



# Stage 1 Business Analysis

California Department of Technology, SIMM 19A.3 (Ver. 3.0.9, 02/01/2022)

## 1.1 General Information

**1. Agency or State entity Name: 4300 - Developmental Services, 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 and Acronym: Consumer Electronic Records Management System (CERMS) and Uniform Fiscal System Modernization (UFSM)**

**3. Proposal Description: (Provide a brief description of your proposal in 500 characters or less.)**

The Department of Developmental services proposes to replace the disparate consumer electronic records management systems used by the twenty-one non-profit regional centers, with a modern solution that meets the needs of regional centers, the State, service providers, and people served.

The Department of Developmental services proposes to modernize the legacy Uniform Fiscal System (UFS) accounting application used by the twenty-one non-profit regional centers.

**4. Proposed Project Execution Start Date: 8/23/2021**

**5. S1BA Version Number: Version 1**

## 1.2 Submittal Information

**1. Contact Information**

Contact Name: Jim Switzgable

Contact Email: Jim.switzgable@dds.ca.gov

Contact Phone: 916-896-6488

**2. Submission Type: New Submission**

If Withdraw, select Reason: Other

If Other, specify reason here: DDS has decided to join the CERMS and UFSM projects into a single project.

**Sections Changed, if this is a Submission Update: (List all sections changed.)**

All sections have been updated.

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

All sections have been updated to consolidate the separate CERMS and UFSM content into a single response for a single project.

3. Attach [Project Approval Executive Transmittal](#) to your email submission.
4. Attach [Stage 1 Project Reportability Assessment](#) to your email submission.

## 1.3 Business Sponsorship

### 1. Executive Champion (Sponsor)

Title: Deputy Director/Chief Information Officer

Name: Jim Switzgable

Business Program Area: Information Technology Division

Title: Deputy Director

Name: Maricris Acon

Business Program Area: Children, Adolescents, and Young Adult Services Division

Title: Deputy Director

Name: Ernie Cruz

Business Program Area: Community Services Division

Title: Deputy Director

Name: Aaron Christian

Business Program Area: Office of Community Operations

Title: Chief Deputy Director

Name: Pete Cervinka

Business Program Area: Data Analytics and Strategy

Title: Deputy Director

Name: Jim Knight

Business Program Area: Administration Division

Title: Deputy Director

Name: Steven Pavlov

Business Program Area: Financial Management Division

## 2. Business Owner

Title: Various

Name: See above Project Sponsors

Business Program Area: See above and in addition: associations of regional centers, vendors, tribes, and service providers; consumers and families and their advocates; and research entities also will be represented in the project.

Title: Executive Director

Name: 21 regional center executive directors: Alta California RC: Lori Banales, Central Valley RC: Ed Araim, Eastern Los Angeles RC: Gloria Wong, Far Northern RC: Melissa Gruhler, Frank D Lanterman RC: Melinda Sullivan, Golden Gate RC: Eric Zigman, Harbor RC: Patrick Ruppe, Inland RC: Lavinia Johnson, Kern RC: Michi Gates, PhD, North Bay RC: Gabriel Rogin, North Los Angeles County RC: Ruth Janka, Redwood Coast RC: Dr Kim Smalley (interim), East Bay RC: Lisa Kleinbub, Orange County RC: Larry Landauer, San Andreas RC: Javier Zaldivar, San Diego RC: Carlos Flores, San Gabriel – Pomona RC: Anthony Hill, M.A., Esq., South Central Los Angeles RC: Dexter Henderson, Tri-Counties RC: Omar Noorzad, PhD, Valley Mountain RC: Tony Anderson, Westside RC: Mary Lou Weise-Stusser (interim) , Kern RC: Michi Gates, PhD.

Business Program Area: The regional centers oversee the coordination and delivery of services for Californians with developmental disabilities through a statewide network of 21 community-based, non-profit agencies known as regional centers. Regional centers provide assessments, determine eligibility for services, and offer case management services. Regional centers also develop, purchase, and coordinate the services in each person's Individual Program Plan.

## 3. Product Owner

Title: TBD

Name: **TBD**

## **CERMS Program Background and Context**

The Department of Developmental Services (Department) administers the Lanterman Act, ensuring that individuals with intellectual and developmental disabilities have access to the services and supports needed to lead more independent and productive lives. The regional centers (RCs) are nonprofit, private entities that contract with the Department to provide and coordinate the services and supports for individuals with developmental disabilities. There are 21 RCs across California and they currently serve over 450,000 individuals. The RCs are located throughout the State based on population density and individuals are served by the RC in their geographic area.

