 1. The project will require 1.0 redirected technical SME to assist with project implementation. The project is also anticipating the need for 1.0 new technical staff to lead and participate in project implementation activities. The same resources will be required to support the system post-implementation. The additional position is being requested as part of the proposed Budget Change Proposal for the project.

### **4. Testing**

The project will leverage 1.0 Business Analyst, 4.0 Business Subject Matter Experts, and 1.0 technical staff during the testing phase. In addition to internal CDA staff resources, the project expects to leverage external MSSP Provider subject matter experts during the testing phase.

### **5. Data Conversion/Migration**

Data migration requirements are included in the solution requirements and are expected to be fully resourced as part of the primary vendor contract. The 1.0 new IT resource will also be fully allocated to the project to assist with data migration activities.

### **6. Training**

Training requirements are included in the solution requirements and training resources will be included as part of the primary vendor contract. It is expected the vendor will provide training to MSSP Bureau staff and those same resources will train external MSSP Providers with the support of the primary vendor.

### **7. Organizational Change Management**

Organizational Change Management (OCM) will be the responsibility of the MSSP Bureau staff. The project is requesting 2.0 OCM consultants to assist with project activities. The consultants will report to the Communication Lead and will be responsible for creating and facilitating the distribution of all internal CDA and external stakeholder communications and business process change management activities. In addition, the program has well-established communication channels with external stakeholders (MSSP Providers and DHCS) and will be leveraging these channels throughout the project.

The OCM contractors are critical to successfully implementing the new system. OCM services will ensure stakeholder engagement, readiness, communications, and adoption of the new processes and system. OCM is a specialized skillset and not widely available via state resources. The OCM needed requires a heightened sense of political awareness and change management and program development skills to manage diverse stakeholders at the local

level. OCM contractors will allow CDA to acquire the necessary skills from a larger selection pool increasing our ability to hire in a timely manner and at an expertise level needed commensurate with the project.

## 8. Resource Capacity/Skills/Knowledge for Stage 3 Solution Development

This narrative should include the experience level and quantity of procurement, contract management, and budget staff who will be responsible for the Stage 3 Solution Development.

Contract and Procurement Staff: 1.0 Associate Governmental Program Analyst (AGPA) - The AGPA is experienced in contract and procurement rules, regulations, and development. In addition, the AGPA is experienced in providing necessary data entry of the FI\$Cal coding which is used by CDA's Business Management Bureau and Accounting Management Bureau.

Budget Staff: 1.0 Staff Services Manager I (Specialist) - The Staff Services Manager (SSM) I Specialist is experienced in budgetary review of contracts/procurement along with the tracking of the financial components of the contracts/procurements. In addition, the SSM I Specialist is experienced in providing the FI\$Cal coding which is used by CDA's Business Management Bureau and Accounting Management Bureau.

## 2.10 Project Planning

### 1. Project Management Risk Assessment

Updated Project Management Risk Score: 1.2

**Attach** Updated PM Risk Assessment to your email submission. [SIMM Section 45A](#)

### 2. Project Charter

Is your project charter approved by the designated Agency/state entity authority and available for the Department of Technology to review? **Choose:** 'Yes,' 'No,' or 'Not Applicable.' If 'No' or 'Not Applicable,' provide the artifact status in the space provided.

[Project Charter \(Approved\):](#) Yes

Status: N/A

**Attach** a copy of the Project Charter to your email submission.

### 3. Project Plans

Are the following project management plans or project artifacts approved by the designated Agency/state entity authority and available for the Department of Technology to review?

**Choose:** 'Yes,' 'No,' or 'Not Applicable.' If 'No' or 'Not Applicable,' provide the artifact status in the space provided.

**Note:** For Low to medium complexity and cost projects, discuss with your PAO manager the option of submitting a Master Project Management Plan in place of individual plans.

[Scope Management Plan \(Approved\):](#) Yes

Status: Included as part of the master Project Management Plan.