The regional centers oversee the coordination and delivery of services for Californians with developmental disabilities through a statewide network of 21 community-based, non-profit agencies known as regional centers. Regional centers provide assessments, determine eligibility for services, and offer case management services. Regional centers also develop, purchase, and coordinate the services in each person's Individual Program Plan.

The RCs act as the local entry point for consumers entering the developmental services system. Individuals who apply for services at RCs are evaluated for eligibility. The RCs assist eligible consumers in developing their Individual Program Plan (IPP) to determine the necessary services for achieving their personal goals. The RCs are responsible for providing an array of services including outreach, intake, diagnosis/assessment, preventative services, placement, individual program planning, advocacy, monitoring/evaluation, case management, and other services as required to achieve objectives in the individual's IPP. A primary function of these centers is the purchase of services for consumers from approved service providers or supporting access to services from other publicly funded agencies.

The existing consumer electronic records management systems (CERMS) used by the twenty-one regional centers are distributed. They do not interface nor allow for centralized core business rule management, change management, and integration of case management data across all regional centers, resulting in disparate data sources, poor data consistency and integrity, and non-standard data which is difficult to aggregate or utilize for process and program monitoring and outcomes-assessment activities. The distributed and disparate system also contributes to ongoing services disparities and inequalities throughout the State. Since each application is maintained by the host regional center, updates to the applications become a challenge as regional center system changes can create errors with the individual application updates. There is not currently a standardized or enterprise-wide outward facing interface that would allow for self-advocates and families to access nor update their own information, such as their addresses and contact information, IPP, authorized services and history, scheduled appointments, and outcomes data. Information is shared via mail or e-mail, which increases the possibility of data security breaches.

A modern CERMS is mission critical. The system will contain sensitive and private information that is central to guaranteeing the continued well-being of the individuals served by the Department ensuring needed services are coordinated and received, and that people served and their families have access to information.

## **UFSM Program Background and Context**

The Department of Developmental Services (DDS) administers the Lanterman Act, ensuring that individuals with intellectual and developmental disabilities have access to the services and supports needed to lead more independent and productive lives. Regional Centers are the nonprofit, private entities that contract with the Department to provide and coordinate the services and supports for individuals with developmental disabilities. There are twenty-one (21) regional centers across California and they currently serve over 450,000 individuals. The regional centers are located throughout the State based on population density and individuals are served by regional centers in their geographic area.

The regional centers act as the local entry point for consumers entering into the developmental services system. Individuals who apply for services at the regional centers are evaluated for eligibility. The regional centers assist eligible consumers in developing their Individual Program Plan (IPP) to determine the necessary services for achieving their personal goals. Regional Centers are responsible for providing an array of services including: outreach, intake, diagnosis/assessment, preventative services, placement, individual program planning, advocacy, monitoring/evaluation, case management, and other services as required to achieve objectives in the consumer's IPP. A primary function of the regional centers is the purchase of services for consumers from approved service providers or other publicly funded agencies.

As indicated in the Lanterman Act section 4631, the twenty-one regional centers must all use a uniform accounting system to ensure continuity and standardization of accounting processes. In 1984, the Uniform Fiscal System (UFS) was implemented at each Regional Center and the development environment at DDS headquarters. UFS is an extremely complex legacy accounting system that has been modified to meet regional center business needs, which include: the turn-around invoice (TAI); the Self-Determination program; the Intermediate Care Facility State Plan Amendment (ICF-SPA) program; operating expenses and expenditure tracking; service provider purchases of services authorizations and claims; and consumer financial benefits management. UFS interfaces with each regional center individual case management system and eBilling, an online billing software used by community vendors to complete and submit invoices for services provided to consumers. UFS contains more than 2,948 programs and 736,341 lines of code. Additional modifications have been made to accommodate unique regional center business processes; federal funding billing rules; and new business programs. In 2017-2018, UFS was used to process \$5.4 billion in consumer purchase of services. Data from UFS is transmitted monthly to DDS where it is used for program monitoring, legislative reporting, and federal reimbursement billing.

The DDS Community Services Division (CSD) acts as a liaison to regional centers both setting purchase of services policies and monitoring community programs and regional center performance. The DDS Federal Programs Division staff oversee and ensure compliance with reporting to the Centers for Medicare & Medicaid Services (CMS) for waiver and State Plan Amendments. Activities include monitoring regional center enrollments and performance in federally funding programs. UFS data is utilized to ensure compliance with federal programs requirements, monitor purchases of services, and improve program administration. Federal funding reimbursements recover approximately \$3 billion dollars annually.

The Uniform Fiscal System (UFS), currently used by the regional centers and DDS, and the eBilling interface, used by approximately 39,000 service providers, are outdated with many limitations, including: aged and inflexible technology that is difficult to modify; outdated workflows that require staff to complete inefficient and time-consuming processes; and insufficient system security and accounting controls to adequately safeguard sensitive consumer information. Modernizing UFS will automate manual processing at the regional centers, improving the quality of the critical data received by DDS.

## 1.4 Stakeholder Assessment

The Stakeholder Assessment is designed to give the project team an overview of communication channels that the state entity needs to manage throughout the project. More stakeholders may result in increased complexity to a project.

**1. Indicate which of the following are interested in this proposal and/or the outcome of the project. (Select 'Yes' or 'No' for each.)**

State Entity Only: No

Other Departments/State Entities: Yes

Public: Yes

Federal Entities: Yes

Governor's Office: No

Legislature: Yes

Media: No

Local Entities: No

Special Interest Groups: Yes

Other: Choose Yes or No.

**2. Describe how each group marked 'Yes' will be involved in the planning process.**

### **CERMS**

**Regional Centers** utilize the application to input and manage consumer demographics, including tracking individual program plans (IPP), consumer demographics, vendor information, services authorizations and delivery, and Special Incident Reports (SIRs).

Regional Centers will review and provide feedback throughout the requirements gathering and project design phases. Regional Centers will be involved in the requirements elicitation and review. Regional Centers are major primary end-users of the application and will act with other stakeholders and the Department as documentation reviewers, subject matter experts, and user acceptance testers. They will work closely with DDS and the solution vendor to assure the new CERMS meets their business needs. Regional Centers will participate in project meetings, training, and receive regular communications related to project status.

**Individuals/Families/Guardians** receive services through the regional centers. The existing application is a critical piece in ensuring services are authorized, received, and evaluating individual outcomes. A modernized enterprise wide CERMS will improve each individual's access to services, increase transparency, provide the ability to access their own information, and provide additional ways to communicate with regional centers.

Individuals, families, and guardians will be major primary end-users of the application, and act with other stakeholders and the Department as documentation reviewers, subject matter experts, testing, and user acceptance participants. They will work closely with DDS and the solution vendor to assure the new CERMS meets their business needs. Regional Centers will participate in project meetings, training, and receive regular communications related to project status throughout the lifecycle of the project.

**Service providers** are responsible for providing services to consumers. Service providers supply information for the application, such as contact information and SIRs data. Some also use the existing application as a communication tool to contact or share information with regional centers. A new system will impact their CERMS business processes.

Service providers and tribes will provide review and provide feedback throughout the requirements gathering and design, testing and training project phases. They will work closely with the regional centers and DDS to ensure the new CERMS meets their business needs. Service providers will participate in project meetings as appropriate and receive regular communications related to project status. Service providers will be active stakeholders throughout the lifecycle of the project.

**The Department of Developmental Services** ingests the data collected through the application, and will have primary responsibility for the CERMS, including maintenance and operations and change management. The system will be foundational for program operations, oversight and monitoring, risk management and quality assurance, research, fiscal interfaces, audits, and all other functions related to serving people with intellectual and developmental disabilities.

In addition to its role managing the project, the department will provide sponsorship and leadership to the effort. It will lead all functions of the project and will require the engagement of all other stakeholders in their roles, as desired and/or necessary. The department also will consider all other critical aspects of the project, including accessibility, security, privacy, sustainability, communications, deployment and training, interfaces and interoperability, data standards, and so forth.

**Centers for Medicare and Medicaid Services (CMS)** reimburses for services and administrative costs associated with DDS, regional center and other activities supporting consumers goals and outcomes. The systems will improve department capabilities for identifying and seeking services reimbursable by CMS. The projects will also seek funding for implementation and maintenance and operations costs.

**Legislature** will receive regular reports on project progress. Information provided to Legislature will include the current status of the proposed projects in the California Department of Technology's Project Approval Lifecycle; the preliminary baseline cost, schedule, and scope of the proposed projects after Stage 2 Alternatives Analysis approval, and any updates thereafter; the preliminary goals and outcomes for the two projects based on DDS' planning efforts, including definitions for and measurements of the projects' completion and success; A list of the activities

undertaken by DDS during project planning to engage stakeholders, including consumers and their families, and any associated outcomes; A list of organizational change management activities undertaken by DDS during project planning to prepare regional centers for any business process changes and/or changes in regional center resources and staff associated with the projects; A list of project risks and issues identified by DDS during project planning and proposed mitigations and/or actions to address them.