[Communication Management Plan \(Approved\)](#): Yes

Status: Included as a separate plan.

[Schedule Management Plan \(Approved\)](#) : Yes

Status: Included as part of the master Project Management Plan.

[Procurement Management Plan \(Approved\)](#): Yes

Status: Included as a separate plan.

[Requirements Management Plan \(Approved\)](#): Yes

Status: Included as part of the master Project Management Plan.

[Stakeholder Management Plan \(Draft\)](#): Yes

Status: Included as part of the master Project Management Plan.

[Governance Plan \(Draft\)](#): Yes

Status: Included as a separate plan.

[Contract Management Plan \(Draft\)](#): Yes

Status: Included as part of the master Project Management Plan.

[Resource Management Plan \(Draft\)](#): Yes

Status: Included as part of the master Project Management Plan.

[Change Control Management Plan \(Draft\)](#): Yes

Status: Included as a separate plan.

[Risk Management Plan \(Draft + Risk Log\)](#): Yes

Status: Included as part of the master Project Management Plan.

[Issue and Action Item Management Plan \(Draft + Issue Log\)](#): Yes

Status: Included as part of the master Project Management Plan.

[Cost Management Plan \(Approved if planning BCP approved\)](#): Yes

Status: Included as part of the master Project Management Plan.

#### **4. Project Roadmap (High-Level)**

**Attach** a high-level Project Roadmap showing remainder of planning phase and transition into execution phase to the email submission.

a) Planning Start Date: [8/28/2023](#)

b) Estimated Planning End Date: [8/28/2025](#)

c) Estimated Project Start Date: 9/8/2025

d) Estimated Project End Date: 2/24/2027

## 2.11 Data Cleansing, Conversion, and Migration

If in Section 2.3 (above) the answer to the question “Do you have existing data that must be migrated to your new solution?” was marked “Yes,” please complete this section.

The California Department of Technology recommends having a Data Consultant start data cleansing, conversion, and migration activities as soon as possible.

Identify the status of each of the following data activities. If “Not Applicable” is chosen, explain why the activity is not applicable or if “Not Started” is chosen, explain when the activity will start and its anticipated duration:

### 1. Current Environment Analysis: **Not Started**

Data migration planning is expected to take place as part of project execution.

### 2. Data Migration Plan: **In Progress**

A Data Migration Strategy has been developed.

### 3. Data Profiling: **Not Started**

Data profiling is expected to take place as part of data migration planning.

### 4. Data Cleansing and Correction: **Not Started**

Data cleansing/correction is expected to take place as part of data migration planning.

### 5. Data Quality Assessment: **Not Started**

Data quality assessment is expected to take place as part of data migration planning.

### 6. Data Quality Business Rules: **Not Started**

Data quality business rules are expected to be discussed as part of data migration planning.

### 7. Data Dictionaries: **Not Started**

The project currently has partial information as it relates to CDA’s current in-house application used for processing participant and service files. It does not possess data dictionaries for MSSP Provider systems. The project will obtain during the data migration planning process.

### 8. Data Conversion/Migration Requirements: **Not Started**

Data conversion/migration requirements will be discussed and part of data migration planning.

## **2.12 Financial Analysis Worksheets**

**Attach [F.2 Financial Analysis Worksheet\(s\)](#) to the email submission.**

**End of agency/state entity document.**

**Please ensure ADA compliance before submitting this document to CDT.**

**When ready, submit Stage 2 and all attachments in an email to [ProjectOversight@state.ca.gov](mailto:ProjectOversight@state.ca.gov).**

## Department of Technology Use Only

**Original “New Submission” Date:** 03/15/2024

**Form Received Date:** 07/01/2024.

**Form Accepted Date:** 07/01/2024.

**Form Status:** Complete

**Form Status Date:** 01/10/2025.

**Form Disposition:** Approved.

**Form Disposition Date:** 01/10/2025