**Special Interest Groups** will provide feedback and engage in stakeholder support and outreach. They will be kept informed of project status and activities throughout the project.

## **UFSM**

**Regional Centers** are responsible for purchasing services for individuals and depend on UFS to complete accounting activities.

Regional Centers will provide review and feedback throughout the requirements gathering and design project phases. Regional Centers will be involved in the requirements elicitation and review. Regional Centers are the primary end-users of UFS and will act as documentation reviewers, subject matter experts, and user acceptance testers. They will work closely with DDS and the solution vendor to ensure the new accounting system meets their business needs. Regional Centers will participate in project meetings, training, and receive regular communications related to project status. Regional Centers will be key and active stakeholders throughout the lifecycle of the project.

**Service providers** are responsible for providing services to consumers. Service providers complete monthly invoices in the eBilling online system and submit them for payment.

Service providers will provide review and feedback throughout the requirements gathering and design project phases. Service providers are the primary end-users of eBilling, the online billing system that interfaces with UFS, and will act as documentation reviewers, subject matter experts, and user acceptance testers. They will work closely with DDS, regional centers, and the solution vendor to ensure the billing module of the new accounting system meets their business needs. Service providers will participate in project meetings and receive regular communications related to project status. Service providers will be active stakeholders throughout the lifecycle of the project.

**The DDS Information Technology Division (ITD)** utilizes the data collected through UFS. DDS ITD utilizes the data to provide estimates for budgets, programs information for business customers, and legislative reporting. ITD currently works to implement program modifications as needed, providing programming and testing services for UFS.

ITD staff will review documentation, providing feedback as needed. ITD Staff will participate in requirements elicitation, document review, and training. They will receive regular project status updates and be involved in project governance activities. DDS ITD Staff will provide leadership and guidance related to security, privacy, and information technology related trends.

**The DDS Fiscal Forecasting Branch (FFB)** Budget Staff utilize the data collected through UFS for budgeting, projecting, contract monitoring, and allocating funds to the regional centers.

The DDS Fiscal Forecasting Branch (FFB) staff will review documentation, providing feedback as needed. Financial Services staff will participate in requirements elicitation, document review, and



training. They will receive regular project status updates and be involved in project governance activities.

## 1.5 Business Program

1. **Business Program Name: Department of Developmental Services, All Divisions and Offices**
2. **Program Background and Context:** (Provide a brief overview of the entity's business program(s) current operations.)

The Department receives information from the application that is used for program monitoring, administration, evaluation, funding, and reporting, among many other functions. A new CERMS will impact what data elements the Department can access, the frequency with which the data is available, how the data is accessed, its quality and consistency and interoperability, emergency response capabilities, and other factors influencing the work of the Department.

3. **How will this proposed project impact the product or services supported by the state entity?**

The project will introduce efficiencies and standards across the 21 regional centers. The specific impacts are not known at this time, however the team will develop as-is workflows, to-be workflows, mid-level requirements, and detailed requirements. The project team will identify gaps or changes between the current and future policies, business processes, roles, responsibilities, and services. The Department will engage a vendor to provide organizational change management services to document and support the people, process, and technology changes. Once a solution vendor is identified, the project will work with regional centers to incorporate process changes into training documentation.

1. **Business Program Name: Department of Developmental Services, Federal Programs Division (now split into three (3) divisions: Children, Adolescents, and Young Adult Services; Policy and Program Development; Waivers and Rates Divisions)**
2. **Program Background and Context:** (Provide a brief overview of the entity's business program(s) current operations.)

The DDS Children, Adolescents, and Young Adult Services; Policy and Program Development; and Waivers and Rates Divisions receive information from UFS used for program monitoring, administration, reporting, and federal billing.

3. **How will this proposed project impact the product or services supported by the state entity?**

The Children, Adolescents, and Young Adult Services; Policy and Program Development; and Waivers and Rates Divisions will act as subject matter experts and documentation reviewers, providing feedback and approval of requirements and proposed solution documentation. The DDS Federal Programs Division will participate in project meetings, providing guidance to ensure the new solution meets federal program requirements.

**1. Business Program Name: Department of Developmental Services, Community Services Division**

**2. Program Background and Context:** (Provide a brief overview of the entity's business program(s) current operations.)

The DDS Community Services Division information from UFS for program monitoring and reporting.

**3. How will this proposed project impact the product or services supported by the state entity?**

The DDS Community Services Division staff will act as subject matter experts and documentation reviewers, providing feedback and approval of requirements and proposed solution documentation. The DDS Federal Programs Division will participate in project meetings, providing guidance to ensure the new solution meets federal program requirements.

**1. Business Program Name: Department of Developmental Services, Financial Services**

**2. Program Background and Context:** (Provide a brief overview of the entity's business program(s) current operations.)

The DDS Financial Services Branch utilizes UFS data for consumer demographics for the Parental Fee and Annual Family Program Fee. In addition, for AFPF, Client Financial Services (CFS) requests UFS data from Enterprise Data Office on an annual basis to obtain information on potential consumers eligible under AFPF for revenue estimates. The CFS Conservatorship program accesses UFS for conservatee ledgers to complete the biannual accounting for the estate conservatorships due to the courts.

**3. How will this proposed project impact the product or services supported by the state entity?**

The DDS Financial Services Branch will act as documentation reviewers, providing feedback on the data output to ensure it meets CFS needs.

## **1.6 Project Justification**

**1. Strategic Business Alignment**

**Enterprise Architect**

Title: Enterprise Architecture Supervisor

Name: Jovina Trotter

Strategic Plan Last Updated? 7/14/2008

Strategic Business Goal: **CHHS Strategic Priority: Build a Healthy California for All** - Ensure all Californian's have meaningful access to care by modernizing the health workforce and expanding care delivery capacity.

Alignment:

**CERMS:** This proposal will modernize disparate data sources into an enterprise-wide information technology solution. More robust management information management and distribution will improve service access and equity for individuals by providing a more effective tool to support statewide service authorization, delivery, program access, transparency, accountability, and availability.

**UFSM:** This proposal will modernize an outdated information technology solution, improving the management of information to improve services for individuals by providing regional centers with a more effective tool to track and monitor the purchase of consumer services, expanding the capacity of the services delivery system.

Strategic Business Goal: **CHHSA Strategic Priority: Improve the Lives of California's Most Vulnerable** - Address the needs of persons with disabilities and our growing aging population including issues such as care, support, housing and transportation for our most vulnerable populations.

Alignment:

**CERMS:** Implementing a modernized and efficient enterprise wide CERMS will assure that regional centers and service providers can provide continuous delivery of services for individuals with intellectual and developmental disabilities. A modernized CERMS will help to identify and address service quality and meet unique individual needs, increase transparency and communication and accountability, while also supporting the goal of closing gaps in service access and equity.

**UFSM:** Implementing a modernized and user-friendly accounting system will ensure that regional centers and service providers are able to provide services for individuals with intellectual and developmental disabilities. A user-friendly billing module will help retain quality services provider, addressing service gaps and unique individual needs.

Strategic Business Goal: **Department Goal: Accountability - Establish a system to ensure** DDS, state developmental centers, regional centers, and service providers are in compliance with all applicable federal and state laws, regulations and contracts, including accounting for their funding in an appropriate manner.

Alignment:

**CERMS:** Implementing a CERMS solution will provide increased visibility and more accountability, highlighting services delivery system inequalities and ultimately helping to ensure equity in services delivery. In addition, the flexibility of a new solution will allow for more efficient business workflows and system processes that comply with federal program requirements and will allow for increased program monitoring through data analytics, without

external and time-consuming manual processing, which also compromise data integrity. Implementing an enterprise-wide management system will facilitate and build the infrastructure for the sharing of data that will support the improvement of service programs for individuals throughout the State.

**UFSM:** Implementing a new accounting solution will provide increased visibility and more accountability, ensuring that funding is being used in an appropriate manner. In addition, the flexibility of a new solution will allow for more efficient business workflows visibility and more accountability, ensuring that funding is being used in an appropriate manner. In addition, the flexibility of a new solution will allow for more efficient business workflows and system processes that comply with federal program requirements, without external and time-consuming manual processing. Implementing a cloud based, standardized accounting system will facilitate and build the infrastructure to improve the sharing of data that will support the improvement of service programs for consumers.

**Mandate(s):** Both

Bill Number/Code, if applicable: [Lanterman Act \(Division 4.1, 4.5, and 4.7 of the Welfare and Institutions Code and Title 14 of the Government Code\)](#).

Add the Bill language that includes system-relevant requirements:

The Lanterman Act, Section 4631 recognizes the requirement for the uniform accounting, budgeting, encumbrance and reporting system and a systematic approach to administrative practices and procedures. While there are no specific requirements for an electronic case management system, the project team will develop requirements to ensure alignment to the Lanterman Act and regional centers remain compliant with all regulations. DDS will identify any statutory, regulatory, or policy changes to support the project as needed.

Bill Number/Code, if applicable:

Add the Bill language that includes system-relevant requirements:

## 2. Business Driver(s)

Financial Benefit: Yes

Increased Revenue: Yes

Cost Savings: No

Cost Avoidance: Yes

Cost Recovery: Yes

Will the state incur a financial penalty or sanction if this proposal is not implemented? No

If the answer to the above question is "Yes," please explain:

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

**Improvement**

Better Services to the People of California: Yes

Efficiencies to Program Operations: Yes

Improved Equity, Diversity, and/or Inclusivity: Yes

Improved Health and/or Human Safety: Yes

Improved Information Security: Yes

Improved Business Continuity: Yes

Improved Technology Recovery: Yes

Technology Refresh: Yes

Technology End of Life: No

## 1.7 Business Outcomes Desired

### Executive Summary of the Business Problem or Opportunity:

#### CERMS

The State's 2021-22 budget includes numerous transformational investments that will grow in the future, including one which is the largest fiscal commitment in the state budget this year. These critical investments in the foundations of the developmental services system will advance our system's transformation from a compliance-based system to a person-centered outcome-based system that is appropriately funded and operationally efficient. These investments adhere to the principles of efficiency, accountability, transparency, visibility, stability, equity in pursuit of parity, and continuous improvement that will lead to improved consumer experience and outcomes. Together, these comprehensive investments will accelerate improved process, service, and experience outcomes for the 450,000 people we serve.

Fortunately, the budget also provided planning investments in the replacement of our system's current case management and fiscal infrastructure, recognizing that outdated and dispersed technology is unable to support our transformational shift in the way that people with disabilities and their families are supported by regional centers, service providers, and the State. The proposed new infrastructure for these functions will enable the following to occur:

- Case management data will be managed in an enterprise fashion, consistently across the State and regional centers, with quality and comprehensiveness standards, will be available timely, and will meet interoperability expectations.
- People served and their families for the first time will have direct access to their own information, and the ability to make self-service updates on their own, such as keeping their contact information current.
- Operationally, service coordinators and other professionals will have the information technology necessary to see the array of services clients are authorized for, receiving, and where there are gaps.

- The case management and fiscal systems no longer will be inflexibly tied to process measures like hours of service delivered, and instead will support the transformation of regional centers and service providers to be accountable and be compensated for person-centered outcomes and accountability.
- Transparency, business intelligence, process standardization, accessibility compliance, and many other aspects of the effort will increase the information available to people served, their families, service providers, regional centers, the Department, researchers, the Legislature and the public; provide visibility into service gaps and disparities; increase fiscal timeliness and transparency; and illustrate outcomes for the people served against established benchmarks and improvement targets.

## **UFSM**

DDS seeks to modernize the legacy Uniform Fiscal System (UFS) accounting application used by the twenty-one regional centers to process purchase of services for 450,000 individuals, which in 2017-18 totaled \$5.4 billion, and secured \$3 billion in federal funding. Regional Centers and service providers struggle with the limitations of the current legacy application.

Over the last five years, it has become increasingly difficult for regional centers and service providers to use the legacy accounting application. UFS is outdated and inflexible, it has an unfriendly user interface, relying on the use of a command line and green screen. For regional centers, recruiting and retaining staff with the skill sets needed to use the legacy technology is nearly impossible. As retirements occur a void is created because new staff are unfamiliar with the legacy application, which is not widely used in the accounting field. This contributes to processing errors that are difficult to fix and cause payment delays for service providers. Technical staff have difficulty modifying UFS and eBilling to meet new program needs; enhancements and updates can take years to implement. Approximately 39,000 service providers utilize eBilling, the online billing module that interfaces with UFS, and struggle with its limitations, including the inability to directly upload information from their own billing systems. Service providers must complete invoices line-by-line. Some invoices contain thousands of lines, which require the manual entry of information or the selection of checkboxes to indicate daily service usage, which can take several days to complete.

A modern accounting solution will offer flexibility, scalability, ease of modification to meet program needs, and increased security controls to better meet State and Federal requirements. Implementing a new solution will allow DDS to address the following issues:

- Inflexible technology that is not scalable or modifiable to more fully meet business program needs, risking the security of \$3 billion in federal funding.
- Twelve requested enhancements have been permanently deferred as they either cannot be implemented due to system limitations or would require a complete system rewrite.
- An inflexible and outdated system that does not adhere to modern accounting industry standards, making it difficult for regional centers to recruit and retain qualified staff.
- Limited and inflexible billing options for service providers, requiring massive amounts of time-consuming manual data entry.

- Poor data controls which contribute to quality issues resulting in unreliable information that cannot be aggregated to provide meaningful data for programs evaluation.
- System security and accounting controls that do not ensure data integrity, privacy, and fraud prevention.
- Inefficient and non-standardized accounting workflows that require manual data collection and laborious workaround processes by regional center staff, diverting them away from more business value-added activities related to core program support functions.

A new solution would aid regional centers in improving business processes by automating and streamlining tasks; expand services delivery capabilities; improve program monitoring by offering a better tool for data collection; offer the flexibility needed to meet updated program requirements; and improve system security controls. Without a new system, DDS risks their ability to effectively monitor the payments for regional center consumer purchase of services, limiting the ability to track program effectiveness, administer programs, and ensure compliance with State and Federal program regulations, risking federal funding reimbursements. Federal reimbursements are critical in ensuring a continuous delivery of services for regional center consumers.

## **Business Problem or Opportunity and Objectives**

### **Objective ID: CERMS#1**

**Objective:** Transition the fiscal and programmatic foundations of the developmental services system away from process measures to payment for measurable changes in outcomes for people with intellectual and developmental disabilities.

**Metric:** Increase the number of services which are compensated on the achievement of person-centered outcomes, rather than upon hours of service provided.

**Baseline:** Zero

**Target Result:** To be determined, based upon binding constraints of the developmental services system, stakeholder engagement in the initiatives funded in the 2021 Budget Act, and Administration and legislative policies.

### **Objective ID: CERMS#2**

**Objective:** Reduce disparities in regional center performance across operational measures while achieving or surpassing benchmark expectations for those activities.

**Metric:** Regional center performance on measures of customer service, timeliness of intake and case planning/management activities, fiscal controls, and other activities

**Baseline:** Regional center annual reports, performance dashboards, and National Core Indicator survey results

**Target Result:** 100 percent of regional centers achieving at least the minimum performance benchmarks for each activity for which benchmarks have been developed.

**Objective ID: CERMS#3**

**Objective:** Increase the information readily available to remediate disparities in authorized services, their geographic availability, and actual service utilization, across ages and other demographic categories, residential types, regional centers, and consumer diagnoses.

**Metric:** Regional center performance on measures of service authorization, delivery, program access and program availability across demographic, diagnostic and geographic measures.

**Baseline:** Existing disparity analyses, and more refined and transparent analyses based upon data that is better-curated, will form the baseline against which progress advancing service access and equity will be measured.

**Target Result:** Equity measures will be equal across ages and other demographic categories, residential types, regional centers, and consumer diagnoses.

**Objective ID: CERMS#4**

**Objective:** Increase the ability of people with intellectual and developmental disabilities and their families to access information about their services and supports, to enable self-service functions and empower their engagement in person-centered planning and case management.

**Metric:** Satisfaction of people with intellectual and developmental disabilities and their families with the information available to them.

**Baseline:** Zero. Currently, direct access to their information is not available.

**Target Result:** At least 80 percent of people with intellectual and developmental disabilities and their families reporting through surveys that they are satisfied with their self-service access to information.

**Objective ID: CERMS#5**

**Objective:** Reduce operational frustrations that contribute to high rates of turnover in the service coordinators that people with intellectual and developmental disabilities depend upon for the authorization of services that enable their community integration and achievement of person-centered goals.

**Metric:** Reduced turnover in service coordinator workforce

**Baseline:** Regional center annual reports and National Core Indicator survey results for 2020, 2021 and 2022 will establish the baseline.

**Target Result:** Measurable and meaningful reduction in annual turnover, and increase in longevity, of the service coordinator workforce, relative to the established baseline.

**Objective ID: UFSM#1**



**Objective:** Implement a new accounting solution that can be fully integrated with case management systems and other regional center mission-critical third-party applications, ensuring that unique individual service needs are met.

**Metric:** Number of interfaces.

**Baseline:** One interface

**Target Result:** [Three interfaces](#)

### **Objective ID: UFSM#2**

**Objective:** Implement a new billing module that allows vendors to either enter or directly upload invoices, in a standard data format, into the billing system to support the retainment of quality service providers that are needed to meet individual consumer service needs

**Metric:** Number of vendors uploading invoices.

**Baseline:** Zero vendors are able to directly upload invoice information.

**Target Result:** [Five vendors uploading invoices directly into the billing system.](#)

### **Objective ID: UFSM#3**

**Objective:** Create report of users accessing confidential individual financial information.

**Metric:** User IDs accessing consumer financial accounting information.

**Baseline:** User access reports are not available.

**Target Result:** [User access ad-hoc reports as needed for system administrators.](#)

## **1.8 Project Management**

### **1. Project Management Risk Score: 1.3**

(Attach a completed [Statewide Information Management Manual \(SIMM\) Section 45 Appendix A Project Management Risk Assessment Template](#) to the email submission.)

### **2. Project Approval Lifecycle Completion and Project Execution Capacity Assessment**

Does the proposal development or project execution anticipate sharing resources (state staff, vendors, consultants, or financial) with other priorities within the Agency/state entity (projects, PALs, or programmatic/technology workload)?

**Answer:** Yes

Does the Agency/state entity anticipate this proposal will result in the creation of new business processes or changes to existing business processes?

Answer (No, New, Existing, or Both): Both New and Existing Processes

## 1.9 Initial Complexity Assessment

### 1. Business Complexity Score: CERMS 2.4 AND UFSM 2.6

(Attach a completed [SIMM Section 45 Appendix C](#) to the email submission.)

### 2. Noncompliance Issues: (Indicate if your current operations include noncompliance issues and provide a narrative explaining how the business process is noncompliant.)

Programmatic regulations: No

HIPAA/CIIS/FTI/PII/PCI: No

Security: No

ADA: No

Other: No

Not Applicable: Yes

Noncompliance Description:

**CERMS:** The systems are not owned or maintained by DDS and non-compliance issues cannot be fully assessed at this time. New HIPAA requirements for sharing information with recipients and their advocates make it imperative that DDS establish common, professionally developed and secured solutions across all 21 RCs.

### 3. Additional Assessment Criteria

If there is an existing Privacy Threshold Assessment/Privacy Information Assessment, include it as an attachment to your email submission.

How many locations and total users is the project anticipated to affect?

Number of locations:

**CERMS** will be used by 450,000 consumers, their families, caregivers and service providers, regional centers, the Department, researchers, tribes, the Legislature, and the public. Services to people with intellectual and developmental services must be delivered effectively, efficiently, accountably, and transparently, and the CERMS will be designed to enable those accomplishments.

**UFSM** primary users are business program accounting staff at the twenty-one, private non-profit community based regional centers located throughout the State. DDS Headquarters staff also utilize UFS information.

Estimated Number of Transactions/Business Events (per cycle): SANDIS Case Management existing system contains approximately 30,000 files with a volume of 255GB, UFS Financial Management existing system contains approximately 20,000 files with a volume of 260GB, and

the electronic billing (eBilling) Service Provider invoice management system contains approximately 1,400 files with a volume of 280GB.

Approximate number of internal end-users: Approximately 100 DDS staff using the current UFS system. DDS staff are not end-users SANDIS.

Approximate number of external end-users: Approximately 2,500 regional center staff using the current SANDIS, UFS, and eBilling systems combined and approximately 38,000 service providers using the current eBilling system. The Department contracts with 21 regional centers, employing thousands of people to serve hundreds of thousands of California residents. Information about each regional center, its territory, and service capacity, are available here: [Regional Center Listings - CA Department of Developmental Services](#).

## 1.10 Funding

### Planning

1. Does the Agency/state entity anticipate requesting additional resources through a budget action to **complete planning** through the project approval lifecycle framework? Yes

If Yes, when will a budget action be submitted to your Agency/DOF for planning dollars?

8/31/2021

2. Please provide the Funding Source(s) and dates funds for planning will be made available:

American Rescue Plan Act (ARPA) - FY 2022/23, FY 2023/24

Planning Budget Change Proposals - FY 2022/23, FY 2023/24, FY 2024/25, FY 2025/26

Centers for Medicare and Medicaid Services (CMS) – FY 2023/24, FY 2024/25, FY 2025/26

### Project Implementation Funding

1. Has the funding source(s) been identified for **project implementation**? Yes

If known, please provide the Funding Source(s) and dates funds for implementation will be made available:

Implementation Budget Change Proposals – FY 2025/26, FY 2026/27, FY 2027/28, FY 2028/29

Centers for Medicare and Medicaid Services (CMS) - FY 2025/26, FY 2026/27, FY 2027/28, FY 2028/29

Will a budget action be submitted to your Agency/DOF? Yes

If “Yes” is selected, specify when this BCP will be submitted: BCPs submitted for Planning for FY23/24 and plan to submit for Planning funding for FY24/25. Will submit BCP for Project (Implementation) funding for FY25/26.

2. Please provide a rough order of magnitude (ROM) estimate as to the total cost of the project:  
Greater than \$100 Million

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

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

**When ready, submit Stage 1 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: 12/20/2023

Form Received Date: 12/20/2023

Form Accepted Date: 12/20/2023

Form Status: Completed

Form Status Date: 12/20/2023

Form Disposition: Approved

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

Form Disposition Date: 12/20/2023

Department of Technology Project Number (0000-000): 4300-064